



SAFE FUTURES HUB

Building Safe Futures

Solutions to end childhood
sexual violence

Evidence Review



Evidence from low- and
middle-income countries
on childhood sexual
violence prevention



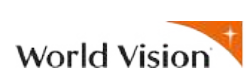
Together
for girls
STRENGTH IN NUMBERS



WeProtect
GLOBAL ALLIANCE

This review provides a roadmap to address childhood sexual violence. Now isn't the time for incremental change, it's the time for bold and decisive action.

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About Safe Futures Hub

Solutions to end childhood sexual violence

The Safe Futures Hub, co-led by the Sexual Violence Research Initiative, Together for Girls, and the WeProtect Global Alliance, is set to transform the global response to ending childhood sexual violence. Through its work, the Hub will create an open space for accessing, generating, and implementing solutions to prevent childhood sexual violence. Safe Futures brings together advocates, strategists, policymakers, frontline workers, and youth voices from around the world, all working toward a safer future for children.

Safe Futures is designed to meaningfully include underrepresented perspectives that have often been excluded in the past. Supported by Oak Foundation, the Hub collaborates with partners to address the

urgent need for increased collaboration, innovation, and diversity in combating this complex and horrific issue.

Safe Futures recognizes the profound impact of leveraging multiple forms of knowledge, including firsthand experiences from the field, lived experiences, and academic research, and administrative data. This dynamic fusion of knowledge serves as a catalyst for generating new insights, fostering discussions, and igniting actionable solutions.

Collectively, Safe Futures Hub is reshaping the future, striving to create a world where every child is protected from the threat of sexual violence.

The work of Safe Futures Hub is built around three key pillars:

1

Redefining knowledge

The Hub is dedicated to broadening the understanding of childhood sexual violence by incorporating diverse perspectives, including those from marginalized communities. This pillar focuses on challenging traditional narratives and integrating varied sources of knowledge to create a more comprehensive and inclusive understanding of what works to prevent sexual violence against children.

2

Mobilizing knowledge

The Hub emphasizes the active dissemination and application of knowledge to drive change. By translating research into practical tools, guidelines, and policies, the Hub ensures that valuable insights reach those who can implement them, including policymakers, practitioners, and community leaders. This pillar aims to bridge the gap between knowledge and action.

3

Building knowledge

The Hub invests in generating new research and insights into childhood sexual violence, particularly in underexplored areas and contexts. By supporting and advocating for innovative studies and data collection efforts, the Hub builds a robust foundation of evidence that informs future interventions and strategies.

Taking action

Reading this report may cause distress or bring awareness to a situation involving child abuse or exploitation. If you or someone you know needs help due to experiencing child sexual violence, is feeling distressed, or is worried about potentially harming a child in some way, please consider accessing the following resources:

Helpline in your area: <https://childhelplineinternational.org/helplines/>;

Help in your country through the Brave Movement website: <https://www.bravemovement.org/get-help/>;

Trauma-informed safety and healing resources: <https://www.bravemovement.org/healing-and-safety-toolkit/>; or

Self-help resources like Stop It Now, <https://www.stopitnow.org.uk/helpline/>, which includes online resources for individuals concerned about their thoughts and behaviors toward children.



If you encounter harmful technology-facilitated content involving a child, such as online child sexual abuse material, please report it to one of the following:

National Center for Missing & Exploited Children, which is US-based but receives and responds to reports globally: <https://www.missingkids.org/gethelpnow/cybertipline/>;

INHOPE, a global hotline for reporting online child sexual abuse material you suspect may be illegal. Scroll down on this website, <https://www.inhope.org/EN>, to “Find your hotline”. Here you can enter the name of your country to find a hotline in your location; or

Internet Watch Foundation, where you can report suspected online child sexual abuse images or videos spotted anywhere globally: <https://www.iwf.org.uk/en/uk-report/>.



We know we have more to learn. But we also know we have enough evidence to act now for millions of children.



Meanings of icons in the report

Icons have been placed in the margins of this report to highlight key points and help you quickly find content that is relevant to your work:



Crisis settings

The program has been implemented in humanitarian settings or sites of forced displacement.



Children with disabilities

The program has been implemented with children with disabilities.



Online

The program addresses online or technology-facilitated childhood sexual violence.

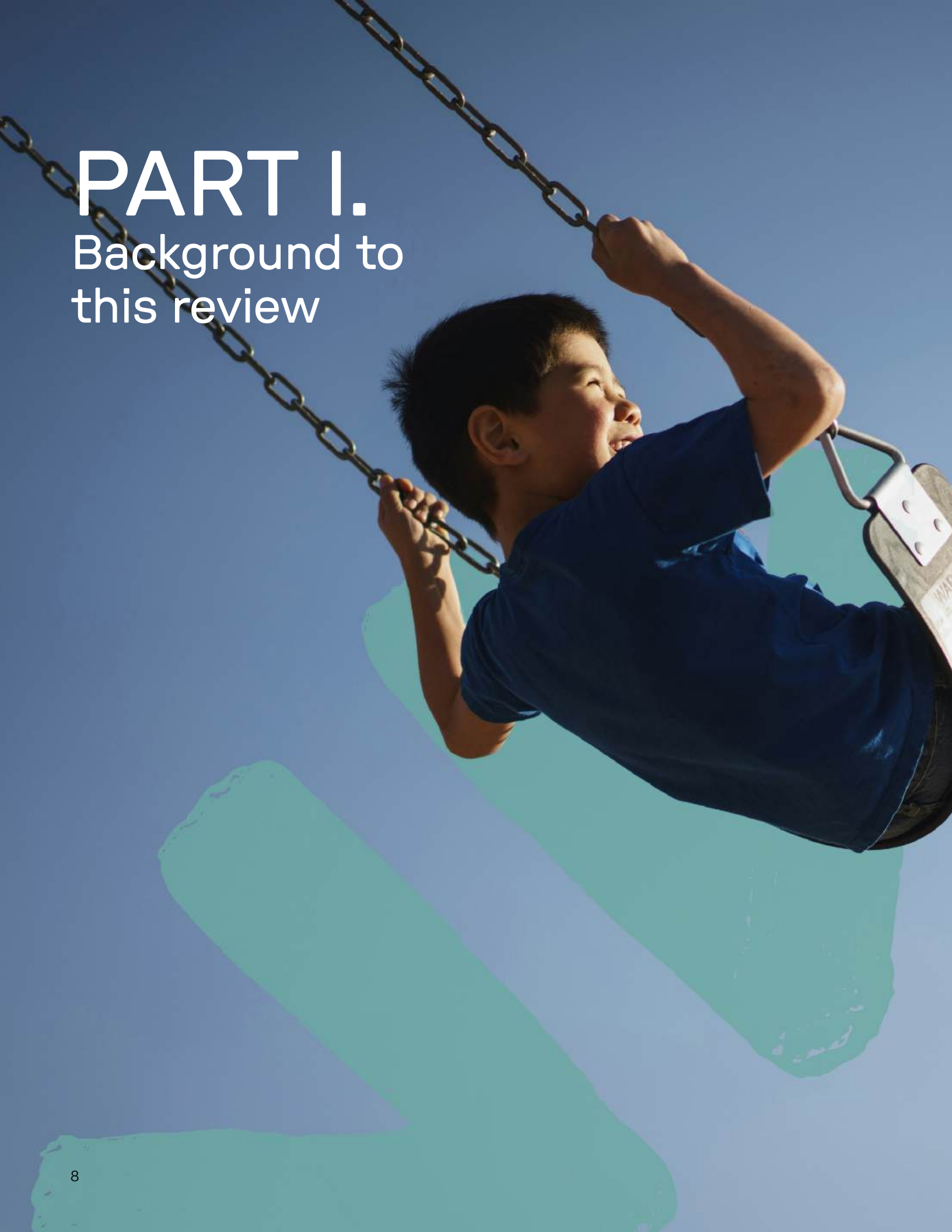
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Safe Futures Hub. (2024). Building Safe Futures: Solutions to end childhood sexual violence. Evidence from low- and middle-income countries on childhood sexual violence prevention. Sexual Violence Research Initiative, Together for Girls, WeProtect Global Alliance. www.safefutureshub.org

Access additional resources at safefutureshub.org.



PART I.

Background to
this review



The stakes are high, and the time for action is now. Let us build safe futures for our children — futures where they are free to be just that: children.



Introduction

Every child deserves to grow up with dignity, free from fear, and with their dreams unshattered. Yet for many children around the world, this is not the reality.

Sexual violence against children — children being anyone under the age of 18 — continues to shatter countless young lives, leaving scars that last a lifetime.¹ It is a hidden crisis that cuts across all boundaries — geographical, cultural, and socioeconomic.² It affects children of all backgrounds, diverse gender identities and sexual orientations, and all ages, with a devastating impact on the children, their families, society, and future generations.³

The global community has a shared responsibility to protect our youngest and most vulnerable from harm. This report sets out evidence that can guide our actions to protect children from sexual violence. We can all play a part in creating a tomorrow where there is no place for sexual violence, where we use what we have learned to build safe futures for our children, and where children are free to be just that: children.

What is the prevention of childhood sexual violence?

According to the International Classification of Violence Against Children, sexual violence against children is “any deliberate, unwanted and non-essential act of a sexual nature, either completed or attempted, that is perpetrated against a child, including for exploitative purposes, and that results in or has a high likelihood of resulting in injury, pain or psychological suffering.” This definition encompasses acts committed by various perpetrators (including family members, peers, intimate partners, neighbors, religious leaders, or strangers) and includes four subcategories: rape, sexual assault, non-contact sexual violence, and other acts of sexual violence against a child. Examples include physically forced rape; pressured

or coerced rape; drug- and/or alcohol-facilitated rape; attempted rape; unwanted groping, fondling, or other touching; and technology-facilitated sexual violence. Some forms of harm to children that some actors may consider to be sexual violence – for example child marriage – are not covered in this report due to the specific scope outlined in the methodology chapter.

Throughout this report, we use the terms “childhood sexual violence” or “sexual violence against children.” However, the studies reviewed may use the same language as us to mean something different, or they may use different terms to describe similar forms of violence against children. When discussing other works, we use the terminology employed by those studies, placed in inverted commas.

Whilst all children are at risk of sexual violence, multiple, overlaying, and intersecting factors can affect the level and form of risk of sexual violence victimization. For example, risk changes throughout the life course of a child. Younger children are most likely to experience sexual violence within the home, perpetrated by a household or family member, while older children and adolescents are exposed to risks outside the home from those in positions of trust.⁴

Gender inequality, harmful gender norms and patriarchy are key drivers of violence,⁵ and thus, sex and gender identity are also pivotal to risk. For example, most perpetrators of sexual violence against children are male.⁶ Whilst the prevalence of sexual violence is higher among girls,⁷ there is growing evidence of boys’ victimization across settings globally.⁸

Children with disabilities are at higher risk of sexual violence victimization than people without disabilities,⁹ and some studies have shown that those with sensory impairments face a heightened risk of sexual victimization.¹⁰



Black, Indigenous children of color and/or children from marginalized or oppressed ethnic groups or castes¹¹ and children of diverse sexual orientation, gender identity or expression, and/or sex characteristics (SOGIESC),¹² face heightened, specific and intersecting risks of sexual violence caused by societal discrimination. Children who are displaced also face specific risk.¹³

Childhood sexual violence can have profound, negative impacts on children's physical and mental health,¹⁴ educational attainment,¹⁵ and financial security in adulthood.¹⁶ It can also affect loved ones as secondary victims.¹⁷ These consequences are felt immediately and into the medium term, continuing into adulthood¹⁸ and potentially affecting future generations.¹⁹

However, change is possible. There are proven, evidence-based solutions to prevent and end childhood sexual violence. The **prevention of childhood sexual violence** can be broken down into three main areas of work:²⁰

- **Primary prevention** stops an incident of childhood sexual violence from happening by addressing the root causes of or strengthening protective factors against childhood sexual violence.
- **Secondary prevention** includes efforts to protect at-risk children and prevent recurrence (revictimization) or reoffending by perpetrators.
- **Tertiary prevention** includes measures to mitigate the harmful consequences of sexual violence, emphasizing the importance of both prevention and response.

It is important to consider prevention within a survivor-centered framework of prevention, healing, and justice. For example, the global Brave Movement developed a framework based on multiple global consultations with survivors and/or victims²¹ in which:

- **prevention** aims to end violence by stopping harm before it occurs, addressing root causes, and strengthening protective factors;
- **healing** focuses on helping survivors and/or victims recover and regain well-being through a comprehensive, community-wide, and multisectoral approach; and

- **justice** upholds survivors' and/or victims' fundamental rights, including equal legal protection and access to effective remedies and recognition of society's duty to support survivors and/or victims and their communities.²²

Why is this evidence review needed now?

The global crisis of childhood sexual violence demands an urgent response using evidence-based strategies. Although there are still significant gaps in data and research, more studies are providing insights into how to prevent violence and support healing and justice for survivors and/or victims. The evidence landscape for preventing childhood sexual violence is transforming: Networks and consortiums have been established, new research has emerged, and key resources have been published.²³ As research continues to evolve, earlier reviews are quickly becoming outdated, highlighting the need for this updated evidence review. By bringing together the latest findings, this review aims to offer clear guidance on effective types of interventions, ensuring that the strategies we propose remain relevant.

Childhood sexual violence is taking on new and evolving forms, and it is affected by the evolution of technology and the online world.²⁴ This includes the online grooming of children for the purpose of sexual abuse and exploitation; live streaming of the sexual abuse of children over the internet; distribution of child sexual abuse content;²⁵ and use of artificial intelligence to generate child sexual abuse imagery.²⁶ Additionally, ongoing globalization is transforming economies, political regimes, population flows, and cultures, affecting gender and power relations²⁷ and creating new risks for those under 18.²⁸

There is also an increasing reflection on the diversity of survivors and/or victims who experience childhood sexual violence²⁹ and how intersecting identities may augment risks.³⁰ Data is also beginning to provide more insights into children who may display harmful or problematic sexual behavior, including evidence that indicates how to work with and support these children.³¹

Notably, the contexts in which childhood sexual violence is happening and programs are being implemented are influenced by conflict, geo-climatic crises, forced displacement, disease outbreaks, and/



or political crisis.³² A record 400 million children were living in conflict-affected settings in 2023.³³ In some regions, new political regimes have brought in policies and ideologies that have resulted in an erosion of or backlash against children's rights, which has had a disproportionate negative impact on some of the most marginalized groups of children.³⁴

Additionally, infectious disease outbreaks and efforts to control their spread have increased the risks of gender-based violence,³⁵ restricted access to impacted children, and shifted patterns in reporting.³⁶ The #MeToo and #AidToo movements have also altered how disclosures of childhood sexual violence are made and received, prompting shifts in organizational policies and practices.³⁷


What is the purpose of this evidence review?

This evidence review is the first contribution of the Safe Futures Hub: Solutions to End Childhood Sexual Violence, an initiative of the Sexual Violence Research Initiative, Together for Girls, and the WeProtect Global Alliance. It aims to guide investments; influence legislation, policy, and strategy development; and inform program implementation to reduce the prevalence and impact of childhood sexual violence. While this report is intended for governments, decision-makers, practitioners, advocates, funders, development partners, and researchers, we recognize that each group has unique needs and will use the information differently.

The report provides a user-friendly synthesis of recent evidence, with a focus on low- and middle-income countries; highlights programs from diverse global contexts including humanitarian crisis and refugee settings; and identifies gaps in data and evidence. Additionally, it serves as the foundation for the [Safe Futures Hub Living Systematic Review](#), a dynamic resource that will regularly update stakeholders with the latest evidence on effective types of interventions.

This systematic review synthesizes the evidence from 2019 to 2024 on what works to end childhood sexual violence, drawing on extensive published evidence and expert knowledge from civil society groups, practitioners, academics, and policymakers. It builds on the approach established in the 2019 Together for

Girls report [What Works to Prevent Sexual Violence Against Children: Evidence Review](#),³⁸ and it focuses on key areas where there are ongoing and significant gaps, including evidence:

- from low- and middle-income countries, including those experiencing humanitarian crises and infectious disease outbreaks;
- on addressing technology-facilitated child sexual violence; and
- focused on children and adolescents who are or identify as of diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC); who have a range of disabilities ; who have different racial and ethnic identities; who are from disparate backgrounds; and who have varied identities and individual-level characteristics.

We focus on low- and middle-income countries and countries affected by humanitarian or refugee crisis. This is because children in these settings often face a heightened risk of childhood sexual violence due to factors such as economic instability, limited resources, and weaker institutional frameworks for protection. Many of these countries also lack comprehensive support systems and face significant barriers to implementing effective prevention and response strategies. By concentrating on low- and middle-income countries, we aim to address these gaps, identify programs tailored to these countries' unique socioeconomic and cultural contexts, and ensure that solutions are inclusive and impactful. Prioritizing low- and middle-income countries helps to build a more equitable global approach to ending childhood sexual violence, ensuring that no child is left unprotected regardless of where they live.

This evidence review is aligned with the 2030 Sustainable Development Goals (SDGs). Addressing childhood sexual violence is directly linked to SDG 16.2 ("end abuse, exploitation, trafficking, and all forms of violence against and torture of children") and SDG 5.2 ("eliminate all forms of violence against all women and girls in public and private spheres, including trafficking and sexual and other types of exploitation"). Preventing and addressing violence against children is also key to achieving many of the other SDGs.

The use of the INSPIRE Framework to structure this report

This evidence review is structured around the seven strategies and two cross-cutting activities of the INSPIRE framework, designed to end violence against children. This structured approach helps to comprehensively address the various facets of childhood sexual violence prevention and response.

INSPIRE

Seven strategies for ending violence against children



1 | Implementation and enforcement of laws



2 | Norms and values



3 | Safe environments



4 | Parent and caregiver support



5 | Income and economic strengthening



6 | Response and support services



7 | Education and life skills

The seven strategies are:

1 | Implementation and enforcement of laws

Establishing and enforcing laws to protect children from sexual violence and ensure justice for survivors;

2 | Norms and values

Promoting positive social norms and values that discourage violence and support gender equality and respect for children's rights;

3 | Safe environments

Creating safer physical and online environments where children can live, learn, and play without fear of violence;

4 | Parent and caregiver support

Providing parents and caregivers with the skills and resources they need to care for children in a nurturing and protective manner;

5 | Income and economic strengthening

Enhancing family income and economic opportunities to reduce financial stressors that can lead to violence and exploitation;

6 | Response and support services

Ensuring that effective response and support services are available to survivors of violence, including healthcare, legal, and psychosocial support; and

7 | Education and life skills

Delivering education and life skills programs that empower children and adolescents to recognize, resist, and report violence.





The two cross-cutting activities are:

- **multisectoral actions and coordination:** facilitating cooperation and collaboration among different sectors and organizations to effectively address childhood sexual violence; and
- **monitoring and evaluation:** systematically collecting and analyzing data to measure the impact of interventions and ensure continuous improvement.

The chapter on multisectoral coordination and monitoring and evaluation does not follow the same structure. No studies were found that specifically looked at how effective efforts in either area are in preventing childhood sexual violence. Instead, this chapter draws broadly from discussions in the reviewed studies and from wider literature to identify some lessons on these cross-cutting activities.

Call to action

This evidence review identifies successful approaches, pinpoints challenges, and provides actionable recommendations to address childhood sexual violence in low- and middle-income countries, including during times of humanitarian crisis and infectious disease outbreaks.

Let us unite in the mission to implement these suggested measures. Whether you are a researcher, policymaker, practitioner, activist, community leader, social worker, or another service provider, whether a survivor, victim, or ally, we all have a role to play. The solutions are within our reach, but it will take collective effort to make them a reality. The stakes are high, and the time for action is now. Together, we can build a future where all children, everywhere, are safe from sexual violence.

This research provides an actionable roadmap to address childhood sexual violence in low- and middle-income countries and humanitarian settings.



Methodology

This evidence review aimed to identify, screen, and analyze research on childhood sexual violence prevention programs, focusing on low- and middle-income countries.

This review builds on the approach taken in 2019’s [What Works to Prevent Sexual Violence Against Children: Evidence Review](#). Annex A contains information on how this review complements other recent research covering similar subjects of enquiry .

To identify the literature, we first used relevant search terms and publication date filters to systematically identify studies in five major databases: Embase, MEDLINE, PsycInfo, PubMed, and Web of Science. Additionally, we found non-academic studies through targeted searches on Google Scholar and relevant websites like Save the Children’s Resource Centre, the review of reference lists from recently published literature, and recommended studies from experts in

the field. Using the set of inclusion and exclusion criteria described in Table 1, 72 studies met the inclusion criteria. These studies were categorized according to the INSPIRE strategies (see Table 2) and clustered into thematic intervention types, based on the primary focus of each evaluated program. These groups of studies within each “intervention type” were classified for effectiveness. Each INSPIRE strategy chapter set out below provides a summary of findings from the reviewed studies, in a section entitled “Evidence from reviewed studies”.

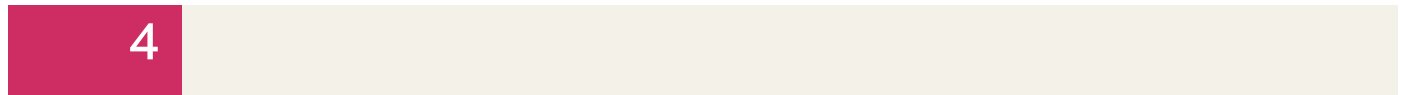
Literature that did not meet our inclusion criteria — for example, some reports were published before 2018 or were conducted in high-income countries — but did illustrate an important point relevant for the review, was not discarded. Essential findings from these materials are captured in each INSPIRE strategy chapter in a section titled “Additional insights from wider literature”. Since these materials fell outside of the screening criteria, they were not used to assess the efficacy of intervention types.

Table 1. Summary of inclusion and exclusion criteria

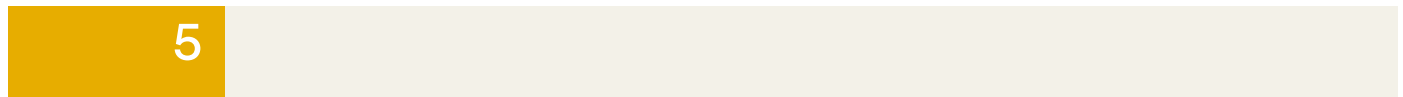
Inclusion criteria	Exclusion criteria
<ul style="list-style-type: none"> • English-language publications • Published between January 2018 and June 2024 • Focus on low- and middle-income countries and/or humanitarian contexts • Quantitative studies such as randomized controlled trials, quasi-experimental studies, and pre-post studies • Qualitative and mixed methods studies such as evaluations, assessments, and case studies with a focus on outcome or impact • Program studies with a discernible focus on preventing childhood sexual violence • Systematic reviews with a discernible focus on childhood sexual violence prevention programs in low- and middle-income countries and/or humanitarian contexts 	<ul style="list-style-type: none"> • Studies published in a language other than English • Studies published before 2018 • Program studies that focused on female genital mutilation and/or child marriage • Studies that did not focus on program outcomes or results • Studies that only focused on high-income countries • Studies that did not specify the prevention of childhood sexual violence as a desired outcome

Table 2. Identified studies categorized by INSPIRE strategy

Implementation and enforcement of laws



Norms and values



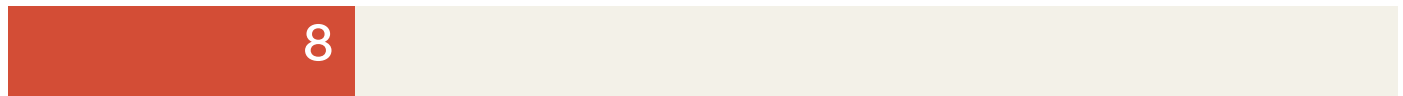
Safe environments



Parent and caregiver support



Income and economic strengthening



Response and support services



Education and life skills



Total number of studies in the evidence review
72



Intervention types were classified using a slightly modified version of the INSPIRE classification criteria used in the 2019 evidence review.³⁹ These classifications were “effective,” “promising,” “prudent,” “conflicting,” “no effect,” “harmful,” or “needs more evidence” (see Table 3).

Table 3. Classification scheme for this review

<p>Effective</p>	<p>Intervention types were classified as “effective” if they met at least one of the following criteria:</p> <ul style="list-style-type: none"> • At least two high- or moderate-quality impact studies evaluated through a randomized controlled trial and/or high-quality quasi-experimental designs found favorable, statistically significant impacts in one or more childhood sexual violence domains (e.g., child sexual abuse, intimate partner/dating violence); or • The intervention is deemed recommended based on high-quality meta-analyses or systematic reviews of findings from evaluations of multiple interventions.
<p>Promising</p>	<p>Intervention types were classified as “promising” if they met at least one of the following criteria:</p> <ul style="list-style-type: none"> • At least one high- or moderate-quality impact study using a randomized controlled trial and/or high-quality quasi-experimental designs has found favorable, statistically significant impacts in one or more childhood sexual violence domains; or • At least one high- or moderate-quality impact study using randomized controlled trial and/or high-quality quasi-experimental designs has found favorable, statistically significant impacts for reducing risks or strengthening protective factors for childhood sexual violence (e.g., positive parenting skills, increased disclosure, increased knowledge of protective behaviors).
<p>Prudent</p>	<p>Intervention types were classified as “prudent” if they met at least one of the following criteria:</p> <ul style="list-style-type: none"> • The intervention has been demonstrated by qualitative or observational studies as effective in reducing childhood sexual violence; or • Clinical experience, descriptive studies, or reports of expert committees, respected authorities, or global treaties/resolutions have determined that the intervention has been critical to the success of past work on preventing childhood sexual violence.
<p>Conflicting</p>	<p>Intervention types were classified as “conflicting” if:</p> <ul style="list-style-type: none"> • Evidence generated conflicting results in one or more childhood sexual violence domains. That is, some are found to be effective, and some are found to have no effect, or cause harm, or increase risk.
<p>No Effect</p>	<p>Intervention types were classified as “no effect” if:</p> <ul style="list-style-type: none"> • Randomized controlled trial(s) and/or quasi-experimental designs did not identify statistically significant impacts in one or more domains of childhood sexual violence.
<p>Harmful</p>	<p>Intervention types were classified as “harmful” if:</p> <ul style="list-style-type: none"> • High- or moderate-quality studies found that the intervention caused harm or increased risk to intervention participants.
<p>Needs more evidence</p>	<p>Intervention types were classified as “needs more evidence” if:</p> <ul style="list-style-type: none"> • Study designs were not of high enough quality or rigor to classify the effectiveness of the intervention type.

PART II.

Review of the evidence on
interventions to prevent
childhood sexual violence





A comprehensive, coordinated effort is key to stopping sexual violence, creating safer futures for children everywhere.



Synthesis of key findings on preventing childhood sexual violence

The following eight chapters present the findings from our systematic review of the literature. Each of the first seven chapters is dedicated to one of the INSPIRE strategies. They each contain:

- an introduction to the strategy’s role in preventing childhood sexual violence;
- evidence from the reviewed studies, beginning with a summary of their effectiveness;
- program details – name, location, date, participants, program activities, evaluation methods, and results, where they were available;

- a section that discusses additional insights from wider literature. This sets out findings from literature that fell outside of our screening criteria but was considered relevant;⁴⁰
- a description of challenges and evidence gaps; and
- analysis and lessons about what has worked to prevent childhood sexual violence.

One additional chapter summarizes insights on the cross-cutting areas of multisectoral coordination and monitoring and evaluation.

Table 4. Summary of intervention types by level of effectiveness (with INSPIRE strategy in parentheses)

Effective intervention types (when programs are well-designed and implemented)	INSPIRE strategies
Adolescent development clubs	Safe environments
Skills development for preschool children and their parents in preventing childhood sexual violence	Parent and caregiver support
Parent skills for preventing childhood sexual violence in pre-adolescents and adolescents	Parent and caregiver support
Multi-component (“cash-plus”) interventions targeting women and adolescent girls	Income and economic strengthening
Broad-based prevention modules embedded in school curricula	Education and life skills
School-based self-defense interventions for sexual violence prevention	Education and life skills
Curriculum design and educator training for delivering childhood sexual violence prevention modules	Education and life skills

Promising intervention types (when programs are well-designed and implemented)	INSPIRE strategies
Small group interventions for children and adolescents outside of schools	Norms and values
Parent counselling approaches for preventing childhood sexual violence	Parent and caregiver support
Government-run, multi-component (“cash-plus”) interventions targeting adolescent girls and boys	Income and economic strengthening
Child- and adolescent-friendly response and support services	Response and support services

Prudent intervention types (when programs are well-designed and implemented)	INSPIRE strategies
Domestic legislation and national action plans on technology-facilitated childhood sexual violence	Implementation and enforcement of laws
Child-friendly justice responses	Implementation and enforcement of laws
International safeguarding policies and approaches	Implementation and enforcement of laws
School-based prevention interventions for children and adolescents with disabilities	Education and life skills

Conflicting intervention types	INSPIRE strategies
Child-friendly safe spaces in humanitarian settings	Safe environments
School-based interventions to prevent harmful or problematic sexual behavior by children and adolescents	Education and life skills

No effect intervention types
No groups of studies under one “intervention type” were classed as “no effect” ⁴¹

Harmful intervention types

No groups of studies under one intervention type were classified as harmful ⁴²

Intervention types needing more evidence	INSPIRE strategies
Stand-alone media and technology-assisted norms change campaigns	Norms and values
Sports-based interventions for the prevention of childhood sexual violence	Norms and values
Safeguarding systems to prevent childhood sexual violence in child-serving organizations	Safe environments
Savings programs	Income and economic strengthening
Recognition, screening, and reporting and disclosure of childhood sexual violence	Response and support services

NOTE: Each of the strategy chapters contains a more detailed table summarizing intervention types, effectiveness, types of studies, example program names, contexts where implemented, and program participants' age and gender.





1 | Implementation and enforcement of laws

How can the implementation and enforcement of laws prevent childhood sexual violence?

The implementation and enforcement of laws to prevent childhood sexual violence encompasses a range of actions, including:

- drafting and enacting laws that specifically address childhood sexual violence;
- establishing policies and guidelines aligned with these laws to outline proactive prevention procedures (e.g., enforcing codes of conduct, screening measures);
- training and raising awareness among law enforcement, judicial officials, healthcare providers, educators, and community members to ensure they understand these laws and apply them in a child-friendly way;
- providing the necessary tools for preventing, investigating, and responding to reported incidents of childhood sexual violence;
- ensuring there are sufficient financial and human resources dedicated to enforcing these laws; and
- continuously assessing the implementation of these laws and related actions to ensure effectiveness.

Several types of laws may contribute to reducing childhood sexual violence and mitigating its effects, including:

- international conventions and protocols on children’s rights;
- laws defining the age of sexual consent and the minimum marriage age;

• laws criminalizing physical, emotional, and sexual violence against children in all settings, including homes, schools, and public spaces;

• penalties for offenders;

• online safety regulations, including data privacy and protections;



• childhood sexual violence detection, control, and reporting protocols, including for technology companies;



• compulsory education, including comprehensive sex education;

• mandatory reporting laws;

• mandates for child-friendly justice systems and victim support services;

• repeal of statutes of limitations for childhood sexual violence;

• regulations and controls for child labor; and

• regulations and controls for interactions with children in certain sectors and spaces (e.g., food and beverage and tourism industries).

International and domestic law — including statutory and customary law — may deter would-be offenders and contribute to an environment in which childhood sexual violence is not tolerated. These laws may also enable swift and appropriate actions to reduce the harmful effects of such violence. Developing effective child-friendly response and justice systems requires substantial investment in resources, training, and tools.

Evidence from the reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective intervention types for implementation and enforcement of laws were in preventing childhood sexual violence.

- **International safeguarding policies and approaches** are considered **prudent**. Their implementation has led to improvements in case management and reduced tolerance for abuse.

Table 5. Implementation and enforcement of laws: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
International safeguarding policies and approaches	Prudent	Descriptive study or expert report (n=1)	Addressing 'Sexual Exploitation and Abuse' in the UN system	Global	May be relevant to all age groups and gender identities if appropriately worded. No disaggregation given in studies
Domestic legislation and national action plans on technology-facilitated childhood sexual violence	Prudent	Descriptive study or expert report (n=2)	National Center for Missing & Exploited Children CyberTipline, WeProtect Model National Response	Global	
Child-friendly justice responses	Prudent	Descriptive study or expert report (n=1)	Victim-friendly courts	Zimbabwe	

- **Domestic legislation and national action plans on technology-facilitated childhood sexual violence** are considered **prudent** when accompanied by well-resourced, trained professionals and well-functioning child protection services. These measures have led to increased reporting, rapid removal of harmful content, and improved case handling by law enforcement.

- **Child-friendly justice responses** are considered **prudent**, increasing awareness and improving the reporting of cases.

International safeguarding policies and approaches: Prudent

This section highlights key international safeguarding policies, such as the United Nations (UN) Secretary-General’s 2003 bulletin on special measures for protection from sexual exploitation and sexual abuse (ST/SGB/2003/13). Also see the “Safe environments” chapter for more on safeguarding in child-serving organizations.

Addressing sexual exploitation and abuse in the United Nations system

- **Program:** Since the Secretary-General’s 2003

bulletin (ST/SGB/2003/13), the UN has worked to raise awareness and strengthen the capacity to prevent and respond to sexual violence, especially against women and children, by UN and partner staff.

- **Evaluation:** A 2021 evaluation included seven country office visits, 263 semi-structured interviews, 53 focus group discussions, and a review of existing survey data.

- **Results:** The evaluation noted some improvements in prevention efforts, which may be attributed to strengthened policies. However, case processing was slow, with sanctions imposed in only 85 percent of substantiated cases and many cases left pending.⁴³

Domestic legislation and national action plans on technology-facilitated childhood sexual violence: Prudent

Until recently, technology-facilitated childhood sexual violence was relatively unmonitored and unregulated.⁴⁴ However, significant efforts have been made globally to enact legislation combating child sexual abuse material online: while only 27 countries had sufficient legislation in 2006, 138 did in 2023. As of 2023,⁴⁵ the WeProtect Global Alliance identified nine countries, one US state, and one



economic union that have implemented regulations to ensure children's online safety.⁴⁶

WeProtect Model National Response⁴⁷

- **Program:** The WeProtect Model National Response guides coordinated national efforts to combat online child sexual exploitation and abuse, emphasizing high-level government commitment, effective criminal justice processes, and robust victim support services. It brings together national criminal justice systems, front-line social services, the education sector, and the private sector. These efforts are structured across six domains: policy and governance, criminal justice, victim support, societal prevention, industry engagement, and communication and media.

- **Evaluation:** The initiative was evaluated through a survey sent to 29 United Nations Children's Fund (UNICEF) country offices, four country visits, and a desk review.

- **Results:** The Model National Response helped strengthen policies and governance, improved case handling within the justice system, increased the number of reporting and support hotlines, and initiated more education and awareness programs. Challenges included private sector participation, weak governance bodies, limited political will to address online child sexual exploitation and abuse, and possible entrenched an existing artificial divide between online and offline child sexual exploitation and abuse.



National Center for Missing & Exploited Children CyberTipline⁴⁸

- **Program:** The US-based organization supports law enforcement in 160 countries and territories by hosting the CyberTipline. The CyberTipline is a mechanism that receives, processes, and escalates reports of multiple forms of online child sexual exploitation.

- **Evaluation:** No details were available.

- **Results:** In 2023, the CyberTipline processed over 36 million reports of suspected child sexual exploitation and referred 63,892 cases to law enforcement, according to the National Center for Missing & Exploited Children. More than 90 percent of reports involved the uploading of child sexual abuse materials by users outside the United States, with flagged content typically removed in just over 2.6 days.

Child-friendly justice responses: Prudent

Child-friendly justice responses are relevant to all children in contact with the legal system, as well as witnesses, family members, and alleged offenders. These services aim to reduce the harm caused by past incidents, prevent future harm from occurring, and facilitate access to justice and healing.

Victim-friendly courts in Zimbabwe⁴⁹

- **Program:** The victim-friendly courts provide services, carry out awareness-raising, and deliver staff training for child-friendly support to victims of intrafamilial child sexual abuse.

- **Evaluation:** The intervention was evaluated using semi-structured interviews with 40 professionals, children, caregivers, and community child protection committee members.

- **Results:** The evaluation found a significant increase in awareness and case reporting of intrafamilial child sexual abuse, although challenges such as legal gaps, inconsistent understanding of laws, and resource limitations hindered full implementation. Overall, the presence of victim-friendly courts — alongside an appropriate legal framework — improved the management of intrafamilial child sexual abuse cases.

“Only a few of the policies are aligned to international child rights instruments.”

“Most of these policies do not have corresponding laws for effective enforcement.”

“Some people are getting away with child sexual abuse because they take advantage of our laws and policies which do not speak the same language.”

“When many people report, it deters would-be perpetrators as they know that, if they are caught, the long arm of the law will definitely descend on them.”

— Professionals from victim-friendly courts in Zimbabwe⁵⁰

Additional insights from wider literature

International and regional treaties that prohibit child sexual abuse

The UN Convention on the Rights of the Child is one of the most widely ratified human rights treaties in the world⁵¹, and one of the most important for codifying children’s rights, including protection from sexual abuse. The convention specifically urges States to protect children from sexual exploitation and sexual abuse (Article 34); abduction, sale, or trafficking (Article 35); and child prostitution and child pornography (optional protocol).⁵² The 2022 Out of the Shadows Index found that 96 percent of the listed countries that had ratified the optional protocol had criminalized the production of sexually explicit material containing a child.⁵³

Other global commitments include the Protocol to Prevent, Suppress, and Punish Trafficking in Persons, especially Women and Children (Palermo Protocol), the three World Congresses on the sexual exploitation of children, and UN Security Council resolutions⁵⁴ relating to sexual violence in conflict⁵⁵ and grave violations against children (one of which is sexual violence) in conflict settings.⁵⁶

Regional laws and charters, in Europe and Africa.

The Council of Europe Convention on Protection of Children against Sexual Exploitation and Sexual Abuse,⁵⁷ the Council of Europe Convention on Cybercrime, 2004,⁵⁸ and the **African Charter on the Rights and Welfare of the Child**⁵⁹—are also influential, but none of the screened literature assessed the impact of these instruments.

National legal and policy frameworks

Various national laws not covered in the reviewed studies may deter childhood sexual violence, establish the legal framework for prosecuting offenders and providing justice to victims, uphold children’s rights to recovery and reintegration, increase reporting, and support other prevention strategies.

Kenya’s National Legal and Policy Framework.

A qualitative study using Violence Against Children and Youth Surveys (VACS) in Kenya identified key factors in reducing the prevalence of violence against children, including a strengthened legal framework. The 2010 National Children’s Policy provided a

foundational policy framework for safeguarding children, while the 2016 amendment of the Sexual Offences Act expanded protections for child victims. This included broadening the definition of sexual violence crimes to include childhood sexual violence, banning child sexual abuse material, and introducing stricter penalties for offenders. Additionally, specialized sexual offense⁶⁰ challenges in disseminating and implementing these policies, along with capacity and financial resource limitations, continue to hinder progress.⁶¹

However, social norms and legal frameworks may be misaligned. For example, although Indonesia has enacted several legal actions to protect child survivors and/or victims of sexual violence, including Act No. 17 of 2016, their effectiveness is hindered by inconsistent implementation and harmful family and community actions, such as proposing marriage to alleged perpetrators.⁶²

Mandatory reporting. An overall objective of mandatory reporting legislation or policy is to require actions that assist victims and avoid any harm their omission may cause.⁶³ However, mandatory reporting may overburden child-protection services and remove decision-making control from children and parents.⁶⁴ The obligation to report should be accompanied by education and awareness raising, protection for those who report, and strengthened response services.⁶⁵

Age of consent. A legally set minimum age of consent may protect children from sexual violence, but the age of consent differs between countries and sometimes between girls and boys within a country.⁶⁶ While establishing a legal age of consent is crucial, an analysis of Kenyan law indicates that care must be taken to avoid criminalizing consensual sexual activities between two adolescents. "The South African Constitutional Court observed that it is developmentally normal for adolescents to be sexual and that it is unwarranted to punish them once they explore their sexuality."⁶⁷

Statute of limitations. Evidence from 2019's What Works to Prevent Sexual Violence Against Children: Evidence Review shows that eliminating or extending the statute of limitations for sexual violence crimes can lead to increased reporting and convictions.⁶⁸

Criminalization of child sexual grooming. Child sexual grooming is a manipulative process through which an adult gains access to a child, as a means to engage in 'childhood sexual abuse'. Some countries have criminalized child sexual grooming as a standalone crime. In the US it has been found that clearer definitions and measures of grooming, and indicators of intent were needed to enable prosecution.⁶⁹

Legislation controlling consumption of alcohol and drugs. Alcohol and drug use may be associated with childhood sexual violence perpetration and victimization, so legislation controlling consumption is often proposed as a prevention strategy. Fazel et al. (2024) found that legislative changes around alcohol price and availability had a small effect on violence levels, though not specifically on childhood sexual violence.⁷⁰

Child-friendly justice responses

Efforts to make justice systems more child-friendly have been tested in settings other than Zimbabwe.

A child-friendly justice system in Moldova.⁷¹ Nine key informant interviews and desk research showed that activities designed to make the justice system more child-friendly resulted in positive actions (e.g., judges asking children how they prefer to testify and changing procedures accordingly), but existing challenges include a lack of resources, multiple interviews of victims, and confrontations with offenders.

A federal training plan on children's rights in Argentina. Public officials in Argentina undergo ongoing, mandatory training on children's rights, emphasizing good treatment, gender perspectives, and inclusion of children's voices.⁷² A child's book to help prepare children for family court hearings has also been written.⁷³

Offender management in the form of pharmacological interventions

A growing number of US states and countries are implementing chemical castration as a penalty for sex offenses.⁷⁴

Chemical castration in Colombia is proposed as a last-resort treatment for managing sexual violence against children. It aims to reduce testosterone levels, libido, and thus, the likelihood of sexual offenses. Findings indicated that chemical castration, when applied under

judicial supervision and with patients' active participation, reduced the incidence of sexual aggression, and there were signs of reduced recidivism. However, ethical considerations regarding patient autonomy, dignity, and cognitive deficits played a crucial role in determining the appropriateness of this program.⁷⁵

Restorative and transformative justice

Restorative justice offers survivors additional ways to seek acknowledgment and healing when their needs are not fully met by the formal legal system.⁷⁶ Restorative justice can take many forms; it might involve face-to-face meetings, indirect communication, or representatives on behalf of the survivor. Based on the survivor's needs and a risk assessment, these processes can occur at any time or stage of the legal process, post-sentencing, or even decades later when the child is an adult.⁷⁷ Good practice requires that each approach be carefully designed to meet the victim's needs, prioritizing their safety and healing. It is crucial to approach restorative justice in a way that avoids reinforcing patriarchal norms or relying on historical forms of dispute resolution that may be exclusionary, biased, or discriminatory.⁷⁸

Transformative justice goes a step further by not only addressing individual instances of harm but also tackling the underlying social conditions that enable such harm. Rather than merely punishing the offender, this approach encourages individuals, communities, and institutions to recognize the choices and circumstances that contributed to the harm, promoting trauma-informed actions and policies that prevent future violence and create a safer, more just society.⁷⁹

Restorative justice offers survivors acknowledgment and healing, while transformative justice addresses deeper societal conditions enabling harm.

Challenges and Evidence Gaps

Challenges

Overall, challenges in preventing childhood sexual violence through the implementation and enforcement of laws include:

- **Inconsistent or contradictory laws:** Misalignments may exist among customary, national, and international laws, which can complicate enforcement. Decentralized systems mean that national legislation and policies may not be binding at the regional level.⁸⁰
- **Insufficient resources:** Lack of resources can hinder law enforcement and legal case management by slowing down actions to reach case completion or make it challenging to pursue a legal case.⁸¹
- **Social norms:** Societal attitudes that conflict with legal reforms can hinder the enforcement of laws protecting children.⁸²
- **Discriminatory decision-making:** Racial and ethnic bias affect decisions in child protective services and the juvenile justice system. Bias impacts whether abuse claims are taken seriously and acted upon. This results in adverse physical and mental health outcomes for Black, Indigenous children of color and other marginalized ethnic groups or castes.⁸³
- **Gender-specific or gender-exclusive language:** Gender-biased language in laws can reduce protections for some gender identities. For example, while 93 percent of countries criminalize penetration between adults and girls, only 82 percent do so for boys.⁸⁴ The 1949 Geneva Conventions focus on the rape of women,⁸⁵ leaving children and people of other gender identities unprotected for decades.
- **Evolving technology:** Legal systems struggle to keep up with rapidly evolving technology-facilitated childhood sexual violence. For example, while Kenya has several related acts (the Computer Misuse Act and Cybercrimes Act of 2018 and the Sexual Offences Act of 2006, revised in 2019), it has no direct laws against online grooming for sexual purposes or sexual extortion or live-streaming of abuse.⁸⁶



- **Balancing the child’s best interests:** The complex issue of balancing the best interests of a child while also following judicial process lacks clear guidance.
- **Potential harm from legislation:** Certain forms of legislation may cause unintended harm. For example, legal frameworks that create societal stigma and individual shame around sexual attraction to children may, in fact, increase the risk of non-offending individuals with a sexual interest in children committing a sexual offense.⁸⁷ Another example is when some countries pass discriminatory laws that criminalize homosexuality. These can deny justice, access to essential services and healing to LGBTIQ+ survivors and/or victims of sexual violence, including children. This can expose them to further violence and even criminalize their abuse.⁸⁸

Evidence gaps

These challenges highlight significant gaps in understanding how laws can effectively prevent childhood sexual violence. Measuring the impact of laws is difficult, resulting in limited evidence. The reviewed literature was scarce on the management of adult offenders and did not discuss considerations for managing alleged child and adolescent offenders in low- or middle-income countries. The effectiveness and impacts of using restorative justice mechanisms at the community level are also underexplored.

Insights and lessons for the implementation and enforcement of laws

The implementation and enforcement of laws is crucial for preventing childhood sexual violence, but the measurable impact is often undermined by inadequate enforcement, lack of monitoring, insufficient documentation, inconsistent data collection across countries, and the complexity of measuring social change.

International safeguarding policies and approaches are considered **prudent**. While case reporting has been slow, their implementation has led to improvements in case management and reduced tolerance for abuse within the UN system.⁹⁰ However, traditional media reports and social media campaigns have also raised public and donor awareness of the fact that incidents continue to occur in the aid sector, including among

UN agencies and partner organizations.⁹¹ This may also have contributed to the reduced tolerance for abuse by humanitarian workers.⁹²

Domestic legislation and national action plans on technology-facilitated childhood sexual violence are considered **prudent**. Diverse experiences from various contexts underscore the need for context-specific strategies to roll out and enforce legislation. Measures ensuring that legal framework implementation includes well-trained professionals and access to child-focused services, as illustrated by the Model National Response, have led to increased reporting and improved case handling by law enforcement.⁹³

Child-friendly justice responses are considered **prudent**. Despite the challenges of implementing victim-friendly courts in Zimbabwe, they increased awareness and improved the reporting of cases.⁹⁴

Lessons learned

- **Well-resourced and trained professionals, as well as well-functioning child protection services,** must accompany a strong legal framework to ensure that legislation translates into tangible improvements in child protection.

- **Coordination of legislation must happen at the international level** to create context-specific legislation that addresses the real-life effects of online sexual abuse.⁹⁵

- **Better-quality, comparable country-level data must be collected** to allow for monitoring the implementation of international, regional, and national legal instruments generally and the UN Convention on the Rights of the Child specifically.⁹⁶

- **The fight against childhood sexual violence requires a comprehensive approach** that integrates legislation with enforcement, community engagement, and international cooperation. A strong legal framework — implemented alongside a strong child protection system — is considered a critical foundation for prevention.⁹⁷



2 | Norms and values

How can norms and values interventions prevent childhood sexual violence?

Norms are collectively held beliefs about what others in a group or community actually do (what is typical) or should do (what is appropriate).⁹⁸ Social norms are behavioral rules, expectations, and perceptions about people that are, for the most part, shared within a group or society. Gender norms reflect differences in expectations or assigned roles based on an individual's perceived gender. Values are general standards of what is or is not "good," important, and worthwhile.⁹⁹ These norms and values form the basis of societal expectations and behaviors.



Norms and values may play an important role in preventing childhood sexual violence by influencing the attitudes and behaviors of all actors within a given context. Norms and values are often founded upon structural inequalities, which shape attitudes and behaviors around children, gender roles, race, disability, and the acceptability of violence.¹⁰⁰ Harmful norms, such as discriminatory attitudes and victim-blaming, can encourage sexual violence, while positive norms, such as gender equality and children being able to speak out, offer protection. Norms change interventions use the following strategies to target social norms:

- **challenge attitudes and behaviors** that perpetuate violence and discrimination to reduce the risk of sexual violence;
- **reinforce attitudes and behaviors** that protect children from sexual violence; and
- **break down taboos** to promote reporting of incidents and help-seeking behavior.

Evidence from the reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective intervention types for addressing norms and values were in preventing childhood sexual violence.

- **Small group interventions for children and adolescents outside of schools** are considered **promising**, especially when facilitated by trained professionals and involving both boys and girls. These programs have shown positive changes in harmful attitudes but have not significantly impacted behaviors or reduced incidents of sexual violence.
- **Stand-alone media and technology-assisted norms change campaigns** to prevent childhood sexual violence are gaining recognition for their potential impact but **more evidence is needed** to fully assess their effectiveness.
- **Sports-based interventions for the prevention of childhood sexual violence** are considered important but **more evidence is needed** to form definitive conclusions about how well they prevent childhood sexual violence.

Table 6. Norms and values: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
Small group interventions for children and adolescents outside of schools	Promising	Randomized controlled trial (n=1); Systematic review (n=1)	Growing Up Safe and Healthy (SAFE); Your Moment of Truth (YMOT)/ IMPower	Bangladesh, Sub-Saharan Africa	Age: Adolescents and young people Gender: Girls, boys, women, and men
Stand-alone media and technology-assisted norms change campaigns	Needs more evidence	Qualitative with pre-post (n=1); Pre-post (n=1)	Learning Initiative on Norms, Exploitation, and Abuse (LINEA) radio drama; HappyToto digital game	Tanzania	Age: Adolescents Gender: Girls and men
Sports-based interventions for the prevention of childhood sexual violence	Needs more evidence	Pre-post (n=1)	SKILLZ Street	South Africa	Age: 11–16 Gender: Girls

Small group interventions for children and adolescents outside of schools: Promising

Facilitated small group interventions offer a focused and intimate setting to address critical issues faced by children and adolescents. These programs can be implemented outside the school environment, either as standalone initiatives or in combination with other interventions like skills-based training.

Growing Up Safe and Healthy (SAFE), Bangladesh, 2012–2013¹⁰¹

- **Program:** The SAFE program, implemented in Dhaka, Bangladesh, in 2012–2013, included locally led community awareness campaigns, SAFE referrals, one-stop service centers, training for service providers, a national TV talk show, and 13 interactive, single-sex group sessions over 20 months on *‘intimate partner violence against women and girls’*. Participants included women and girls aged 10 to 29 and men aged 18 to 35.

- **Evaluation:** Although time constraints limited participation and caused group dropout, a cluster randomized controlled trial assessed SAFE’s

community-level effects and disaggregated data according to individual characteristics such as age, marital status, education level, and religion.

- **Results:** The program showed a consistent reduction in the risk of exposure to *‘sexual intimate partner violence’* across all age groups, though these results were not statistically significant.

Your Moment of Truth (YMOT), Kenya, 2019¹⁰²

- **Program:** YMOT was a six-week behavioral, school-based program for boys, implemented in parallel to the IMPower program for girls. YMOT focused on improving boys’ and men’s gender-equitable attitudes and increasing bystander intervention in situations of *‘gender-based violence’*. The two curricula were implemented simultaneously, with five two-hour sessions taught weekly in separate groups for girls and boys before a sixth joint session. The boys’ curriculum (YMOT) was designed to promote positive, nonviolent masculinities and to help boys identify emotions and build skills for nonviolence, seeking consent, and strategies for safe bystander intervention.

- **Evaluation:** Data was collected via 10 focus group discussions (five for boys, five for girls) of six to 11 participants each and 21 individual in-depth interviews (11 boys, 10 girls) carried out January – June 2019. The girls and boys discussed experiences of the program and shared their views on how it could be improved. Data analysis was done through thematic network analysis guided by empowerment theory.

- **Results:** Studies examining YMOT’s impact found that the program increased gender-equitable attitudes and positive bystander behavior in situations of ‘*gender-based violence*’. Skilled facilitators and interactive and relevant content were considered key to program success.

Note: You can find more programs working with children and adolescents in small groups to address norms and values elsewhere in this report:

- *most programs in the “Education and Life Skills” chapter;*
- *Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS) in Ethiopia in the “Safe Environments” chapter; and*
- *Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS) in Kenya in the “Parenting and Caregiver Support” chapter.*

Stand-alone media and technology-assisted norms change campaigns: Needs more evidence

Innovative, stand-alone media and technology-assisted approaches can educate and inform both children and adults, shifting attitudes and motivating behavioral change. These approaches may include television shows, radio dramas, visual and interactive materials, digital games, mobile application-based interactive activities, and social media campaigns.

Learning Initiative on Norms, Exploitation, and Abuse (LINEA) radio drama, Tanzania, 2021¹⁰³

- **Program:** This 2021 “edutainment” program in Tanzania focused on preventing ‘*age-disparate transactional sex*’¹⁰⁴ between girls aged 12 to 16 and men at least five to 10 years older. The seven-week program included a 39-episode radio drama and two curricula, one targeting adolescent girls and the other adult men. Participants came from 331 poor households, each of which had a family member with a disability.

- **Evaluation:** LINEA’s impact was evaluated through a longitudinal, mixed-methods study from September to December 2021. It involved in-depth interviews

with 59 individuals, including girls (both in and out of school) and their caregivers.

- **Results:** The study found the program led to increased gender-equitable attitudes among girls and women and men caregivers, motivated girls to focus on their education, and encouraged more gender-equitable community behaviors.

“I changed [after listening to the radio drama], now I want to study hard so I can reach my dreams.”

—15-year-old girl at baseline

“I have listened to the radio drama and realized that adolescent girls are supposed to be protected and be allowed to do the jobs they wish. We should not say that these are women or men jobs, a woman should do any job she wants. I have learned that a woman can do everything.”

—46-year-old male caregiver at baseline¹⁰⁵

HappyToto digital game, Tanzania, 2020¹⁰⁶

- **Program:** In 2020, 111 parents, caretakers, and 24 child experts from three Tanzanian regions participated in surveys, focus groups, and prototyping sessions. They co-designed a culturally appropriate, mobile-based educational game focused on ‘*child sexual abuse*’ prevention. It was for children under 5 and their parents/caregivers. The game included in-game resources.

- **Evaluation:** A total of 32 parents of 3- to 5-year-olds and five children aged 3 to 5 (two girls, three boys) tested the mobile app game. They then completed age-appropriate assessments. These assessments measured (i) their enjoyment of the game, (ii) pre- and post-program confidence and (iii) ability to discuss



‘child sexual abuse’ prevention education. The evaluation process also looked into game usability and cultural acceptability.

- **Results:** Parents’ confidence and ability to discuss ‘child sexual abuse’ prevention topics significantly increased after using the game.

Sports-based interventions for the prevention of childhood sexual violence: Needs more evidence

Sports-based interventions can leverage the benefits of physical activity, passion for team sports, and supportive environments to address childhood sexual violence by teaching children about their rights, promoting positive masculinity, and challenging harmful gender norms.

SKILLZ Street, South Africa, 2013¹⁰⁷

- **Program:** Trained female¹⁰⁸ community leader ‘coaches’ facilitated 10 two-hour discussion/sport sessions under this 2013 program, developed by Grassroot Soccer and implemented in Soweto, South Africa. Held twice weekly for five weeks, the sessions reached 394 girls aged 11 to 16 at risk of HIV, ‘gender-based violence’, and sexual and reproductive health challenges. An accompanying two-way SMS campaign linked participants with community health services and information.
- **Evaluation:** Quantitative and qualitative data collected through pre- and post- questionnaires, focus group discussions, interviews, structured observation, and SMS campaign tracking was independently analyzed and jointly interpreted.
- **Results:** Despite challenges with irregular attendance, participants reported moderate improvements in gender-equitable attitudes, self-

“SKILLZ Street gives you the confidence, like strong body language. Not only will I use it to say no to sex, but for other things as well. If you don’t want it, ‘No.’”

—SKILLZ Street participant¹⁰⁹

efficacy to protect themselves from ‘unwanted sex’, and knowledge about where to obtain ‘rape’ services.

Additional insights from wider literature

Coaching Boys into Men, US and India: The implementation of the Coaching Boys into Men program for male athletes in grades 9 to 11 in US high schools initially showed no impact, but a 12-month post-baseline study showed a significant reduction in physical, emotional, and ‘sexual abuse’ in relationships. However, when the program was adapted for use with male cricketers aged 10 to 16 in India (under the program name Parivartan), no significant reduction in ‘sexual violence’ perpetration was found at 12-month follow-up.¹¹⁰

SASA! Approach, Uganda: Kyegombe et al. (2015) suggest that the SASA! Approach, which mobilizes communities to prevent physical intimate partner violence against women,¹¹¹ may reduce the chance of children witnessing intimate partner violence and being exposed to violent discipline, but their study does not address childhood sexual violence.¹¹²

I am Binadam (I am human), Tanzania: In a country where homosexuality is criminalized, this bilingual digital campaign used data from 896 ‘LGBTQ’ respondents to create anonymous characters, promoting social integration of all ‘LGBTQ’. It raised awareness about ‘LGBTQ’ discrimination and supported those not yet out, along with their friends and family. The campaign sparked inclusion discussions between ‘LGBTQ’ and non-‘LGBTQ’ people.¹¹³

Challenges and evidence gaps

Challenges

- **Entrenched beliefs and taboos:** Norms and values interventions can face significant challenges due to entrenched beliefs and cultural taboos surrounding childhood sexual violence.
 - **Initiatives** can face backlash from those who benefit from existing norms.
 - **Programs** may be seen as external interference and face resistance, putting those implementing the program at risk.¹¹⁴

We know we have more to learn. But we also know we have enough evidence to act now for millions of children.



- **Engaging children**, particularly boys, in conversations about these topics can be challenging.

- **Cultural adaptation:** Programs that worked in one context may not be adaptable to other contexts due to cultural, economic, and political differences.

- **Sustainability:** The long-term commitment required by interventions to address deep-seated norms may not be matched by organizational presence in a location or donor funding.

- **Engagement:** Time constraints and competing priorities of children and parents make it a challenge to maintain participation.

- **Programs may introduce risks:**
 - **Technology-assisted programs** risk reinforcing negative norms through digital platforms.

- **Sports-based interventions** carry the risk of coaches exploiting their influence with children.

- **Attribution:** Multi-component approaches, while often effective, can make it difficult to attribute specific changes, like shifts in social norms, to individual components.

Evidence gaps

- **More evidence is needed** on the efficacy of norms and values interventions in low- and middle-income countries, at the policy or community level, to prevent childhood sexual violence.¹¹⁵

- **Amongst the reviewed studies**, evidence was lacking on strategies to shift harmful norms and reduce or prevent discrimination against children of diverse SOGIESC. For example, no programs were found to address homophobic teasing, a common form of gender- and bias-based harassment that is considered a precursor to sexual violence.¹¹⁶

Insights and lessons for norms and values interventions

The evidence shows that norms and values interventions can lead to positive changes in attitudes. However, further research is needed to determine

whether these changes lead to sustained behavior change and a reduction in childhood sexual violence.

Small-group programs for children and adolescents outside of schools, such as Growing Up Safe and Healthy (SAFE) in Bangladesh,¹¹⁷ show **promising** results in altering attitudes among children and adolescents, but the link to sustained behavior change is less clear. For instance, Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS) in Ethiopia reported attitude shifts but did not demonstrate behavior change.¹¹⁸

More evidence is needed to assess the effectiveness of **stand-alone media and technology-assisted norms change campaigns** in reducing childhood sexual violence. While initiatives like the Learning Initiative on Norms, Exploitation, and Abuse (LINEA) radio drama show potential for driving social change¹¹⁹ and the HappyToto digital game was found to be feasible and culturally acceptable,¹²⁰ however, their direct impact on reducing childhood sexual violence needs further exploration. Interestingly, in the case of LINEA, although the intervention targeted households with people with disabilities and the evaluation included interviews with individuals with physical disabilities, the study did not disaggregate data to identify any differences in outcomes for children with disabilities.



Sports-based interventions for preventing childhood sexual violence leverage enthusiasm for sports and the influential relationships between coaches and participants to foster discussion and learning, with efforts like the SKILLZ Street girls' soccer program promoting gender-equitable attitudes.¹²¹ However, **more evidence is needed** to determine these programs' effectiveness in preventing childhood sexual violence.

Lessons learned

- **Engaging boys and men** is critical for addressing harmful gender norms¹²² — but in doing so, we must work with all genders.

- **Participatory discussion sessions** run by trained facilitators can enhance social norms and values interventions.

- **Before implementing programs**, we should establish open channels of communication with communities and adapt actions, so they are culturally sensitive.
- **Program effectiveness** varies across different cultural, economic, and political contexts.
- **A long-term approach** with ongoing commitment, resources, and community buy-in is necessary to achieve and sustain norms change.



3 | Safe environments

How can safe environments prevent childhood sexual violence?

Children spend their time in various settings, including private, public, institutional, humanitarian, and technology-facilitated spaces. The way these

environments are structured and organized, along with the behavior of people within them, significantly affect children’s risk of experiencing sexual violence.

Interventions to build safer¹²³ environments can play a role in preventing childhood sexual violence by:

- **enhancing** the structural safety of physical and technology-facilitated spaces to reduce the likelihood of perpetration;
- **creating** child- and adolescent-friendly spaces for empowerment activities, to reduce the risk of sexual violence against children;
- **implementing** inclusive and equitable governance, safeguarding policies, systems, and protocols to strengthen the protective layers surrounding children; and
- **strengthening** the knowledge and skills of diverse children, adolescents, and the adults in their environments – to improve prevention, reporting and response.

“Changes to the environment may influence individual and community behavior by helping change people’s perceptions, attitudes and actions, encouraging positive behaviour [sic], and reducing the risks of violence against – and by – children and adolescents.”

—INSPIRE Handbook¹²⁴



Evidence from the reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective intervention types for creating safer environments were in preventing childhood sexual violence.

- **Adolescent development clubs**, when used to deliver quality, multifaceted, sustained economic and social empowerment interventions for adolescent girls, are considered **effective**. They have shown reductions in children’s sexual violence victimization as well as secondary outcomes.¹²⁵
- **Child-friendly safe spaces in humanitarian settings**, when used to deliver social empowerment programs, are considered **conflicting**. They have

shown some improvements in psychosocial well-being, social support, and attitudes, but no association with reductions in exposure to sexual violence.¹²⁶

- **Safeguarding systems to prevent childhood sexual violence in child-serving organizations** are considered essential and show hopeful results, though **more evidence is needed** to form strong conclusions about their effectiveness.

Adolescent development clubs: Effective

Adolescent development clubs that offer multifaceted socio-economic empowerment programs can reduce the risk of sexual violence for adolescent boys and girls, especially during vulnerable periods. These programs may include income-generation skills, microfinance or cash/voucher transfers, life skills, leisure activities, emotional support, and confidence building.

Table 7. Safe environments: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
Adolescent development clubs	Effective	Randomized controlled trial (n=2)	Empowerment and Livelihood for Adolescents (ELA)	Uganda, Sierra Leone	Age: Adolescents Gender: Girls
Child-friendly safe spaces in humanitarian settings	Conflicting	Randomized controlled trial (n=1); Systematic review (n=3)	Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS)	Ethiopia, Humanitarian contexts	Age: Adolescents Gender: Girls
Safeguarding systems to prevent childhood sexual violence in child-serving organizations	Needs more evidence	Qualitative program evaluation (n=1); Case study (n=1).	Sexual Violence in Schools in South Africa (SeVISSA); End School-Related Gender-Based Violence Program	South Africa, Sierra Leone	Age: Adolescents Gender: All

For programs addressing childhood sexual violence in technology-facilitated spaces, see the National Center for Missing & Exploited Children CyberTipline and WeProtect Model National Framework in the “Implementation and Enforcement of Laws” chapter and Tackling Online Child Sexual Exploitation (TOCSE) in the “Education and Life Skills” chapter.

Empowerment and Livelihood for Adolescents (ELA), Uganda, 2008–2012¹²⁷

- **Program:** This multifaceted policy intervention (2008–2012) aimed to jump-start adolescent girls’ socioeconomic empowerment by simultaneously providing vocational training for income-generating activities and life skills education on sexual and reproductive health and rights.
- **Evaluation:** A randomized controlled trial used surveys collected at baseline, midline (two years post-intervention), and endline (four years post-intervention) to assess impacts on economic and social empowerment of nearly 5,000 adolescent girls in Uganda where adolescent clubs were either established (treatment) or not (control).
- **Results:** Treatment communities saw an increased self-employment rate among girls and significant reductions in the rates of teen pregnancy, early marriage/cohabitation, and girls who reported having ‘*had sex unwillingly*’ during the previous year.

Empowerment and Livelihood for Adolescents (ELA), Sierra Leone, 2014¹²⁸

- **Program:** Implemented during the Ebola outbreak, this program aimed to empower girls and young women through life skills, vocational skills, and microfinance delivered through clubs that replaced schools during the outbreak.



- **Methods:** A quasi-experimental design tracked the effects on economic empowerment, education, fertility, and interactions with men across 4,700 adolescent girls (aged 12 to 17) and women (aged 18 to 25).

- **Results:** Adolescent girls were significantly less likely to engage in risky sexual behaviors (less sex and less unprotected sex), spent more time away from men, had lower rates of out-of-wedlock pregnancies, and showed improved school re-enrollment rates post-crisis compared to control group adolescent girls.

Child-friendly safe spaces in humanitarian settings: Conflicting

While safe/child-friendly spaces are not interventions, they create opportunities for interconnected, empowering,¹²⁹ child-friendly child protection and childhood sexual violence prevention and response.

Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS), Ethiopia, 2015¹³⁰



- **Program:** This 10-month program targeted 919 asylum-seeking adolescent girls (ages 13 to 19) across three refugee camps in Ethiopia. It offered weekly mentor-led sessions on life skills, financial literacy, and safety planning; monthly caregiver support sessions; and training for service providers to prevent and respond to sexual and gender-based violence.

- **Evaluation:** A randomized controlled trial with baseline and endline surveys compared the experiences of girls assigned to the intervention (457 girls) and control (462 girls) groups.

- **Results:** The intervention was associated with improvements in attitudes around rites of passage and identified social supports. However, it was not significantly associated with reductions in exposure to sexual violence, ‘*transactional sex*’,¹³¹ feelings of safety, or school enrollment.

Safeguarding systems to prevent childhood sexual violence in child-serving organizations: Needs more evidence

What is “child safeguarding”?

Child safeguarding is an organization’s responsibility to make sure their staff, operations, and programs do no harm to children and do not expose them to the risk of harm or abuse.¹³² This means doing all they can to prevent exploitation and abuse, and if abuse occurs, to respond appropriately.¹³³

Note: The way the term “*child safeguarding*” is used in the reviewed studies may differ from how we define it here.

Adopting child safeguarding measures to prevent sexual violence within organizations is considered standard practice and, for many organizations, mandatory (as discussed in the “Implementation and Enforcement of Laws” chapter). Developing and implementing organizational policies and practices to ‘*safeguard children from sexual violence*’ is an ongoing process that may include:

- prevention policies (e.g., codes of conduct¹³⁴ and policies on child safety, safeguarding, non-discrimination, sexual violence, and whistleblowing);
- procedures and mechanisms for reporting;
- procedures for responding appropriately to and investigating disclosures and policy violations;
- regular, mandatory training for all employees and volunteers;
- inclusive recruitment procedures that include screening candidates;
- organizational communication strategies and awareness campaigns about these policies; and
- yearly safety assessments and ongoing evaluation of policies.

Sexual Violence in Schools in South Africa (SeViSSA), 2014–2018¹³⁵

- **Program:** This 2014–2018 intervention aimed to combat ‘*sexual violence*’ and empower girl learners by facilitating Girl Club activities, school stakeholder



forums, awareness campaigns, policy alignment, and school confidantes and mentors across 27 schools in Limpopo and Gauteng provinces, South Africa.

- **Evaluation:** An independent qualitative endline evaluation included document analyses and one-on-one interviews with 260 Girl Club members and 57 school representatives.
- **Results:** Positive results included the adoption of comprehensive school safety and anti-violence policies and processes; increased reporting of rights violations; enhanced agency, self-awareness, and assertiveness of girl learners against inequalities; and a significant reduction in school drop-outs due to pregnancy and motherhood. However, girl learners did not consider school reporting mechanisms and systems to be safe at the end of the program.

End School Related Gender-Based Violence Program, Sierra Leone, 2023–2024¹³⁶

- **Program:** This program scaled up from 21 to 200 schools in Kenema and Kono districts, Sierra Leone. It adopted the UN Girls' Education Initiative's (UNGEI) whole school approach, and it included capacity development for teachers, principals, and community members; the development of in-school reporting mechanisms and safe spaces; and integrated gender-based violence and life skills training. This aligns with UNGEI's Whole School Approach.
- **Evaluation:** A mixed-method evaluation on key program-linked metrics such as students' feelings of safety, reports of school-related gender-based violence incidents, and changes in attitudes toward gender and corporal punishment.
- **Results:** The program led to a decrease in students feeling unsafe at school, a reduction in 'sexual violence' incidents,¹³⁷ and a decline in the belief that 'rape' should be kept secret. There was also an increase in students' comfort with reporting harm and more positive gender attitudes.

See also the "Implementation and Enforcement of Laws" chapter for an overview of work to address sexual exploitation and abuse in the UN system

Additional insights from wider literature

Indigenous Women: My City, My Space, Peru.

The project used a community mapping and comprehensive safety initiative to develop protocols for reporting discrimination against Indigenous girls and young women in public spaces and for training police and service providers.¹³⁸

Cali Safe City and Safe Public Spaces, Colombia

increased knowledge and capacity on gender equality by mapping needs, establishing response protocols for sexual harassment, and integrating gender equality into curricula, to the benefit of over 250 students and 50 staff members on university campuses.¹³⁹

Mapping the Unsafe School Journey, South Africa

was a program that used participatory mapping to reveal the significant risks children faced on their daily walks to school in order to highlight the importance of engaging children when identifying dangerous areas and to inform policies that promote safety and address sexual violence risks in public spaces.¹⁴⁰

HarrassMap, Egypt. Data4change supported HarassMap in a collaborative process of developing and prototyping a live incident sexual harassment mapping system. Using crowdsourcing of SMS and online reports, the co-creative process generated a website, a reporting tool as well as a mobile app to report sexual harassment.¹⁴¹

Rohingya Refugee Gender-Based Violence Prevention, Response, and Mitigation Program, Bangladesh provided survivor- and/or victim-centered services in women and girls' safe spaces and men and boys' centers to help combat 'gender-based violence', but the evaluation revealed ongoing high incidence of 'gender-based violence' and low reporting rates. Adolescent girls and members of other marginalized groups, such as people with disabilities and members of the lesbian, gay, bisexual, transgender, intersex, queer, plus (LGBTIQ+) community, faced specific 'gender-based violence' risks but were often excluded from services.¹⁴²



Disrupting Harm survivor conversations, Kenya, South Africa, Namibia, Malaysia, and Cambodia.

This process was developed by ECPAT to center the organization's work on online 'child sexual exploitation and



abuse’ on the views of children and young people. ECPAT held 33 conversations with female and male survivors and/or victims in. All were aged 9 to 17 when they experienced online ‘child sexual exploitation and abuse’ and aged 16 to 23 during the conversations. The conversations allowed survivors and/or victims to share their perspectives on what online ‘child sexual exploitation and abuse’ is and prevention strategies they appreciate.¹⁴³

Challenges and evidence gaps

Challenges

- **Ongoing, evolving risks:** No environment can guarantee complete safety from sexual violence and discrimination. Improving safety is a continuous, evolving process.
- **Potential exclusion:** Some approaches, like center-based approaches, may inadvertently exclude vulnerable children due to cultural, social, logistical, physical, or intellectual barriers.
- **Evaluation methods:** Lack of evidence and limitations in methods for evaluating safeguarding systems, make it difficult to draw reliable conclusions about safeguarding systems’ impact in preventing childhood sexual violence in child-serving organizations, particularly in low- and middle-income countries.



Evidence gaps

More research with stronger methods is needed to evaluate the effectiveness of safe environments interventions in low- and middle-income countries and humanitarian settings, including:

- **understanding** if and how specific vulnerable groups access safe/child-friendly space programs using disaggregated data;
- **assessing** the effectiveness of interventions delivered through safe spaces in preventing childhood sexual violence victimization;
- **assessing** interventions targeting social norms change in unstable/humanitarian settings;
- **identifying** best practices for designing and implementing child safeguarding systems in schools and other organizations; and
- **developing** and evaluating programs that create safer technology-facilitated spaces for children.

Insights and lessons for safe environments interventions

Adolescent development clubs that deliver quality, multifaceted, sustained economic and social empowerment interventions for adolescent girls have shown **effective** results in preventing sexual violence against adolescent girls in humanitarian and stable contexts. Uganda’s four-year Empowerment and Livelihood for Adolescents program showed reduced rates of unwilling sex, teen pregnancy, and early marriage/cohabitation, as well as increased economic and social empowerment. These impacts were likely due to three key program features: (i) life skills sessions on negotiation, rape, legal rights, and reproductive health; (ii) vocational skills training that increased girls’ self-employment, economic empowerment, and control over their bodies; and (iii) a safer after-school space for girls when parents might not be home.¹⁴⁴ When this program was adapted and applied to the Ebola emergency in Sierra Leone, adolescent girls were less likely to engage in risky sexual behaviors and had lower rates of ‘out-of-wedlock pregnancies’.¹⁴⁵

Evidence is **conflicting** on how interventions delivered through **child-friendly safe spaces in humanitarian settings** affect the prevention of childhood sexual violence. A systematic review of women and girls' safe spaces in humanitarian settings found that such interventions moderately improved psychosocial well-being, social support, and attitudes,¹⁴⁶ but Jennings et al. (2019) maintain that the evidence is not strong enough to extend those results to preventing childhood sexual violence.¹⁴⁷ Findings from the adapted intervention Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces (COMPASS) was not significantly associated with reductions in exposure to sexual violence or sexual exploitation, though Jennings et al. (2019) suggest that the timing of data collection may have been too soon to observe significant societal change and a decrease in sexual and gender-based violence.¹⁴⁸ One possible weakness of the COMPASS program design shared by Jennings et al. is that the program used peer workers from the same context as the participating adolescents, meaning these workers may have reinforced harmful societal norms regarding gender roles and gender-based violence.

Establishing **safeguarding systems to prevent childhood sexual violence in child-serving organizations** is considered essential, but **more evidence is needed** to form strong conclusions about its effectiveness, particularly in low- and middle-income countries. The Whole School Approach in Sierra Leone¹⁴⁹ and Sexual Violence in Schools in South Africa (SeViSSA) suggest that programs may reduce sexual violence victimization, support the broad-based adoption of safety and anti-violence policies, increase children's agency and reporting of rights violations, and improve school retention. However, stronger study designs are needed to boost these findings, especially considering that many girls continued to perceive their school as not safe enough after the study in South Africa ended.¹⁵⁰

Lessons learned

- **Multi-component interventions** implemented in clubs or safe/child-friendly spaces deliver better outcomes for preventing childhood sexual violence than standalone social empowerment



programs delivered in these spaces. Economic empowerment programs, and the engagement of boys and men alongside girls, are likely to further increase impact on sexual violence victimization indicators.¹⁵¹

- **Policies must be put into practice.** An institutional culture that visibly practices its policies may be key to children trusting that their concerns will be taken seriously.¹⁵²
- **Interventions to create safer environments** are more likely to benefit children when they are sustained over time and part of a multipronged approach. Whether the spaces are public, private, institutional, humanitarian, and/or online these programs – when implemented correctly – may help reduce risks, improve protective factors, and increase reporting of and response to childhood sexual violence. More consistency is needed in developing and running safer spaces in child-friendly, anti-discriminatory, and systemic ways.





4 | Parent and caregiver support

How can parent and caregiver support prevent childhood sexual violence?

“Parent and caregiver” includes any biological, adoptive, or foster parents and/or guardians providing consistent medium- to long-term care to a child or adolescent. Adolescents may have their own children to whom they are parents.¹⁵³ In this report, the term *‘parent’* is used as an umbrella term to include all categories of parent and caregiver. Additionally, *‘parenting’* can be defined as all the “interactions, behaviours [sic], emotions, knowledge, beliefs, attitudes and practices associated with the provision of nurturing care.”¹⁵⁴

Parent and caregiver support interventions may include:

- **skills and knowledge development** delivered in groups in community settings on topics such as respectful parent-child relationships and communication, child development, positive, nonviolent discipline, and recognizing and responding to childhood sexual violence;
- **parent support groups** held in community settings to provide mental health and psychosocial support, as well as facilitated discussions on parenting challenges; and
- **linking parents and caregivers to services**, connecting them to health and social services, including through home visits.

Parent and caregiver support interventions may prevent childhood sexual violence in a number of ways:

- Parents’ appropriate supervision of their children and parents’ increased awareness about sexual violence may help reduce risks to children.¹⁵⁵
- Additionally, the knowledge parents and caregivers share with their children, and the behaviors and

attitudes they demonstrate through positive parenting, may increase children’s self-confidence.

- Further, strengthened relationships and communication between parents and their children may encourage dialogue¹⁵⁶ and subsequently improve disclosure.

Evidence from the reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective intervention types for parent and caregiver support were in preventing childhood sexual violence.

- **Skills development programs for preschool children and their parents in preventing childhood sexual violence**, especially when combined with strengthening parent-child communication skills, are considered **effective**. Research has shown increased knowledge and self-efficacy skills among preschool children, and in one study, evidence of child disclosures of sexual abuse victimization.¹⁵⁷
- Efforts to build **parent skills for preventing childhood sexual violence in pre-adolescents and adolescents**, when engaging parent/adolescent pairs and especially when technology-assisted, are considered **effective**. They have shown improved knowledge, attitudes, and conversation content among parents and their children, and in one study,¹⁵⁸ a significant reduction in childhood sexual violence victimization.
- **Parent counseling approaches for preventing childhood sexual violence**, when delivered by skilled facilitators who can encourage active sharing, are considered **promising**. They have been shown to enhance parents’ awareness and self-efficacy, and sustained improvements in knowledge, attitudes, and practices.

Skills development for preschool children and their parents in preventing childhood sexual violence: Effective

Young children often have limited access to education or life skills support through formal channels. Facilitated group sessions with parents, preschool children, or both

Table 8. Parent and caregiver support: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
Skills development for preschool children and their parents in preventing childhood sexual violence	Effective	Randomized controlled trial (n=1); Pre-post (n=1); Quasi-experimental (n=5)	Body safety training; Sexual abuse prevention program among pre-schoolers; Educating children through their parents	Iran, Türkiye	Age: Young children (ages 3–6) and parents Gender: Boys and girls
Parent skills for preventing childhood sexual violence in pre-adolescents and adolescents	Effective	Randomized controlled trial (n=1); Systematic review (n=1); Quasi-experimental (n=2); Pre-posed (n=1); Cross-sectional (n=1)	Parenting for Lifelong Health/ ParentApp; “My Mother Is My Best Friend” DREAMS HIV prevention intervention; Protection motivation theory-based ‘child sexual abuse’ prevention; Families matter!	Tanzania, India, Sri Lanka, Kenya, Zimbabwe, Humanitarian settings	Age: Children and parents Gender: Girls, women, gender unspecified in some studies
Parent counseling approaches for preventing childhood sexual violence	Promising	Randomized controlled trial (n=1)	Group counseling sessions	Iran	Age: Parents Gender: Women

together can improve parents’ and children’s knowledge, skills, and vocabulary to identify, communicate about, and report childhood sexual violence.

Body safety training, Iran, 2020¹⁵⁹

- **Program:** Over six months 28 mothers of daughters (mean age of 6) participated in body safety training to learn about identifying risky situations, effective communication with children, body autonomy, and consent. Mothers then delivered one workbook lesson per day to their daughters for a week.

- **Evaluation:** Pre- and post-intervention surveys assessed mothers’ and children’s knowledge, attitudes, and practices regarding sexual abuse prevention. Adapted versions of the Personal Safety Questionnaire and the “What If” Situations Test were used, with comparisons made to a waitlist control group.

- **Results:** Despite cultural sensitivities and challenges in recruiting and retaining participants, the program led to significant improvements in mothers’ knowledge and confidence in discussing sexual abuse prevention and in children’s understanding of sexual abuse, inappropriate touch, and self-protection skills.

Sexual abuse prevention program among preschoolers, Iran, 2019¹⁶⁰

- **Program:** A sexual abuse prevention program was implemented with 70 girls and boys aged 5 to 6 from 10 preschool centers in Tehran, Iran, in 2019. The program aimed to enhance children’s knowledge, self-protective skills, and ability to recognize appropriate and inappropriate touch.

- **Evaluation:** The study used a multicenter, random cluster, quasi-experimental controlled survey design. Intervention and control groups were evaluated with

pre- and post-intervention assessments. Control groups received a single session on accident safety.

- **Results:** The program, which was more effective for girls and children with educated parents, showed increases in children’s knowledge, self-protective skills, and ability to detect “appropriate requests.” No significant change was observed in detecting “inappropriate requests,” but all quadruple skills (Say, Do, Tell, and Report) improved significantly; 4.2 percent of children self-disclosed sexual abuse during or after the intervention.

Educating children through their parents to prevent child sexual abuse, Türkiye, 2017–2018¹⁶¹

- **Program:** This program in Türkiye (2017–2018) included a two-hour training session delivered in one day, educating parents about childhood sexual abuse, its risks, and preventive measures through educational posters, videos, photographs, case stories, and the book *Kiko ve El*.
- **Evaluation:** The study employed a pre-/post-test design, with surveys/questionnaires completed by 58 children aged 3 to 6 and 41 parents from Akdeniz University 75 Yil Crèche and Children’s Club who had not received prior training on childhood sexual abuse.
- **Results:** Children who received ‘child sexual abuse’ prevention education from their parents demonstrated improved knowledge about private parts and what to do if they suspect sexual abuse, but other family members sometimes objected to children’s participation in the program.

The following programs are not summarized in detail in the narrative of this report but also contributed to our classification of efficacy of this intervention type: *Educating Children Through Their Parents*,¹⁶² *Body Safety Training*,¹⁶³ *I Am Learning to Protect Myself with Mika*,¹⁶⁴ and *My Body Is Special*.¹⁶⁵

Parents skills for preventing childhood sexual violence in pre-adolescents and adolescents: Effective

Adolescents, particularly girls, can experience increased risk of sexual violence due to factors such as increased opportunities for unsupervised movement outside of the home and online, unsupervised contact with peers



and community actors, and engagement in livelihoods activities.¹⁶⁶ Interventions may include facilitated in-person sessions and/or technology-facilitated tools to build parents’ and children’s knowledge, skills, and communication around childhood sexual violence prevention.

Parenting for Lifelong Health/ParentApp, Tanzania, 2023–2024¹⁶⁷

- **Program:** Implemented in rural and peri-urban Tanzania, this program included 4,800 caregiver/adolescent pairs (with adolescents aged 10 to 17 years and a mean age of 13) participating in a sexual violence–enhanced version of the Parenting for Lifelong Health program (endorsed by the World Health Organization and UNICEF).¹⁶⁸ No Means No Worldwide content and new co-developed content were incorporated in the 2023–2024 program, which included one in-person session, an offline-first open-source ParentApp, and facilitated WhatsApp groups of 50 families each.
- **Evaluation:** A total of 80 communities were cluster-randomized to use ParentApp or a digital water, sanitation, and hygiene (WASH) app as a control. Evaluation planned to include surveys using standardized measures from I-Cast and Violence Against Children Surveys, to be conducted pre-



program, one-month post-program, and 12 months post-program.¹⁶⁹

- **Results:** At the time of writing, preliminary unpublished data was made available to this report's authors. According to this data, completion of parenting program modules was 76–97 percent, which was improved by the addition of WhatsApp groups. Adolescents whose families used ParentApp demonstrated increased adolescent and caregiver gender-equitable norms and behaviors, reduced rates of past-month childhood sexual violence, reduced rates of sexual abuse vulnerability, and higher rates of planning protective strategies against child sexual abuse with families.¹⁷⁰

Protection motivation theory-based 'child sexual abuse' prevention, India¹⁷¹

- **Program:** The five-hour program, which was based on protection motivation theory, was conducted with mothers of pre-adolescent children in a semi-urban district in Kerala, India. It included two 2.5-hour sessions (with a one-week gap between them) featuring lectures, discussions, educational materials, and story-based activities designed to improve knowledge and attitudes that help prevent childhood sexual abuse.

- **Evaluation:** A total of 67 mothers (aged 30 to 40) of preadolescent children (no specified ages/genders) were selected using purposive sampling and grouped into experimental and control groups based on judgmental matching criteria to maintain homogeneity. A pre-/post-test design assessed childhood sexual



abuse knowledge and attitudes; t-tests and analysis of covariance evaluated the impact.

- **Results:** Mothers demonstrated significantly improved 'child sexual abuse' knowledge and attitudes related to talking about and educating their children on 'child sexual abuse'.

Families Matter! Program: Session 6 on 'child sexual abuse', Zimbabwe, 2016¹⁷²

- **Program:** Implemented in two urban suburbs of Harare, Zimbabwe, this 2016 program involved 248 parent-child pairs with children aged 9 to 12 attending six weekly, three-hour sessions to raise awareness about 'child sexual abuse', enhance parents' protective roles, and provide practical parenting strategies. These parent-child pairs completed the three-month post-intervention assessment.

- **Evaluation:** The evaluation used pre- and post-program assessments with both children and parents via Audio Computer-Assisted Self-Interview (ACASI) to measure changes in skills, knowledge, attitudes, and practices regarding 'child sexual abuse' prevention.

- **Results:** Parental monitoring, communication about 'child sexual abuse', intention to report, and awareness of available resources all improved, but there was no significant change in intention to report if a family member was the alleged perpetrator.

Determined, Resilient, Empowered, AIDS-free, Mentored, and Safe (DREAMS), Kenya, 2016–2019¹⁷³

- **Program details:** This package of interventions — which was based on adaptations of other evidence-based programs such as [SASA!](#), [MTV SHUGA](#), and the [Families Matter!](#) Program — targeted girls (aged 15 to 19), young women (aged 20 to 24), and parents in Kisumu County, Kenya. It was delivered in community spaces by trained mentors alongside HIV prevention, schooling support, and economic empowerment activities.

- **Evaluation:** The evaluation used classification and regression tree analysis to assess how DREAMS interventions impact HIV-related outcomes for adolescent girls and young women.

- **Results:** Receiving schooling support and being exposed to the Families Matter! Program increased those reporting ‘*no sexual violence*’ to 100 percent.

“My Mother Is My Best Friend”, Sri Lanka, in 2020–2021¹⁷⁴

- **Program:** Implemented in Kalutara district, this program selected 127 mothers of adolescent girls aged 14 to 19 using random sampling. These mothers participated in at least one session on adolescent physiological changes, ‘*sexual violence*’ prevention, and/or communication strategies at a government worksite.
- **Evaluation:** The study used a quasi-experimental design with pre- and post-intervention questionnaires administered by interviewers one week before the intervention started and six months after it ended.
- **Results:** Significant improvements were reported in mothers’ knowledge, attitudes toward communication, and the content of mother-daughter discussions about sexual health.

Parent counseling approaches for preventing childhood sexual violence: Promising

Parent counseling approaches to prevent childhood sexual violence aim to provide parents with a space for open discussion and counseling. These interventions often include enhancing parents’ knowledge, attitudes, practices, and self-efficacy.

Group counseling sessions on preventing the sexual abuse of children aged 2 to 6, Iran, 2016.¹⁷⁵

- **Program:** Parents participated in three weekly, 90-minute group counseling sessions on preventing child sexual abuse in Karaj, Iran. Two women who specialized in midwifery and psychiatry facilitated the sessions, which were conducted according to the “human dynamic process” and involved open discussion and actively sharing opinions.
- **Evaluation:** The study included 62 parents (58 females and 4 males) of preschool-aged children (31 boys and 31 girls) from three randomly selected early childhood programs and used a randomized controlled clinical trial method; block randomization; the “Parental Knowledge, Attitude, and Practice” questionnaire; and the Farrell and Walsh self-efficacy pretest/post-test, adapted to Persian.

- **Results:** The study observed a significant difference in knowledge, attitudes, practices, and self-efficacy between the intervention and control groups immediately after and one month after the intervention.

Additional insights from wider literature

“Families for Safe Dates” program in the US was a family-based initiative that fosters discussions about dating violence between adolescents and caregivers, it showed enhanced efficacy in physical ‘*dating abuse*’ prevention and reduced acceptance and incidence of physical ‘*dating abuse*’ victimization.¹⁷⁶

Responsible, Engaged, and Loving (REAL) Fathers in Uganda was a 12-session, volunteer-administered fathers’ mentoring program that showed significant reductions in intimate partner violence and physical child punishment. This may indicate that targeting men when addressing harmful gender norms has a positive impact.¹⁷⁷

The Bandedereho intervention in Rwanda engaged men and their partners in gender-transformative programs, such as participatory education and critical reflection on gender norms. It showed significant reductions in physical and sexual intimate partner violence and the use of physical punishment against children.¹⁷⁸

Parental control applications like Bark and Net Nanny use artificial intelligence to scrutinize digital communications for indicators of sexual grooming and exploitation. They report potential risks to parents and, depending on the threat’s severity, authorities. Consultation with undergraduate students in the US indicated the need to also improve parent-teen communication, teen autonomy and privacy, and parental support.¹⁷⁹

In their systematic review of four decades of research on parental involvement in programs to prevent child sexual abuse, Rudolph and colleagues (2024) found that content and outcomes varied widely. They concluded that improvement post-intervention was most common for “parental behavioral intentions and response-efficacy, closely followed by parental



Empowered parents foster safer environments, improve communication with children, and play a critical role in reducing risks and promoting long-term protection.

behaviors, then capabilities, self-efficacy, knowledge, and lastly, parental attitudes.”¹⁸⁰

Challenges and evidence gaps

Challenges

- **Inhibitions:** Cultural norms and religious beliefs may inhibit open discussion about sexuality and childhood sexual violence prevention.
- **Restrictions to participation:** Family resistance, including patriarchal dynamics, can prevent participation, impacting recruitment. Competing priorities can also hamper participation.
- **Inclusion:** Parents or children with disabilities may face additional challenges in communication and participation, often lacking the necessary resources or support.



- **Small sample size:** Some studies targeted small numbers of participants, limiting the generalizability of findings.

- **Unknown impact on children:** Not all studies assessed the changes in knowledge, attitudes, or behaviors of the children whose parents participated in the programs.

- **Replicating interventions tested in high income settings:** The literature highlighted concerns about transplanting approaches developed and tested in high-income settings — such as body safety training and body ownership programs — into very different cultural and social settings and the need for locally developed/contextualized programs.¹⁸¹

Evidence gaps

- **While the literature acknowledges** the need to culturally adapt parenting programs, it does not speak



to parenting modules’ effectiveness in changing discriminatory attitudes and practices.

- **The literature offers** limited commentary on the program elements essential for parenting program efficacy (e.g., program pedagogy; program length; who the facilitators are, how they are selected, and how they are trained. This guidance is important for adapting and scaling up programs.

- **None of the studies** explicitly involved fathers, which is a significant gap given that fathers can play a role in both preventing and perpetrating harm.¹⁸² Fathers may also limit others’ participation in prevention interventions.

- **Many of the reviewed interventions** either intentionally or unintentionally excluded boys. We should monitor the outcomes of parenting interventions for diverse children, not only girls. We also need to learn more about how parenting strategies may prevent harm to boys, children of diverse SOGIESC, children with disabilities, and children of different ethnic and racial identities, among other identities and characteristics.

- **Further research is needed** on parent and caregiver programs that support children in safely navigating technology-facilitated spaces. This should include looking at the efficacy of parental controls on electronic devices being used by children.

- **The studies focused on skills development** for preschool children and their parents in preventing childhood sexual violence had a limited geographic scope. Further research is needed about their effectiveness in other contexts, especially in humanitarian contexts where packages adapted to crisis are being implemented.¹⁸³

Insights and lessons from parent and caregiver support interventions

The reviewed studies of parent and caregiver interventions to prevent childhood sexual violence in lower- and middle-income countries focused on fostering healthy family relationships, increasing awareness, reducing risk factors, and connecting families to social services, thereby enhancing their protective capabilities.



Our research found that interventions focused on **skills development for preschool children and their parents in preventing childhood sexual violence** are considered **effective** in helping prevent childhood sexual violence. Equipping children’s parents to teach their own children – rather than engaging young children directly through group-facilitated activities – has proven to be a feasible way to increase the effectiveness of outcomes for children.¹⁸⁴ Programs that supported parents to educate their children in Türkiye and mothers as teachers in Iran, increased parental knowledge and positive attitudes toward reporting, as well as children’s knowledge and self-efficacy.¹⁸⁵

The use of role-play in sessions with parents so that they can practice communicating with their children, as well as parents’ use of props such as dolls when teaching their children, have been shown to enhance program outcomes with preschool children.¹⁸⁶ While most preschool intervention studies did not measure impacts on levels of childhood sexual violence victimization, in one study of an abuse prevention program among Iranian preschoolers one child only reported an experience of ‘*child sexual abuse*’.¹⁸⁷ Ensuring culturally contextualized programs and including fathers (not just mothers) in programs remain critical issues for further work.¹⁸⁸

Interventions focused on **parent skills for preventing childhood sexual violence in pre-adolescents and adolescents** are considered **effective** in preventing victimization and addressing risks before they arise. The protection motivation theory-based intervention in India and the Families Matter! Program in Zimbabwe increased parental engagement in childhood sexual violence prevention, highlighting the importance of structured, culturally relevant programs.¹⁸⁹ Additionally, the study on Parenting for Lifelong Health/ParentApp in Tanzania is important because this randomized controlled trial measured a significant reduction in childhood sexual violence victimization.¹⁹⁰

Parent counseling approaches for preventing childhood sexual violence are considered **promising**, showing improvements in parental knowledge of, communication about, and attitudes toward childhood sexual violence prevention. The group counseling in Iran enhanced parents’ awareness and self-efficacy and contributed to sustained improvements in childhood sexual violence prevention knowledge, attitudes, and practices. This

may contribute to children’s safer sex practices later in life through open and timely sex education and communication from an early stage.¹⁹¹

Additionally, Backhaus et al. (2024) found parenting interventions led to an increase in gender-equitable norms and behaviors among adolescents and caregivers and a reduction in intimate partner violence among caregivers. They concluded that not enough studies directly examined impact on childhood sexual violence to enable broad conclusions.¹⁹² Fortunately, as some of the more recent studies highlighted in this chapter demonstrate, this is beginning to change.

Lessons learned

- **Developing interventions aimed at preschool-aged children** is critical, given that children under age 7 make up a significant portion of ‘*childhood sexual abuse*’ victims¹⁹³ and high quality, early childhood interventions can have long lasting impacts for children.¹⁹⁴
- **Programs must adopt a culturally sensitive approach**, adapting to the context and the individuals targeted.¹⁹⁵
- **Engaging the parents of preschool children** enhances program effectiveness and improves outcomes for their children compared to programs that target preschool children alone.¹⁹⁶ Equipping parents with knowledge about childhood sexual violence and the skills to communicate with their children builds stronger parent-child relationships, enabling child learning and disclosure.
- **Programming should be tailored** for and target parents with disabilities and parents of children with disabilities.
- **Engaging boys, fathers, and male caregivers** in programs is critical, given their potential roles in both the prevention and perpetration of harm.¹⁹⁷
- **One area to explore is delivering parenting programs** with the assistance of technology as a way of improving participation, reach, and outcomes.¹⁹⁸
- **Programming can take a holistic approach** by integrating parenting support with other INSPIRE strategies such as education and life skills,

norms and values, and economic strengthening. This multifaceted approach addresses the root causes of childhood sexual violence and provides comprehensive support to families.

- **Greater consistency in research methods** would allow for the comparison of results. Some studies assessed the impact of programs on parents and some on children. Each program should look at both to fully understand the potential outcomes and impact.

Working with parents is crucial for preventing sexual violence. Parents supervise their children and may support children’s participation in protective activities. Parenting interventions show potential to increase parental knowledge and enhance children’s self-protection skills. Future research should focus on diverse populations and employ consistent methodologies to gain a deeper understanding of these interventions’ effectiveness.



5 | Income and economic strengthening

How can income and economic strengthening prevent childhood sexual violence?

Household economic strengthening includes “actions taken by governments, donors, and implementers to improve livelihoods.”¹⁹⁹ Interventions may include:

- income-generating activities;
- skills-strengthening work;
- savings programs;
- credit services;
- cash and voucher assistance (the direct provision of cash transfers and/or vouchers for goods or services to individuals, households, or group/community recipients);²⁰⁰ and
- “cash plus” (combining cash transfers with complementary interventions).

Economic hardship can increase the risk of family separation, child labor, and sexual exploitation of women and children.²⁰¹ When childhood sexual violence is linked to economic or livelihood factors, strengthening the economic stability of at-risk families and children can potentially prevent such violence. Income and economic strengthening interventions may address underlying economic vulnerabilities that can contribute to the risk of sexual violence and aim to:

- **reduce** economic stress and improve financial stability within families to decrease the likelihood of neglect or exploitation;
- **empower** individuals, particularly women and girls, giving them the skills and resources needed for economic independence;

- **enhance** the resilience of families and communities to resist economic pressures that may contribute to childhood sexual violence; and
- **provide** alternative pathways for families that might otherwise rely on harmful practices (such as child marriage or child labor) as economic coping strategies.²⁰²

Evidence from reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective income and economic strengthening intervention types were in preventing childhood sexual violence.

- **Savings programs** have shown hopeful results in reducing the likelihood of risky sexual behavior and the probability of sexual victimization.²⁰³ However, **more evidence is needed** to make strong conclusions about their overall effectiveness.
- **Multi-component (“cash plus”) interventions targeting women and adolescent girls** that link them with existing services and incorporate

long-term strategies, are considered **effective** in increasing protective factors and reducing the risks of intimate partner violence, though effects diminish post-intervention.²⁰⁴

- **Government-run, multi-component (“cash plus”) interventions targeting adolescent girls and boys** are considered **promising** in reducing risks of sexual victimization, as well as increasing sexual health-seeking behaviors among girls and boys.²⁰⁵



Table 9. Income and economic strengthening: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
Savings programs	Needs more evidence	Pre-post (n=1)	YouthSave	Ghana	Age: Adolescents Gender: Gender: Girls, boys, women, and men
Multi-component (“cash-plus”) interventions targeting women and adolescent girls	Effective	Randomized controlled trial (n=3); Systematic review (n=3)	Girl Empower, Adolescent Girls Initiative-Kenya (AGI-K)	Kenya, South Africa, Liberia	Age: Adolescents Gender: Girls
Government-run, multi-component (“cash-plus”) interventions targeting adolescent girls and boys	Promising	Randomized controlled trial (n=1)	Ujana Salama	Tanzania	Age: Adolescents Gender: Girls and boys

Savings programs: Needs more evidence

Savings programs can include activities like assistance with opening savings accounts, group skills development sessions, and asset transfers. By promoting financial independence, these programs may reduce the likelihood of sexual exploitation and sexual victimization among children and adolescents.

YouthSave, Ghana, 2011-2014²⁰⁶

- **Program:** A total of 957 sexually experienced youth from 100 schools participated in the YouthSave program, implemented in Ghana from 2011 to 2014. All students had the opportunity to open savings accounts. Students in Group A could conduct multiple financial transactions on school grounds, while those in Group B had only one opportunity to perform their banking at school.

- **Evaluation:** The project used a non-equivalent groups evaluation design in which students were randomly assigned to the treatment, marketing campaign, or control group; pre- and post-test surveys were assessed using bivariable and multivariable analyses.

- **Results:** The school-based savings program was significantly associated with a higher likelihood of condom use and a lower probability of ‘sexual victimization’. Higher scores on the commitment-to-school scale were correlated with a lower risk of engaging in ‘transactional sex’.²⁰⁷

Multi-component (“cash plus”) interventions targeting women and adolescent girls: Effective

Multi-component (“cash plus”) interventions, which combine various support activities such as cash transfers, skills training, community engagement, and sexual violence prevention sessions, are proving effective in preventing childhood sexual violence.

Girl Empower, Liberia, 2016²⁰⁸

- **Program:** The International Rescue Committee implemented Girl Empower (GE), providing unconditional cash transfers for adolescent girls and conditional cash transfers for caregivers in Liberia. Trained female community mentors (aged 20 to 35) delivered the GE life skills curriculum during 39 weekly sessions, with 65 groups of five to 20 adolescent girls (aged 13 to 14) each. GE also offered eight monthly

caregiver discussion groups, individual savings start-ups for the girls, skills strengthening for community health and psychosocial service providers, and GE+. GE+ was a conditional cash incentive program for a subset of participants.

- **Evaluation:** A cluster-randomized controlled trial with three arms — a control, GE, and GE+ —gathered data on schooling, sexual and reproductive health, psychosocial well-being, gender, life skills, and protective factors.

- **Results:** After 24 months, both the GE and GE+ groups showed small, not statistically significant, effects for sexual violence, schooling, psychosocial well-being, and protective factors compared to a control group, as well as positive effects on gender attitudes, life skills, and sexual and reproductive health. The research also found meaningfully larger effects of GE+ than GE across all index components.

HIV Prevention Trials Network (HPTN) study, HPTN 068, South Africa, 2011-2012²⁰⁹

- **Program:** Implemented as part of an HIV prevention trial in South Africa, the HPTN 068 program divided 2,448 adolescent girls (aged 13 to 20) and their guardians into two groups. One group received monthly cash transfers. These were conditional upon school attendance. The other group received no cash transfers.

- **Evaluation:** The evaluation method included annual surveys, a follow-up 2.5 years post-intervention, and qualitative interviews for contextual insights.

- **Results:** The study found that the cash transfer reduced risks of physical intimate partner violence, having one or more sexual partners, and early sexual debut during and shortly after the intervention, but the benefits were not sustained in the absence of cash transfers.

Adolescent Girls Initiative-Kenya (AGI-K), Kenya, 2015-2017²¹⁰

- **Program:** This multisectoral program provided conditional cash transfers to caregivers and schools. It targeted 2,075 girls aged 11 to 14 in an urban informal settlement in Nairobi, Kenya. The program included community conversations on sexual and physical

violence and gender equality, cash transfers in support of education, mentor-led group health and life skills training, and financial literacy and savings activities. Population Council-Kenya oversaw the program, which was implemented and monitored by Plan International.

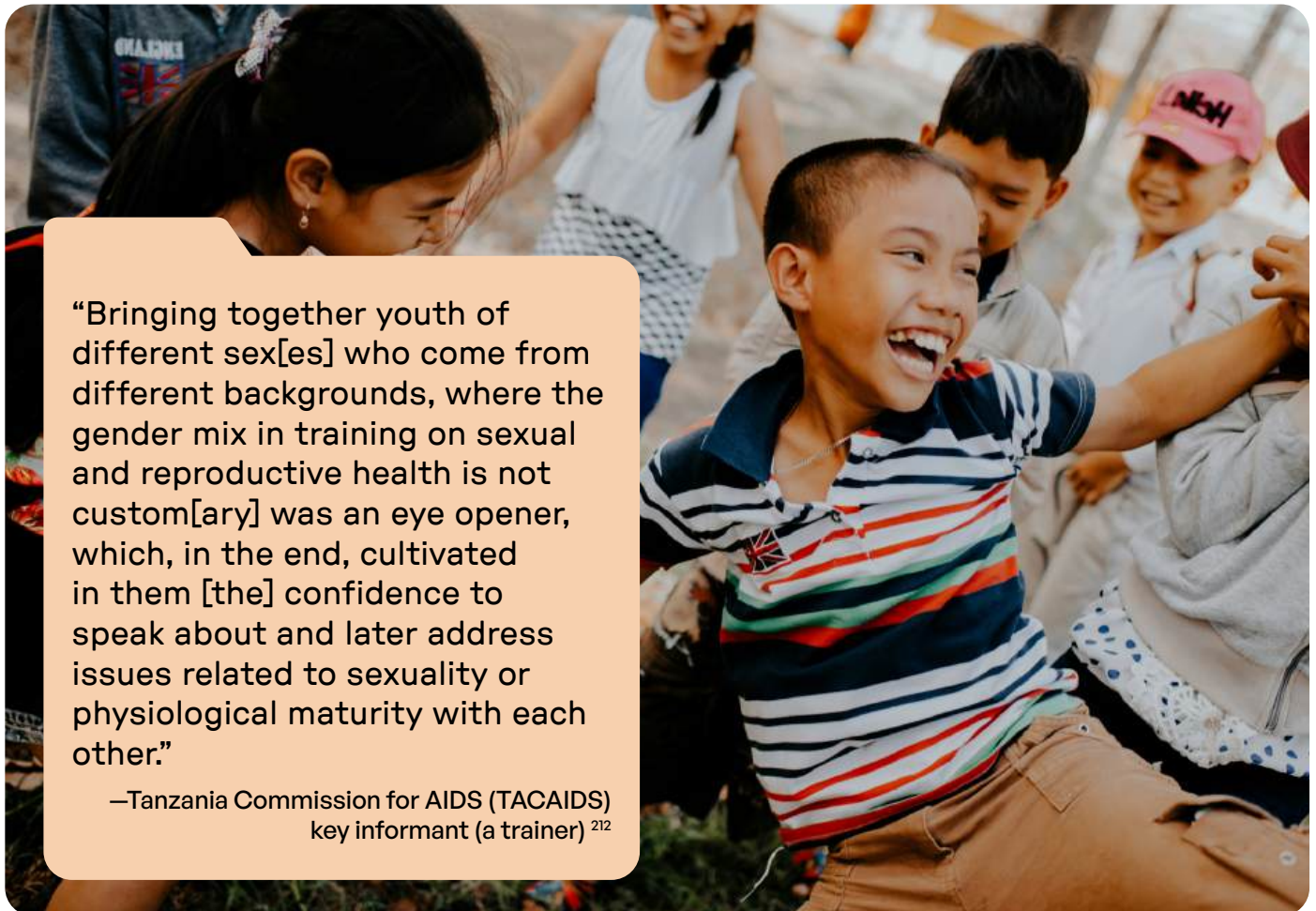
- **Evaluation:** A study of the program included a randomized trial design with pre- and post-intervention surveys and qualitative interviews to document program outcomes.
- **Results:** Study findings show a reduction in early sexual initiation, improvement in health knowledge, reduced ‘*adolescent pregnancy*’, and reduced prevalence of herpes simplex virus type 2 (HSV-2). Girls gave qualitative feedback that they “were likely to have sex as a result of child sexual exploitation, peer pressure, or influence from the media. Integrating multiple interventions addressed the complex needs of adolescent girls”.

Government-run, multi-component (“cash plus”) interventions that include boys and girls: Promising

The following example from Tanzania is the only study in the literature where the government administered the program and included boys as recipients of cash assistance.

Ujana Salama, Tanzania, 2018-2019²¹¹

- **Program:** Approximately 908,346 adolescent females and males aged 14 to 19 lived in households already receiving cash transfers under Tanzania’s Productive Social Safety Net (PSSN) program. In 2018–2019, these young people were assigned to either a control group receiving only PSSN or a treatment group receiving 12 weeks of age-tailored livelihoods and life skills training, mentoring, asset transfer, and links to enhanced sexual and reproductive health services and vocational opportunities. This was integrated into the government administered cash transfer program.



“Bringing together youth of different sex[es] who come from different backgrounds, where the gender mix in training on sexual and reproductive health is not custom[ary] was an eye opener, which, in the end, cultivated in them [the] confidence to speak about and later address issues related to sexuality or physiological maturity with each other.”

—Tanzania Commission for AIDS (TACAIDS) key informant (a trainer)²¹²

- **Evaluation:** A 46-month, mixed-methods impact evaluation used a cluster randomized controlled trial and qualitative interviews. A panel sample of 2,053 young people were engaged in all four rounds of data collection, with the fourth round occurring 18 months post-activities. 100 health facility surveys and 130 community surveys were also conducted to gain insights into the context.

- **Results:** Adolescents in the treatment group showed reduced risk of sexual violence victimization among females; delayed first sexual intercourse, marriage, and pregnancy; increased likelihood of seeking contraception and pregnancy tests (driven by females); increased likelihood of male survivors and/or victims seeking help from formal sources; and a short-term (rounds 2 and 3) increase in gender-equitable attitudes (which was also displayed in the control group by round four).

Additional insights from wider literature

The 2019 [What Works to Prevent Sexual Violence Against Children: Evidence Review](#) pointed to programs like **Malawi’s Social Cash Transfer**²¹³ and **Kenya’s Cash Transfer for Orphans and Vulnerable Children**²¹⁴ as showing promise in delaying sexual debut among youth. Similarly, an evaluation of **South Africa’s Child Support Grant** found reductions in high-risk adolescent behaviors, particularly when it came to early sexual debut among girls.²¹⁵

Challenges and evidence gaps

Challenges

- **Choosing to make direct transfers to children or adolescents:** The impact of making direct transfers to children or adolescents instead of to adult caregivers is a key outstanding area of research. This is just starting to be tested in refugee and humanitarian settings where unaccompanied children are accessing cash and voucher assistance who are especially at risk.²¹⁶ This decision can impact the modality, amount, and duration of cash assistance, as well as any risk mitigation strategies needed, and the interventions’ efficacy in preventing childhood sexual violence, though we are not yet clear how.

- **Communities may have concerns** and negative perceptions about how cash transfers might be used, which can affect the acceptance — and therefore, implementation — of such programs.

- **Ensuring sustained economic independence** post-intervention is challenging, as seen in the HIV prevention trial in South Africa, where participants sometimes reverted to dependence on partners.

- **Payment delays** caused by breaks in funding or budget shortfalls, as well as external shocks, may disrupt interventions’ continuity and sustainability, reducing their overall impact.

- **It can be difficult to isolate the impact** of economic strengthening components due to their inclusion in broader intervention packages. Although the literature indicates that economic interventions, such as cash transfers, can effectively reduce childhood sexual violence, more research is needed to understand the underlying causal mechanisms. For example, the literature is not fully clear as to whether incorporating social components enhances impact when compared to economic transfers alone, as well as how long the positive impacts last once the economic interventions end.²¹⁷

- **To adequately address childhood sexual violence,** it is essential to ensure that income and economic strengthening opportunities do not **perpetuate harmful gender norms**. Integrating considerations for economic strengthening into other intervention areas, such as recognizing the value of women’s work, can contribute to gender equality and shift norms around acceptable work for women.





Evidence gaps

- None of the reviewed studies evaluated the impacts of cash and voucher assistance programs on children of diverse individual identities or characteristics such as children with disabilities, who identify as LGBTQ+, those from minority or oppressed ethnic or racial groups. This highlights the need for future research to consider these factors to ensure inclusive and effective interventions.
- **More research, evidence and understanding is needed on...**
 - **the risks and benefits** of providing cash and voucher assistance directly to children compared to their caregivers, families, or communities.
 - **how cash and voucher assistance** affects childhood sexual violence. Current programs often focus on broader child protection or all forms of violence against children.
 - **the specific design of cash and voucher assistance** that can achieve outcomes in preventing childhood sexual violence, including deciding who the direct recipients should be.
 - **how economic strengthening interventions** can consistently ensure sustained effectiveness in reducing childhood sexual violence and associated risk behaviors.

Insights and lessons from income and economic strengthening interventions

The findings suggest that some income and economic strengthening interventions are important in preventing childhood sexual violence. A systematic review of 22 programs to prevent violence against children in Sub-Saharan Africa concluded that economic strengthening interventions are generally effective in reducing violence against children as a whole. Some factors that may contribute to childhood sexual violence (e.g., the ability to buy food, improved caregiver well-being, and reduced child labor) were positively impacted by cash and voucher assistance. However, the outcomes vary depending on the context and design of the programs. Positive results of cash and voucher assistance on violence against children were “...*more robust when coupled with family coaching/ skills training for parents.*”²¹⁸

Savings programs have shown positive results in reducing sexual violence victimization and risky sexual behaviors and in encouraging positive health behaviors among adolescent boys and girls. However, **more evidence is needed** with stronger study designs to confirm their effectiveness. The YouthSave initiative in Ghana led to a 7 percent decrease in sexual victimization by providing easy access to financial resources within schools and fostering a sense of financial independence among students.²¹⁹ This example suggests that savings programs may have a greater effect when children are in schools and formal banking systems are available to them.

Multi-component (“cash plus”) interventions targeting females have shown **effective** outcomes in reducing gender-based violence exposure, including among adolescent girls.²²⁰ There is strong evidence of cash and voucher assistance reducing sexual exploitation and age-disparate sex among girls, intimate partner violence victimization among adolescent girls, and sexual and youth violence perpetration.²²¹ Multi-component (“cash-plus”) interventions have also shown significant results in improving children’s protective factors. These protective factors include, for example, economic, mental health, and psychosocial outcomes; sexual and reproductive health knowledge and services utilization. The Adolescent Girls Initiative-Kenya improved school retention and sexual and reproductive health knowledge,²²² and Girl Empower in Liberia showed sustained improvements in sexual and reproductive health outcomes, though it did not directly reduce childhood sexual violence victimization.²²³ The HIV prevention trial in South Africa demonstrated short-term effectiveness in reducing risks of intimate partner violence, though the effects diminished post-intervention. The study concluded that multi-layered interventions, including cash transfers, may be most relevant for addressing intimate partner violence during high-risk periods, such as when adolescent girls and young women are finishing secondary school and transitioning to adulthood.²²⁴ This underscores the value of incorporating long-term strategies alongside cash transfers to sustain their protective effects.

Government-run, multi-component (“cash plus”) interventions targeting adolescent girls and boys, like Ujama Salama in Tanzania, have been **promising** in reducing the risk of sexual violence by integrating complementary services into existing cash transfer schemes.



“The woman who engaged in different economic activities to foster family economy [Mama Prita], it inspires me to do the same. Sometimes you can give money to your daughter if their father does not have money at the time. If you as woman you’re able, then the family will be strong.”

—49-year-old female caregiver at endline, LINEA radio drama

“Mama Prita was doing her business very well, and also, she takes care of her family well. I would like to be like her. Us as women should follow business things so we can be better too.”

—37-year-old female caregiver at midline, LINEA Radio Drama, see Norms and Values ²²⁹

Ujana Salama, which included boys and girls, reduced the experience of sexual violence among females by 7 percent. This highlights the importance of a comprehensive strategy that addresses the needs of the entire household and promotes gender-equitable attitudes.²²⁵ More research is needed in other contexts to boost this study’s very promising findings.

Lessons learned

- **Comprehensive interventions** that include cash and voucher assistance and address structural issues and barriers have proven more effective. Where economic skills training is not accompanied by cash transfers, such as with the [Creating Opportunities through Mentorship, Parental Involvement, and Safe Spaces \(COMPASS\)](#) intervention in Ethiopia, results are more limited.²²⁶ The multi-component “cash plus” packages—like in Kenya and Tanzania—integrated gender-related considerations into program design, and linked programs to existing support services, to powerfully enhance the impact of cash and voucher assistance.²²⁷

- **In terms of challenging harmful norms**, initiatives like the Learning Initiative on Norms, Exploitation, and Abuse ([LINEA](#)) radio drama in Tanzania²²⁸ (discussed in the “Norms and Values” chapter) have shown the potential to increase awareness of how income impacts adolescents’ sexual activity. Such initiatives can inspire changes in community attitudes and behaviors and emphasize economic empowerment’s role in preventing certain poverty-driven forms of sexual exploitation. By challenging gender norms and highlighting the importance of economic stability, these programs can contribute to the broader goal of preventing childhood sexual violence.



INSPIRE

6 | Response and support services

How can response and support services prevent childhood sexual violence?

Adolescent- and child-friendly response and support services provide immediate and ongoing assistance to child victims to aid their physical, emotional, and psychological recovery. A range of inclusive services needs to appeal to — and be accessible by — all children, their families, and any witnesses, regardless of age, gender identity, race, ethnicity, or disabilities.

These services may include:

- child-friendly reporting mechanisms;
- immediate emergency response hotlines and helplines with staff trained in talking to children;
- safe housing/shelter for children;
- medical care tailored to children’s needs (e.g., post-exposure prophylactic kits);
- mental health and psychosocial support (e.g., individual, family, or group counseling, therapy, and trauma-informed care);
- legal and justice support with child-friendly legal advocacy and court support;
- reintegration support (e.g., back into school, family, or the community); and
- specific and dedicated support for children who are deaf or disabled (e.g., access to sign language interpreters, support for those living with sight loss, and access support for those living with physical disabilities or special needs).



Prevention and response are interconnected, forming a comprehensive approach to managing and reducing

risks and harms. Effective response services can mitigate the impact of violence, promote healing, and prevent re-perpetration, thereby reducing the need for future response. Data on reporting and response can inform policy and programming and, thus, enhance prevention efforts.

Disclosure and help-seeking behavior

In a six-country study based on data from Violence Against Children and Youth Surveys (VACS), Pereira et al. (2020) found that the prevalence of help-seeking behaviors ranged from:

- 23–54 percent for informal disclosure;
- 16–28 percent for knowledge of where to seek formal help;
- less than 1–25 percent for formal disclosure or help-seeking; and
- 1 to 11 percent for receiving formal help.²³⁰

Case management and referral to services support the process of accessing and following up on the range of care received. Additionally, **prevention** is closely linked to response and support services, as

effective response mechanisms create an environment conducive to more robust prevention efforts. Response and support services can help prevent childhood sexual violence by:

- providing support services for at-risk children and families to reduce the risks or likelihood of exposure to sexual violence before it occurs; and
- offering a comprehensive package of recognition, response, and services so that children who have experienced sexual violence — and adults accompanying them — can identify support, access appropriate care immediately, and secure protection from revictimization.

Evidence from the reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective response and support services were in preventing childhood sexual violence.

- **Recognition, screening, reporting, and disclosure of childhood sexual violence cases** is considered important, though **more evidence is needed** to form strong conclusions about the effectiveness of such interventions.

Table 10. Response and support services: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
Recognition, screening, reporting, and disclosure of childhood sexual violence cases	Needs more evidence	Mixed-method case study (n=1)	Screening for Sexual Violence Against Children	Kenya	Age: 11-17 and parents Gender: Girls and boys, men, and women
Child- and adolescent-friendly response and support services	Promising	Quasi-experimental (n=1); Qualitative case study (n=1)	Empowering Communities to Protect Children; Mobile Service Delivery Model	Uganda, Lebanon (Syrian refugees)	Age: 0-18, caregivers Gender: Girls, boys, men, and women



- **Child- and adolescent-friendly response and support services**, when accessible to diverse children and integrated into formal structures, are considered **promising**. They have improved children's self-efficacy and access to reporting and response services, and increased referrals.²³¹

Recognition, screening, reporting, and disclosure of childhood sexual violence cases: Needs more evidence

Facilitating the recognition and reporting of childhood sexual violence helps ensure more immediate response and future prevention. This area includes education sessions with children and adults about recognizing, reporting, and accessing support services for sexual violence, screening children for childhood sexual violence, and strengthening reporting mechanisms to ensure they are accessible, safe, and child-friendly.

Screening for Sexual Violence Against Children, Kenya, 2017²³²

- **Program:** This 2017 program conducted screening to assess children for experiences of sexual violence at the Casualty Department of Kenyatta National Hospital in Nairobi (children, both girls and boys, aged 11 to 17) and two Nairobi primary schools (students, girls and boys, in Classes 6 to 8, aged 10 to 17). It also included parent dialogues, student

sensitization, service provider training on screening and responding to child victims, and sexual violence service provision.

- **Evaluation:** The intervention was evaluated using a mixed methods study design, with quantitative data collected primarily via the screening tool; qualitative data was recorded with field notes during interactions with child victims and parents, group interviews with hospital personnel who supported the intervention, and semi-structured individual interviews with school personnel who supported the intervention.

- **Results:** In the school and hospital sites combined, the study results aligned with eight of eight feasibility outcomes, resulted in disclosures of and care for victims reporting sexual violence, and elicited high levels of satisfaction from children regarding the intervention, its effects on parent-child communication, and its facilitation of disclosing and discussing sexual violence experiences with their parents. The intervention was considered feasible and acceptable to participating Kenyan adults and children.

Child- and adolescent-friendly response and support services: Promising

Strengthening child- and adolescent-friendly response and support services is crucial to improving reporting and supporting healing and justice. This may include establishing child-centered policies (such as codes and conduct and resource allocation) within response services, training response services staff and leadership, integrating response services into safe spaces and schools, and the community mobilization of child protection mechanisms.

Empowering Communities to Protect Children, Uganda, 2020-2021²³³

- **Program:** This intervention targeted 3,000 children and 6,086 household members in Kitgum District, Uganda. It included training local child protection stakeholders, engaging children through school-based protection clubs, conducting community dialogues with parents and caregivers (fathers and mothers) on violence against children, and media campaigns.



- **Evaluation:** The evaluation used a quasi-experimental design with a matched control group of children and caregivers and statistical analyses, including difference-in-difference estimators. The process involved structured surveys, interviews, and focus groups to collect data from 1,232 respondents at baseline and 1,230 at endline.

- **Results:** Intervention areas saw improved reporting, use of referral pathways, trust in and capacity of the structures handling cases of violence against children, willingness of children and caregivers to report, and awareness of and participation in child protection activities.

Mobile approach for delivering gender-based violence services to Syrian refugees, Lebanon, 2015-2016 ²³⁴

- **Program:** Three mobile teams and a floating male community mobilizer rotated between sites based in urban and informal tented settlements within large refugee populations. Each team consisted of a community mobilizer, a caseworker, and an adolescent girls’ assistant. They provided psychosocial support, risk mitigation activities, and individual case management for survivors and/

or victims of gender-based violence. The teams also conducted community outreach and engagement activities.

- **Evaluation:** A qualitative study used purposive sampling in six diverse sites (based on geography and living situations) to select and engage 38 Syrian refugee women, 26 adolescent girls, and 11 International Rescue Committee staff members in in-depth interviews; data was analyzed using NVivo with deductive and inductive approaches following Sullivan’s “Social and Emotional Well-Being Promotion” conceptual framework.

- **Results:** The results showed that the mobile approach met international standards for gender-based violence service delivery, overcame barriers to accessing essential services, and supported participants’ feelings of social support, self-efficacy, and knowledge. Although challenges remained in terms of referring to legal and medical services.

“The advice they gave us in the activities made me feel safer. . . . I used to be scared of going out of the house, now it’s normal for me; I’m not scared anymore.”

—16-year-old Syrian refugee in Lebanon, participant in mobile program

[Referring to the mobile service staff] “Our relationship developed. We became more than friends. We became sisters. For instance, if I have troubles with my mom or dad, I tell her. Everything that happens between me and my parents . . . I tell her.”

—14-year-old Syrian refugee in Lebanon, participant in mobile program²³⁵

Additional insights from wider literature

- **Therapeutic services, South Africa.** Mathews et al. discuss the limitations of current models of care in contexts like South Africa, where high levels of trauma may remain even after accessing therapeutic services.²³⁶
- **Trauma-focused cognitive behavioral therapy, Zambia,** was found effective in reducing trauma symptoms in children affected by sexual abuse in the 2019 *What Works to Prevent Sexual Violence Against Children: Evidence Review*.²³⁷ Catholic Relief Services provided trauma-focused cognitive behavioral therapy for children and adolescents in Zambia in existing health structures. They assessed the change in levels of post-traumatic stress experiences and symptoms and the severity of SHAME symptoms.²³⁸ The average PTSD and SHAME scores were significantly lower after treatment than the average pre-treatment score, with similar results for boys and girls.²³⁹
- **Integrated services, one-stop shops.** Radford et al. (2015) note that it is vital to provide integrated response – including health, protection and justice actions. Having a key worker applying a case management approach to coordinate services has been found effective across high-income countries, low- and middle-income countries, and, increasingly, humanitarian settings.²⁴⁰
- **Therapeutic interventions for people who have committed sexual offenses** against children may include approaches that focus on identifying and addressing the underlying causes of offending behavior, enhancing self-control, and developing healthy interpersonal skills.²⁴¹ Research in Canada indicates that cognitive behavioral therapy/risk-needs-responsivity reduces repeat offenses.²⁴²

Challenges and evidence gaps

Challenges

- **Limited coverage, capacity, and quality of services:** There is often insufficient funding and a lack of well-trained staff and community members to provide the tailored, confidential

support required by children. This can result in response services that are inadequate, ineffective, or inappropriate or that fail to meet the diverse needs of children, including those who are deaf or disabled. Such limitations can also prevent children from trusting and accessing available services.

- **Barriers exist** to reporting sexual violence and accessing services:
 - **Practical barriers** include distance to services (plus availability and cost of transport), as well as children’s or parents’ physical disabilities.
 - **Cultural sensitivities** or fear of stigmatization can lead families to distrust service providers and thus restrict children’s access to these services.²⁴³
 - **Structural barriers, legislative frameworks, harmful gender and social norms and beliefs, and discrimination,** among other challenges, may contribute to unequal availability of, access to, and design of, services for diverse groups of children. Depending on the context girls,²⁴⁴ boys, children who are disabled,²⁴⁵ children who are LGBTIQ+, and children living with HIV²⁴⁶ may all be denied treatment. Racial and ethnic bias has also been shown to impact on whether children are believed and receive necessary care.²⁴⁷



- **Evaluation challenges:** The lack of clear agreement among different actors on what defines adolescent or child-friendly services makes it hard to assess if services meet quality standards.²⁴⁸ Logistical and cultural sensitivities, as seen in the study in Uganda, can also hinder the evaluation process.²⁴⁹

“I think it’s one of those stereotypes, I don’t know the correct word, or maybe it’s taboo. If a man seeks help, they are being judged, they are being stigmatised [sic], but if a woman seeks help, then it will be accepted.”

—Young female 16 to 23 in Namibia, *Disrupting Harm*²⁵⁰

Evidence gaps

- **Research** is needed on the relationship between a strengthened social service workforce and child help-seeking behavior.
- **More research** is needed to identify the most appropriate and effective prevention and response interventions for supporting children displaying harmful or problematic sexual behavior, especially in low- and middle-income countries.
- **More support services** need to be made available for non-offending individuals with a sexual interest in children in diverse settings. This should be accompanied by rigorous evaluation into intervention efficacy.
- **The non-formal response** at the community level and how this contributes to prevention efforts is largely undocumented.
- **Research** is limited on the essential components of a case management system and what can and should be adapted for a setting. Guidance on how to adapt case management practices to the context is limited, and this may negatively impact response services’ efficacy.

- **We need to explore** how digital tools and technology can enhance the delivery and accessibility of response and support services and how they can play a role in preventing childhood sexual violence.

- **We need to understand** better what initiatives work when we are trying to reach out to often-excluded and at-risk groups of children — including boys and nonbinary children, those with disabilities, and those from oppressed or marginalized ethnic or racial groups — and increase their access to services.

- **Capaldi et al. (2024)** offer important global insights into the vulnerabilities, research gaps, and priorities in addressing child sexual abuse/exploitation among LGBTIQ+ children.²⁵¹

Insights and lessons from response and support interventions

Facilitating the **recognition, screening, reporting, and disclosure of childhood sexual violence cases** is considered critical, though there is **not enough evidence** to form strong conclusions about their effectiveness in preventing childhood sexual violence. Undie et al. (2020) stress the critical ethical importance of linking efforts that enhance recognition and reporting to accessible, child-friendly services. When done well, proactive identification may increase the detection of child survivors and/or victims and expand their access to care. Many participating school and hospital staff called **for expanding** the screening intervention to additional age groups and locations, as well as making the process routine.²⁵²

Interventions linked to the other INSPIRE strategies—such as norms and values, parent and caregiver support, education and life skills, and income and economic strengthening—have also led to children’s and parents’ increased recognition of childhood sexual violence, which in some cases has improved help-seeking behavior and service use. The SKILLZ Street girls’ soccer clubs’ activities in South Africa increased participants’ knowledge of where to access rape services by 14 percent.²⁵³ Body safety training programs improved caregivers’ recognition of childhood sexual violence and preschool children’s saying, doing, telling, and reporting skills.²⁵⁴ Cash plus or multi-component interventions targeting adolescents can have a



significant positive effect on sexual and reproductive health knowledge and service use.²⁵⁵

Interventions focused on **strengthening child- and adolescent-friendly response and support services** are considered essential, and categorized as **promising**, in preventing and responding to childhood sexual violence. For example, a study in Zimbabwe found that establishing victim-friendly courts led to positive outcomes such as a significant rise in awareness of intrafamilial child sexual abuse and leveraging of community structures for better reporting.²⁵⁶ However, limited resources still hinder implementation. For instance, the evaluation of Empowering Communities to Protect Children in Uganda suggested that referral to services increased as service provision improved. It also demonstrated that community links with schools and community leaders leveraged broader support, while highlighting the criticality of integrating informal and formal child protection mechanisms.²⁵⁷

Additionally, UNICEF's global review of its child protection systems strengthening work pointed to the inability of formal systems in most of the review countries to provide appropriate community-level prevention and response services causing a major bottleneck to access.²⁵⁸ However, as highlighted earlier in this chapter, one program in Lebanon used creative solutions to address Syrian refugees' barriers to accessing '*gender-based violence*' services in a challenging humanitarian context: Establishing safe spaces close to women and girls' homes, offering mobile services, and providing free childcare all helped mitigate problems relating to checkpoints, transport costs, and mobility constraints. The mobile approach created links between communities and existing formal services, and incrementally introducing services (first recreational activities, later case management) helped mitigate initial fears preventing women and girls' attendance.²⁵⁹

Lessons learned

- **Provide sufficient resources and scale up inclusive services.** Response and support services must be adequately resourced, supported, and scaled up to effectively address childhood sexual violence. A range of tailored community-level services must be available that are child-friendly; gender-sensitive; inclusive and accessible to all children – considering factors such

as disability, race, ethnicity, and LGBTIQ+ identity; trauma-informed; survivor- and/or victim-centered; accessible to all children; and have broad community support. Services need to be equipped to address the specific needs of children displaying harmful or problematic sexual behaviors.

- **Address gender bias:** Given boys are often excluded from sexual and reproductive health services, involving male staff in outreach activities may help mitigate these access issues.²⁶⁰
- **Integrate systems.** Local responses to child and adolescent sexual violence need to be integrated into formal and national child protection, health, and justice systems. This requires the involvement of key government agencies, including health and social welfare departments, child protection services, police, and healthcare providers, to ensure that all the needs of victims are met.
- **Leverage public resources.** Increase government budgets through policy and advocacy to scale up services and strengthen social service workforce skills. This is key to strengthening child protection systems.²⁶¹
- **Work with non-offending individuals with a sexual interest in children, and those who have been found guilty of such offenses.** Help for non-offending individuals with a sexual interest in children to prevent acts of sexual violence against children is limited. UNICEF's stock taking report evaluating the Model National Response found the following "...the majority of countries surveyed (74 per cent) do not have any specific support system for offenders, and none of the countries surveyed report having any kind of support system for people with a sexual interest in children to prevent them from harming children."²⁶² A key opportunity for preventing possible childhood sexual violence is thus being missed.



INSPIRE

7 | Education and life skills; Interventions happening in schools to prevent childhood sexual violence

How can education and life skills interventions that happen in schools prevent childhood sexual violence?

From pre-primary through to high school, school-based childhood sexual violence prevention interventions can equip children and adolescents with the attitudes and practical skills to set boundaries, communicate effectively, understand consent, promote healthy relationships, strengthen protective skills, reduce harmful behaviors, and seek help.²⁶³

The continuity of contact provided by teachers and school staff can also improve recognition and response to child maltreatment, including sexual violence.²⁶⁴ However, few studies have measured whether increased knowledge and skills from education and life skills-based interventions lead to a decrease in childhood sexual violence victimization. Studies caution against isolationist school-based programs, highlighting the need to embed them within a more comprehensive prevention framework ecosystem.²⁶⁵



School-based programs incorporated into curricula may include multiple interactive sessions and resources that strengthen competencies around:

- respect, non-discrimination, and equity;
- social and emotional learning — including emotional resilience and communication skills;
- setting personal boundaries and bodily autonomy;
- understanding sexual violence;
- self-defense and protection; and
- help-seeking behavior to encourage disclosure and reporting of abuse.

School-based programs are often organized by age group or comprehension level and many times are split by gender. They can be delivered through **broad-based programs** and/or **selective programs**. Broad-based programs may be more generic but offer reach. While selective programs focus on specific issues, needs, or building protective behaviors among groups of children who face compounded risks from living in high-risk contexts or due to societal discrimination.

Evidence from reviewed studies

This section summarizes our findings from the reviewed studies. It looks at how effective education and life skills interventions were in preventing childhood sexual violence.

- **Broad-based prevention modules integrated in school curricula**, when delivered using inclusive, transformative approaches by trained facilitators, are considered **effective**. They have shown positive outcomes in knowledge, skills, and help-seeking,²⁶⁶ occasionally reducing self-reported experiences of ‘dating violence’.²⁶⁷
- **School-based self-defense interventions** for sexual violence prevention, especially when part of comprehensive prevention programs, are considered **effective**. They have shown a significant reduction in ‘sexual violence’ victimization in humanitarian²⁶⁸ and stable settings.²⁶⁹

Table 11. Education and life skills: Current effectiveness of intervention types

Intervention type	Effectiveness classification	Types of studies evaluating intervention	Program names (where available)	Contexts	Age/gender of program participants
Broad-based prevention modules embedded in school curricula	Effective	Systematic review (n=6); Randomized controlled trial (n=3); Quasi-experimental (n=3); Pre-post (n=3);	I Have the Right to Feel Safe at All Times”; Doll program IMPower/ SOS; IMPower; Mi sol; SchoolBased Child Sexual Abuse Prevention Programme (Program Prevensi Pelecehan Seksual Berbasis Sekolah, P3SBS; Reshaping Adolescents’ Gender Attitudes; Body Safety Training).	Ecuador, China, Peru, Pakistan, the Philippines, Indonesia, India, Viet Nam.	Age: 7 – 18 and teachers Gender: Girls and boys, male and female teachers
School-based self-defense interventions for sexual violence prevention	Effective	Randomized controlled trial (n=3); Qualitative case study (n=1)	IMpower; Sources Of Strength; Your Moment of Truth; Empowerment Transformation Training (ETT).	Malawi, South Sudan (Kakuma refugee camp), Kenya	Age: Primary and secondary Gender: Girls, boys, and women
Curriculum design and educator training for delivering childhood sexual violence prevention modules	Effective	Systematic review (n=1); Quasi-experimental (n=2)	Don’t Touch My Body! Body Safety Training	Türkiye	Age: 3-6 years, university students Gender: Girls and boys, male and female university students
School-based prevention interventions for children and adolescents with disabilities	Prudent	Pre-post (n=2)	Child Sexual Abuse Prevention Intervention, DeafKidz Defenders	Pakistan, South Africa	Age: 5 – 15 years Gender: Girls and boys
School-based interventions to prevent harmful or problematic sexual behaviors by children and adolescents	Conflicting	Randomized controlled trial (n=1); Quasi-experimental (n=1); Pre-post (n=1); Systematic review (n=1)	#Tamojunto	Colombia, Mexico	Age: 7 - 17 Adolescents Gender: Girls, boys, women, one man

- **School-based prevention interventions for children and adolescents with disabilities** are considered **prudent**. They show hopeful results but need more and stronger studies.

- **School-based interventions to prevent harmful or problematic sexual behaviors by children and adolescents** are considered **conflicting** due to one study with concerning results.²⁷⁰ However, when implemented fully, as intended, and in ways that are accessible to the program participants, they have successfully changed behaviors²⁷¹ and reduced childhood sexual violence victimization.²⁷²

- **Curriculum design and educator training for delivering childhood sexual violence prevention modules** are considered **effective**. They have shown increased sensitivity regarding ‘sexual abuse’ prevention, as well as positive attitudes and knowledge on sexual health.²⁷³

The studies in this chapter are presented in a more synthesized form than in the other INSPIRE strategy chapters given the far higher number of studies found on school-based education and life skills activities (30 out of our 72 total included studies). See the “Norms and Values” chapter for small-group education and life-skills programs delivered outside school settings to children and adolescents.

Broad-based prevention modules integrated in school curricula: Effective

Integrating guided modules on preventing childhood sexual violence into school curricula has led to positive results in multiple countries and at all schooling levels from pre-school to high school. Sessions typically involve peer learning, role-play, critical reflection, and other interactive strategies. Content on preventing childhood sexual violence may be embedded into different types of programs or approaches in schools.

“I helped children understand wrong from right.”

—Teacher from South Africa working with deaf children, DeafKidz Defenders pilot²⁷⁴

It can adopt a whole school approach²⁷⁵ – delivered using for example, UNESCO’s Connect with Respect²⁷⁶ or Raising Voices’ Good School Toolkit. It can be founded on comprehensive sexuality education.²⁷⁷ It may be based on social and emotional learning²⁷⁸ modules.

“I Have the Right to Feel Safe at All Times”, Ecuador, 2016–2017²⁷⁹

- **Program:** This 10-week *school-based child sexual abuse prevention* program in Ecuador targeted children aged 7 to 12 in six public primary schools. It aimed to increase children’s knowledge and provide tools on self-protection, self-esteem, a personal safety net, good versus bad secrets, appropriate and inappropriate touching, avoiding situations of risk, the right to say “no,” disclosing ‘*abuse*’, and recognizing ‘*abuse*’ is never the child’s fault.

- **Evaluation:** A randomized controlled trial evaluated the immediate and medium-term impacts by administering a questionnaire at three points in time about children’s knowledge of ‘*child sexual abuse*’ self-protection.

- **Results:** The self-protection program increased and maintained childhood sexual violence knowledge six months post-intervention, with the greatest changes related to the subject of “knowing that not all secrets must be kept” and less change in identifying potential perpetrators.

Peer Education Model, Indonesia²⁸⁰

- **Program:** This educational training program in Grabag sub-district, Magelang Regency, Indonesia, used a two-phase approach: First, researchers and teachers selected 10 pupils to be peer educators. These pupils received training for 45 minutes a day for six days, including lectures, discussion, and role-play, using flipcharts, games, and video games. Subsequently, these peer educators led activities with other students for two weeks in 25-minute sessions.

- **Evaluation:** The quasi-experimental study with 84 school-aged children from two primary schools sought to understand the peer education’s effect on students’ knowledge and self-efficacy in preventing sexual violence.

- **Results:** The study found that education by peers can improve the knowledge and self-efficacy of primary school-aged children in preventing sexual violence.



Tackling Online Child Sexual Exploitation (TOCSE), Vietnam, 2018–2021²⁸¹

- **Program:** Aimed at educating and protecting children from the dangers of online child sexual exploitation and abuse, TOCSE focused on children aged 12 to 18 (male and female) and adults in Da Nang, Vietnam. The program took a child-empowerment approach, promoting children’s role in formulating policies, programs, and action plans on issues related to children in general and online child protection in particular.
- **Evaluation:** The pre-post mixed methods evaluation compared baseline and endline data from 21 focus group discussions, 25 key informant interviews, and surveys involving 400 students, 400 parents, and 380 teachers.
- **Results:** The study showed a significant increase in children’s awareness, knowledge, and identification of online risks (such as sexual exploitation) as well as strengthened community and institutional support structures that enhance preventative and response measures.

Doll program, China, 2022²⁸²

- **Program:** This Doll program for preventing child sexual abuse included an e-educational toolkit providing sexual education for lower primary school children in China. The toolkit consisted of digital textual materials and engaging educational games, with doll images used to represent different characters in real life (e.g., strangers, doctors, and parents). The program’s content aligned with [UNESCO guidelines for sexuality education](#) and Chinese textbooks dedicated to e-sexuality education for elementary school children – in particular, the series “Cherishing Life” edited by Wenli Liu. Participants were children, and in some evaluation groups, also their parents.
- **Evaluation:** A randomized controlled trial divided 181 primary school children with a mean age of 6 into three groups (child only, child and parent, and

control) to evaluate the program’s effectiveness in preventing ‘*child sexual abuse*’. Evaluation measures used included the Children’s Knowledge of Abuse Questionnaire (CKAQRIII), including the Appropriate Touch Scale and the Inappropriate Touch Scale.

- **Results:** Both the child-only and child-and-parent groups showed significant increases in ‘*childhood sexual abuse*’ prevention, as measured by the Appropriate Touch Scale and Inappropriate Touch Scale, while the control group only had an increased score in the Inappropriate Touch Scale. Parental engagement enhanced the program’s effectiveness.

Safe Schools for Teens, the Philippines, 2015–2017²⁸³

- **Program:** This program in the Philippines aimed to improve teachers’ and students’ disclosure, identification, and reporting of ‘*child sexual abuse*’ through training, as well as prevent peer ‘*dating abuse*’ and increase reporting through in-classroom modules adapted from the “Safe Dates” program in the US and mindfulness training.
- **Evaluation:** A two-phase cross-sectional study was conducted with 237 female and male teachers and 1,458 female and male grade 7 students over two years.



- **Results:** The study found significant declines in adolescents’ reports of physical, sexual, and emotional ‘*dating violence*’ and teachers’ apprehension in reporting and significant increases in adolescents’ self-reported knowledge on ‘*abuse*’, helping friends, impulse control, and emotional clarity as well as teachers’ confidence in identifying and reporting ‘*child sexual abuse*.’



Enhancing children’s awareness of sexual abuse with cartoons, Pakistan²⁸⁴

- **Program:** Educational cartoons — developed with input from clinical psychologists, neuroscientists, and emotional intelligence researchers — respected cultural and religious sensitivities in Pakistan by creating a “personal safety and space bubble” concept that did not explicitly mention “sexual exploitation.” Over six weeks, the experimental group of 120 girls and boys (aged 9 to 12) watched the animated cartoon daily and participated in related activities like drawing, role-playing, and discussions to reinforce the concepts.

- **Evaluation:** The control group consisted of 40 children aged 9 to 12. Covid-19 movement restrictions were in place at the time of the data collection process.



- **Results:** The study showed increases in children’s awareness about personal rights, their “space bubble,” and personal safety; capacity to talk about experiences of ‘*abuse*’ or ‘*harassment*’; and responsiveness during in-person (as opposed to online) sessions.

“Our space bubble is a hand-distance from your left, right, front, and back, and no one can enter it without our consent.”

—Child participant of the video literacy intervention in Pakistan²⁸⁵

These additional evaluated interventions also met our screening criteria but we were unable to give further details here due to the large number of studies to cover: a program on reshaping adolescents’ gender attitudes in India,²⁸⁶ Mi Sol in Peru,²⁸⁷ and the ‘*School-Based Child Sexual Abuse Prevention Programme (sic)*’ in Indonesia.²⁸⁸

School-based self-defense interventions for sexual violence prevention: Effective

The risks of childhood sexual violence may be heightened in certain settings, such as during armed conflict and displacement or in urban informal settlements. Especially where risks are considered high, self-defense interventions have been used to prevent childhood sexual violence. However, when “target hardening”²⁸⁹ interventions are not integrated into comprehensive programs that also address preventing perpetration, these interventions may pose ethical challenges, as they place the burden of responsibility on children to act in ways to prevent sexual violence.

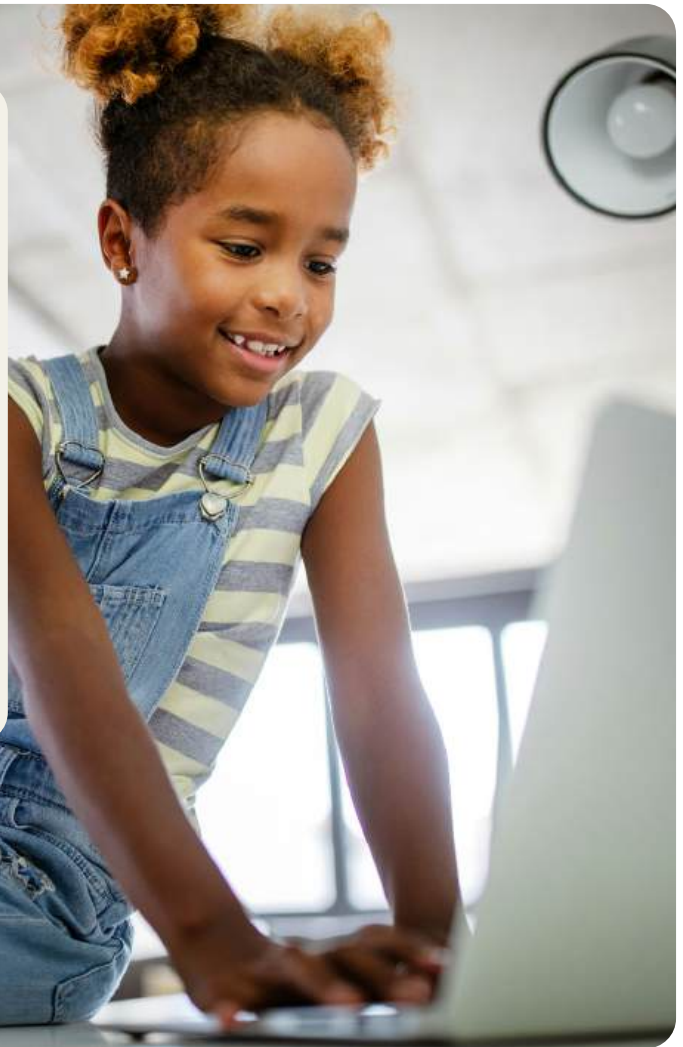
Empowerment Transformation Training, South Sudan and Kakuma refugee camp, Kenya, 2018–2019²⁹⁰



- **Program:** The Empowerment Transformation Training program was an adapted IMPower empowerment self-defense program carried out in seven schools in South Sudan and Kakuma refugee camp, Kenya. It comprised six weekly two-hour sessions, followed by two “booster” sessions (of two hours each) at three and six months. The program facilitators were all Kenyan women with extensive

“One of the heart-warming experiences was witnessing children with autism, special needs, or slow intellectual processes progressing really well after watching the animation and playing the games. Usually they struggle with learning, and they receive content taught at a different level of understanding but with this online learning system they did exceptionally well.”

—Session leader, DeafKidz Defenders, South Africa²⁹⁴



training experience, who received three weeks of training followed by one year of mentoring.

- **Evaluation:** A cluster randomized controlled trial assigned seven schools to the intervention and nine control schools to a life skills intervention; girls and young women aged 9 to 35 completed anonymous surveys at baseline and 12-month follow-up.

- **Results:** Intervention schools saw a decrease in annual rape victimization rates from 10.7 percent to 5.5 percent, increased confidence, greater rates of rape disclosure, and improved knowledge of self-defense strategies compared to control schools.

Empowerment self-defense training among adolescent girls, Malawi, 2015–2016 ²⁹¹

- **Program:** This version of the IMPower empowerment self-defense program, originally developed by No Means No Worldwide, was collaboratively tailored

to the Malawian context and delivered in 2015–2016. It featured seven months of intensive instructor training and six weekly, two-hour intervention sessions (plus refresher sessions) for female primary and secondary school students on boundary testing, negotiation, diffusion tactics, verbal assertiveness, and (as a last resort) physical self-defense.

- **Evaluation:** This cluster randomized controlled trial included 6,644 female students at baseline from 141 schools in three districts in Malawi, who were randomly assigned to the intervention or a control life skills training; follow-up data was collected from 4,278 female students.

- **Results:** Both primary and secondary female students experienced significant reductions in ‘sexual violence’ prevalence and incidence and improvements in self-defense knowledge in the intervention group compared to the control group.



School-based prevention interventions for children and adolescents with disabilities: Prudent

Selective prevention interventions are sometimes adapted to meet the specific needs of children with disabilities. These engage children who have diverse learning needs and communication challenges. This is a group of children who may be at heightened risk of sexual violence.

DeafKidz Defenders, Pakistan and South Africa, 2022²⁹⁵

- **Program:** The DeafKidz Defenders program, a games-based safeguarding intervention for deaf girls and boys, was piloted across 10 schools in Pakistan (318 deaf children ages 7 to 11), and South Africa (302 deaf children ages 5 to 15). The pilot intervention included training for teachers and other session leaders; offline, facilitated sessions; and online activities.

- **Evaluation:** This mixed methods, pre-post evaluation aimed to identify DeafKidz Defenders' impact on the children who received it and the 'adults around the children', as well as how the different program elements contributed to this impact.

- **Results:** The study showed that children's educational experiences and communication abilities were the main barriers to learning, not gender or age. The evaluation showed that combining online materials and offline activities is an effective approach: over 90 percent of children demonstrated increased knowledge and application of safety messages after the intervention.

IMPower and Sources of Strength (SOS), Kenya, 2016–2018²⁹²

- **Program:** Adolescents aged 10 to 14 in 94 schools across six Nairobi informal settlements participated in six weekly two-hour sessions on sexual assault prevention that included role-plays, discussions, and skills practice from the newly revised Sources of Strength (SOS) intervention (for adolescent boys) and an adaptation of IMPower (for adolescent girls).

- **Evaluation:** Sarnquist et al. (2024) carried out a cluster randomized controlled trial measuring change in girls' self-reports of sexual assault and social, emotional, and academic self-efficacy.

- **Results:** The research noted non-significant differences between study arms in social, emotional, and academic self-efficacy and rates of perpetration and victimization of rape at follow-up. However, the differences between the intervention and control groups appear largely driven by differences at baseline.

Kågesten et al. (2021) carried out a qualitative study in five schools that implemented IMPower for girls, alongside Your Moment of Truth for boys in Kenya. Through focus group discussions and in-depth interviews,²⁹³ they found that girls learned to recognize and resist sexual assault, learned to negotiate consent, and gained self-confidence; boys learned to avoid risky behaviors, understand and respect consent, and adopt positive values. Both girls and boys valued skilled facilitators and interactive content.

“Children learn through play, difficult concepts and clearing the air about myths and misconceptions in a positive and supportive manner was made easy with [DeafKidz Defenders].”

—Teacher discussing DeafKidz Defenders²⁹⁶

Child Sexual Abuse Prevention

Intervention, Pakistan²⁹⁷

- **Program:** Fifteen girls with mild intellectual disabilities (aged 10 to 15) in Pakistan participated in five sessions on body ownership, private parts, appropriate and inappropriate behavior, and refusing and reporting sexual offenders. The sessions were adapted from the Child Sexual Abuse Prevention Intervention developed in Korea.
- **Evaluation:** This non-randomized (pre-post) study aimed to evaluate the preliminary effect, acceptability, and feasibility of a ‘sexual abuse’ prevention program for children with intellectual disabilities in a rural public school.
- **Results:** Participants found the intervention to be acceptable and feasible,²⁹⁸ and it delivered positive results in improving knowledge and skills, due in part to the frequent use of role-playing.

School-based interventions to prevent harmful or problematic sexual behaviors by children and adolescents: Conflicting

Adolescent or teen dating violence may include sexual, physical, and psychological violence. It affects millions of young people worldwide, especially – but not exclusively – adolescent girls. For example, one study in Colombia found that intimate partner violence is increasingly happening in younger couples, with reported victims as young as age 10.²⁹⁹ The scant research assessing adolescent dating violence among boys or transgender youth suggests that boys are also at risk of victimization and that transgender youth might be at greater risk than cisgender youth.³⁰⁰ Some programs are now addressing the harmful or problematic sexual behaviors that children and adolescents may display toward others of their generation. These programs may combine elements of other intervention types, such as bystander responses and safe dating, or may include aspects of vocational skills, cash and voucher assistance, or sexual and reproductive health interventions.

Adolescent dating violence is defined as a type of intimate partner violence between two adolescents in a close relationship, which may include sexual, physical, or psychological abuse.³⁰¹

‘Gender-based intimate partner violence’ prevention program, Colombia³⁰²

- **Program:** Aiming to prevent gender-based intimate partner violence in Colombia by working with primary school children, the three-month program was designed based on a review of successful preventive programs and an identification of the main predictors of intimate partner violence. Delivered to 195 boys and 149 girls (with an average age of 7.8 years) through two weekly one-hour sessions, it included modules on gender stereotypes, gender-based intimate partner violence, and socio-emotional competencies.
- **Evaluation:** A quasi-experimental study evaluated the program’s effectiveness using an experimental group of 200 and a control group of 144 participants.
- **Results:** The study showed reduced gender stereotypes and acceptance of peer aggression and violence against women, as well as increased affective empathy, among participants in the experimental group.

Comprehensive sexuality education, Mexico, 2016–2018³⁰³

- **Program:** A course focused on encouraging critical reflection about gendered social norms was conducted at a state-run secondary school in Mexico City. It involved girl and boy students aged 14 to 17, teachers, and health educators.
- **Evaluation:** A longitudinal quasi-experimental study explored how the sexuality education program might prevent partner violence.
- **Results:** Four key elements seemed to lead to changes in beliefs, intentions, and behaviors related to gender, sexuality, and violence: the ability to reflect on romantic relationships, communication skills, care-seeking behavior, and addressing discriminatory norms.

#Tamojuntó, Brazil, 2014–2015³⁰⁴

- **Program:** #Tamojuntó adapted the European program “Unplugged” for Brazilian public schools through a partnership between the Brazilian Ministry of Health and the United Nations Office on Drugs and Crime. The program aimed to prevent

alcohol and drug use by enhancing personal and interpersonal skills and transforming beliefs and social norms that influence behavior.

- **Evaluation:** A randomized controlled trial examined #Tamojuntó's effects on youth sexual risk behaviors such as 'teen dating violence'. It involved 6,391 seventh- and eighth-grade students aged 11 to 15 (51 percent female; mean age 12.6 years) from 72 public schools in six Brazilian cities.

- **Results:** The findings indicated that #Tamojuntó may be harmful to preventing sexual risk behaviors, especially among girls, as follow-ups showed increases in the risk of lifetime sex, the likelihood of girls having engaged in sex during the past month, and the chance of engaging in condomless sex. However, survey results could have been negatively influenced by students' low levels of written comprehension as well as teachers' decisions to cut out key content to fit time constraints.

Curriculum design and educator training for delivering childhood sexual violence prevention modules: Effective

Enhancing the quality of education and life skills interventions to prevent childhood sexual violence can significantly increase their effectiveness. Well-delivered programs can boost children's protective factors, such

as improving knowledge and self-efficacy skills. Key elements may include:

- developing inclusive, transformative³⁰⁵ learning content;
- designing and delivering curricula through engaging, accessible pedagogical methods; and
- providing educators with the knowledge and skills to deliver programs well.

Body Safety Training, Türkiye, 2019³⁰⁶

- **Program:** A creative drama leader and school counselor delivered seven 25- to 30-minute sessions in Türkiye in 2019. A total of 72 preschool girls and boys (aged 3 to 6 years old) participated in small groups of about 10 children each. Sessions aimed to help children recognize potentially abusive situations and take appropriate actions for self-protection including: (i) verbal, say no and (ii) behavioral responses, getting away, telling a trusted person.

- **Evaluation:** The quasi-experimental study used a pretest-posttest experimental design with the "What If" Situations Test, wherein the control and treatment groups both received the Body Safety Training and the treatment group engaged in an additional 10-minute creative drama activity before each session in line with the previous session's topic.



- **Results:** Post-test scores were significantly higher in both groups; the creative drama method positively impacted the development of preschool children’s personal safety skills and improved children’s attitudes toward their own bodies.

Don’t Touch My Body! awareness education, Türkiye, 2018–2019³⁰⁷

- **Program:** The training was delivered in 2018–2019 to raise awareness of ‘*child sexual abuse*’ among individuals studying child development at a university in Türkiye so that these students would know about the need to protect children in the future.
- **Evaluation:** The quasi-experimental study used a single-group pretest-posttest model with 87 female and male university-age students to evaluate the program’s effectiveness.
- **Results:** The study recommended including lessons on child abuse in the university educational curriculum and promoting programs building awareness of the issue. After the training, there was an increase in participants’ sensitivity regarding ‘*sexual abuse*’ prevention, as well as positive attitudes and knowledge among participants on the use of correct anatomical names when teaching about the genitals and special regions of the body.

Additional insights from wider literature

The Safe Dates program, US, which targets middle school students in the US and features a school-based curriculum, peer-scripted play, and a poster contest, has been shown to significantly reduce various forms of dating violence for up to four years.³⁰⁸ An adapted version of the program was implemented with resettled Karen refugee youth from Myanmar/Burma in the US. A study evaluating the program found changes in attitudes toward violence between pretest and follow-up, with reduced tolerance for ‘abuse’. Sadly, this did not last over time.³⁰⁹ A further study testing the program’s acceptability found that participating Karen youth were satisfied with the program and found it to be enjoyable and informative.³¹⁰

Violence prevention curriculum, Haiti, 2013. An evaluation found increases between pretest and posttest in the percentage of high school students who could list emotional and physical forms of abuse, signs

that a person might be experiencing or perpetrating dating violence, for helping them if they were, and anger management methods.³¹¹

The “Safer Surfer” program, which was mostly implemented in schools in high-income countries, addressed the increased role of technology and the internet in childhood sexual violence, blocked specific sites, and prevented exposure to predatory online behavior. A pre- and post-test evaluation showed that children who used Safer Surfer had significantly improved knowledge about safety and risks associated with chat rooms.³¹²

“Fourth R: Skills for Youth Relationships,” Canada.³¹³

This was a curriculum on healthy relationships and conflict *resolution skills* for high school students in Canada. It was integrated into the school system and significantly reduced physical dating violence among students.

LGBTQ+ Youth-Generated Intervention Concepts:³¹⁴

Coulter and Gartner (2022) highlight a co-design process where LGBTQ+ youth, who are at higher risk of ‘teen dating violence’, generated and refined intervention concepts aimed at reducing ‘teen dating violence’. This youth-centered approach focused on improving education on healthy relationships, enhancing support systems, and strengthening advocacy for both LGBTQ+ and non-LGBTQ+ youth.

“They talked completely about straight couples only.”

—Pansexual/queer, gender not disclosed, 15-year-old in the US, reflecting on school sexuality education³¹⁵

Challenges and evidence gaps

Challenges

- **Schools can be potential sites of harm.** Children’s and adolescents’ participation in education is understood to reduce exposure to sexual violence.³¹⁶ However, schools also pose very real risks as potential sites of harm.³¹⁷ Perpetrators of

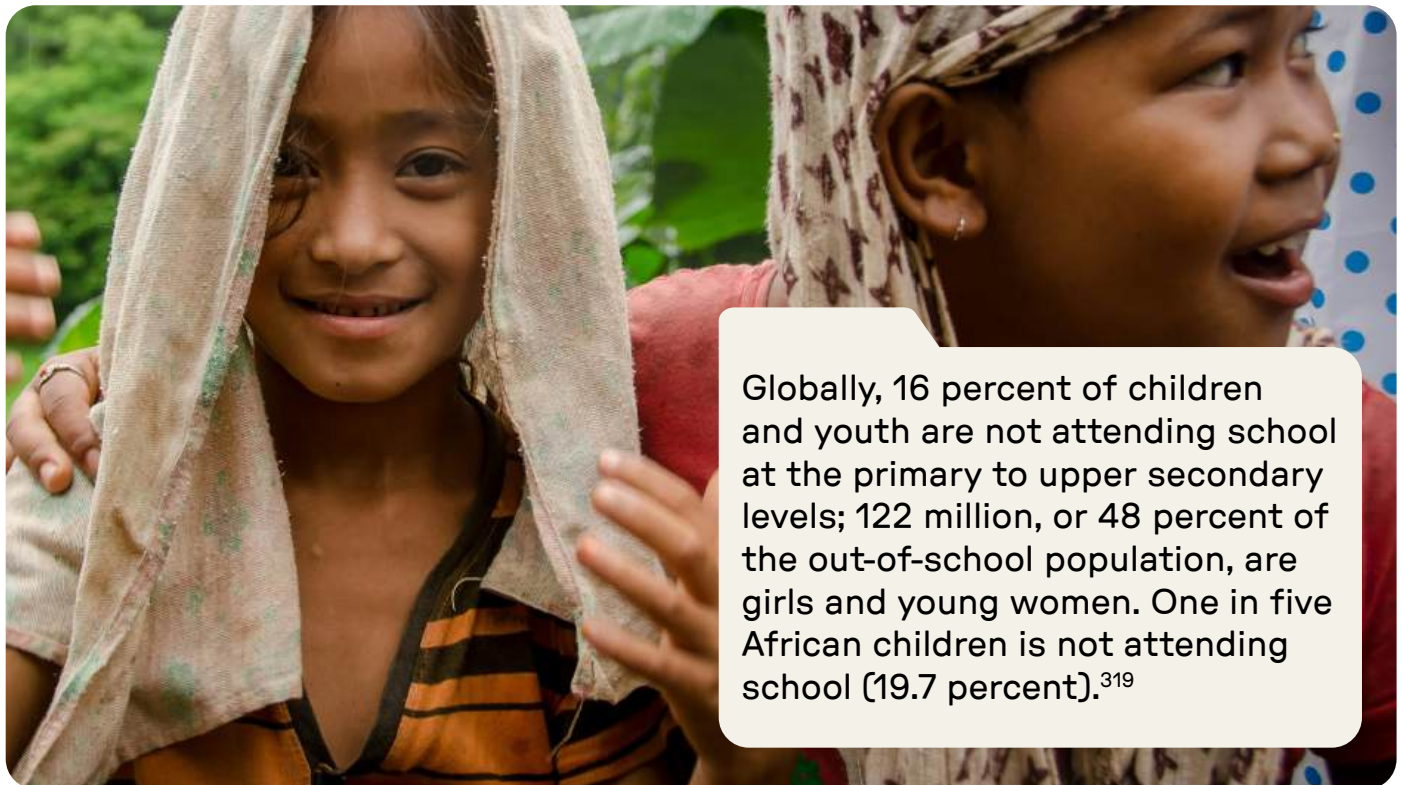


childhood sexual violence in schools may be school employees/volunteers (including teachers, mentors, administrators, management, and support staff), or parents. Furthermore, children or adolescents may display harmful or problematic sexual behavior. Evidence presented in this chapter suggests that actions to prevent childhood sexual violence in schools can include a whole-of-school approach, which involves working across the spaces, people, systems, and learning curricula of the school. For more on global safeguarding interventions, see the “International Safeguarding Policies and Approaches” section in the “Implementation and Enforcement of Laws” chapter; [for more on school-based safeguarding policies, see the “Safeguarding systems to Prevent Childhood Sexual Violence in Child-Serving Organizations” section in the “Safe Environments” chapter.](#)

- **Schools may be sites where harmful norms are reinforced:** In the US one study on schooling, sexual violence, and sexual and gender minority youth explored the “hidden curriculum” that can lead to schools’ unintended complicity in sexual violence victimization and perpetration. Schools were found to send limited and mixed messages regarding gender and sexuality.³¹⁸

- **School-based interventions may exclude many children with intersecting or compounded risks.** While integrating childhood sexual violence prevention programs into school curricula creates opportunities for broad-based reach, school-based strategies may exclude some of the most marginalized out-of-school children and adolescents (e.g., children who have high absentee rates or who are pregnant or parenting, violence-exposed, on the move or on the streets, undocumented, engaged in exploitative work, neurodivergent, or living with disabilities). Furthermore, offering gender-binary interventions within schools may expose or exclude gender-fluid, nonbinary, intersex, and transgender children from meaningfully participating.

- **Inadequate reporting and response mechanisms can cause harm.** Wherever education and life skills interventions take place, clear mechanisms for disclosure and response must be in place to address childhood sexual violence disclosures during or after the intervention. If these mechanisms are weak (such as lack of disclosure confidentiality, unavailable, or inaccessible referral services), education and life skills interventions risk causing children and adolescents harm, including retribution. For more on reporting and response mechanisms, see the [“Response and Support Services” chapter.](#)



Globally, 16 percent of children and youth are not attending school at the primary to upper secondary levels; 122 million, or 48 percent of the out-of-school population, are girls and young women. One in five African children is not attending school (19.7 percent).³¹⁹

- **Delivering programs for children** that challenge social norms and involve sensitive topics can elicit a wide range of reactions from the school community. Pushback from parents, school employees, and volunteers — and from people in wider communities and neighborhoods — may arise.³²⁰

- **Knowledge transfer** over behavior change: A systematic review of reviews on violence against children revealed that literature on education often emphasizes knowledge transfer over actual reductions in sexual abuse victimization.³²¹

Evidence gaps

- **More work is needed** to explore the feasibility, levels of access, and outcomes of delivering selective education and life skills programs that target groups of children who face intersectional risks of childhood sexual violence.

- **Understanding the factors** that may lead to harmful interventions, such as the #Tamojuntó drug prevention program in Brazil,³²² could help to avoid those risks in the future.

- **Further investigation is needed** into the feasibility and outcomes of alternative/more inclusive approaches to interventions’ binary male-female separation to better address the needs of gender-fluid, nonbinary, intersex, and transgender children.

- **Examples are needed** from more contexts on the effectiveness of programs working with children and their parents to prevent and address harmful or problematic sexual behavior by children and adolescents, especially among younger children.

Insights and lessons from education and life skills interventions

School-based programs to prevent childhood sexual violence can have wide-reaching effects. Research has shown these programs to significantly improve children and adolescents’ knowledge, attitudes, and help-seeking behaviors relating to childhood sexual violence.³²³ Programs have improved attitudes toward gender and violence, and in some cases, have led to reductions in sexual violence.



Broad-based prevention modules embedded across school curricula, from preschool to high school, are considered **effective**. Most interventions showed significant improvements in children’s knowledge and skills. While studies rarely measured the sexual violence victimization outcomes of embedded education interventions, an evaluation of the Safe Schools for Teens intervention in the Philippines found a significant decline in self-reported experiences of ‘*dating violence*’ (including sexual violence).³²⁴ A study of Tackling Online Child Sexual Exploitation (TOCSE) in Vietnam showed improved awareness of ‘*online child sexual exploitation and abuse*’.³²⁵ Running parallel programs beyond the classroom to reach out-of-school children and adolescents may improve reach, especially for children experiencing compounded risks.

School-based self-defense interventions for sexual violence prevention are considered effective.

A systematic review of safe dates programs found that all four programs in Africa that specifically targeted self-defense and assertiveness skills for adolescent girls were effective in preventing sexual violence victimization.³²⁶ Programs have led to reductions in sexual violence incidence in both primary and secondary school settings³²⁷ and improved practices of rape disclosure in complex emergency settings.³²⁸ The ethics of “target hardening” remains a concern; delivering self-defense interventions in parallel to perpetrator prevention programs may help address this.³²⁹ Using a broad-based engagement strategy that strengthens protective systems by involving teachers, parents, communities, experts, and government officials can lead to more comprehensive impact.





School-based prevention interventions for children and adolescents with disabilities are considered **prudent**. They offer great potential for reaching and improving knowledge, skills, and self-efficacy outcomes among groups of children with compounded risks.³³⁰ The DeafKidz Defenders³³¹ and the Child Sexual Abuse Prevention Intervention in Pakistan³³² offer valuable insights illustrating the feasibility and positive outcomes of inclusive, tailored programs. The methods and findings of selective programs also offer major opportunities to inform more inclusive broad-based programs — for example, that diverse learning needs such as children’s prior education or language use may influence learning outcomes more than age or gender.³³³ Further research with other diverse groups of children, using stronger study designs, will further bolster these findings.

School-based interventions to prevent harmful or problematic sexual behaviors by children and adolescents have shown **conflicting** results. A systematic review of educational interventions addressing gender-based violence by tackling harmful masculinities among young people found that six of the 15 interventions reviewed that promoted a gender-transformative approach were able to successfully decrease ‘*physical gender-based violence*’ and/or ‘*sexual violence perpetration/victimization*’.³³⁴ However, other studies were less conclusive, and one program, #Tamojunto, revealed concerning outcomes. Findings on this drug prevention program in Brazil highlight the risks associated with poorly designed curricula, high drop-out rates, and the need for life skills components that align with children’s learning levels and available time frames.³³⁵ Pérez-Martínez and colleagues (2023) suggest that where educational

interventions such as this one target young men using a risk-based approach that emphasizes individual responsibility for self-control, they may overlook the influence of broader social, cultural, and political factors on behavior.³³⁶ Further research is needed to understand the factors that can lead to harmful programs.

Curriculum design and educator training for delivering childhood sexual violence prevention modules that empower and foster the participation of all children are considered **effective**. Programs designing curricula with gender-transformative education approaches reduced intimate partner violence on an individual level, and one program also showed community-wide improvements. Longitudinal studies saw consistent results over time.³³⁷ Designing and delivering curricula with diverse children improves relevance and inclusion, as illustrated by the study of LGBTIQ+ youth-generated concepts for reducing teen dating violence inequities³³⁸ in “Insights from Wider Literature” above. Delivering sessions with engaging, accessible, pedagogical methods — such as creative drama — was considered a positive driving force in preventing abuse and influencing social transformation in the Body Safety Training program in Türkiye, where sexuality is generally considered a taboo topic.³³⁹ Additionally, using technology-assisted resources alongside in-person teaching widens the range of learning styles for greater impact. A comprehensive approach that provides educators with appropriate knowledge and skills training before they deliver the modules can significantly reduce self-reported experiences of sexual violence, as illustrated in the Safe Schools for Teens program in the Philippines.³⁴⁰

Lessons learned

- **Co-design and tailor multilevel interventions.** Engaging children, teachers, and parents in the co-development of programs enhances their relevance and effectiveness. Tailoring interventions to the specific needs of diverse groups, including children who are deaf or have disabilities, improves learning outcomes; such awareness of diverse needs can improve the design of both broad-based and targeted interventions. Designing multi-component approaches that involve multi-layered strategies and intervention types helps programs to balance self- and community-level protection strategies with addressing some of the structural and societal root causes of risk and perpetration.

- **Ensure a high-quality design, adaptation, training, and delivery.** Effective programs involve multiple sessions using inclusive, interactive, and peer learning methods. They focus on locally relevant, transformative content that addresses discriminatory attitudes and social norms as a required component of all curricula, alongside key elements such as recognizing abuse, appropriate responses, and help-seeking behavior. Properly training educators and providing them with the right resources beforehand ensures that interventions are delivered effectively and resonate with child and adolescent students.

- **Involve schools’ broader communities.** To amplify impact, interventions should involve children’s broader support systems **to include** parents, teachers, health workers, and communities. The interventions should seek to create critical awareness to disrupt discriminatory social norms and strengthening the support systems that can prevent and respond to sexual violence.

- **Integrate into local and national systems and frameworks.** A whole-school approach helps to weave childhood sexual violence prevention into school curricula, systems, policies, and practices across the school system. However, to effectively prevent childhood sexual violence across entire populations, programs must expand beyond isolated school-based interventions. They should seek to become transformative movements that incorporate parent and community engagement, create safer environments, and improve workforce safeguarding within a broader national framework of comprehensive prevention.³⁴¹



Cross-cutting activities: Multisectoral coordination and monitoring and evaluation

How can these approaches help prevent childhood sexual violence?

Multisectoral coordination

Multisectoral coordination of programs to prevent childhood sexual violence involves bringing together various stakeholders to work collaboratively and systematically. The goal is to align and harmonize efforts to collectively address and reduce the incidence of childhood sexual violence. This may involve:

- **engaging across sectors** and building the commitment of diverse stakeholders including government agencies, donors, nongovernmental organizations, private sector actors, civil society organizations, disabled people’s organizations, communities, and the media;
- **collaborating at all stages of the project cycle** on joint assessments, strategies and action plans, implementation activities, and monitoring and evaluation activities;
- **adopting harmonized policies and guidelines;**
- **amplifying influence** through joint advocacy and communication;
- **standardizing and delivering training** for better resource use;
- **engaging with others** in reflexive learning, research and knowledge-creation; and
- **providing comprehensive support** and guidance.



“Child sexual abuse is complex,
and no one organization can do
it all alone . . . we have realized
we need each other.”

—Professional from victim-friendly
court, Zimbabwe³⁴²

Monitoring

Monitoring is the process of gathering and collating data on childhood sexual violence prevalence and changes in patterns over time (e.g., geographical distribution, risk of perpetration, vulnerability criteria, or change in forms of childhood sexual violence). This may be done by:

- **conducting baseline assessments** to know the prevalence and context of violence;
- **tracking proxy indicators** that may serve as early signs of concern or hot spots of violence; and
- **conducting surveys** or interviews to assess changes in knowledge, attitudes, and behaviors related to sexual violence prevention among children, caregivers, and community members.

Evaluation involves gathering and analyzing qualitative and quantitative data about prevention strategies to identify trends, challenges, and areas for improvement.

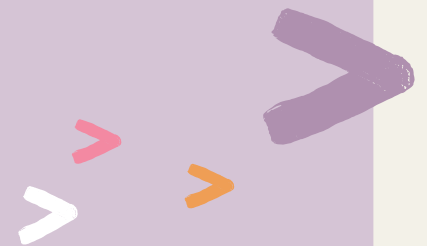
Monitoring and evaluation involves the systematic collection, analysis, and sharing of data related to childhood sexual violence. This process helps track prevalence, identify trends, and assess the effectiveness of prevention strategies.



Monitoring and evaluation can contribute to prevention efforts by:

- **recording and reporting incidents**, as regular monitoring can reveal early signs and patterns of childhood sexual violence, helping to identify high-risk locations and sources of risk;
- **informing advocacy and program design** because monitoring data can be used to influence policies and design effective programs;
- **measuring program impact**, as understanding which programs are effective and why allows for more targeted future actions;
- **incorporating stakeholder feedback** because adapting based on feedback from children, parents, and key stakeholders helps improve the effectiveness of preventive measures; and
- **seeking continuous improvement** given that lessons learned from monitoring and evaluation enable the ongoing refinement of prevention and response efforts.

Diverse stakeholders are responsible for collecting, collating, and sharing monitoring and evaluation data, from community-level actors to governments to nongovernmental organizations to UN agencies. The data collected may be used by advocacy groups, sanctioning bodies, donors, governments, UN bodies, research groups, and the general public.



Evidence from the reviewed studies and additional insights from wider literature

Multisectoral coordination

Our screening process did not identify any reports specifically evaluating the efficacy of coordination to prevent childhood sexual violence. However, many studies emphasize the need for multilayered, multisectoral, multi-stakeholder actions due to the diverse root causes and consequences of childhood sexual violence. Interventions for prevention and response should engage all levels of the socio-ecological model.³⁴³ The following summarizes what we have learned about multisectoral coordination when seeking to prevent childhood sexual violence:

- A 2019 UNICEF global review of child protection systems strengthening work identified a number of lessons learned on broader coordination of child protection actions.³⁴⁴ External actors, such as UNICEF, sometimes found themselves taking the lead on strengthening child protection systems and reducing national ownership and sustainability since some countries had no clear lead ministry on child protection and others had multiple ministries with related or overlapping mandates. The health sector, in particular, was rarely well integrated into child protection systems work.
- UNICEF co-chairs Country Task Forces on Monitoring and Reporting (or an equivalent working group) in all countries listed in the UN Secretary-General's annual report on children and armed conflict.³⁴⁵ These coordination groups comprise UN actors and neutral, impartial, and independent international, national and/or community-level organizations. They document verified cases of grave violations against children in times of conflict, including 'rape and other forms of sexual violence'. Ongoing advocacy has resulted in positive gains such as an increase in the number of States that have ratified key international treaties and those that have placed children in detention under child protection or social welfare services, where the likelihood of 'abuse' is reduced.

Monitoring and evaluation

The findings demonstrating monitoring and evaluation's role in preventing childhood sexual violence can be broken into five main areas of discussion: international



classification of violence, national-level monitoring and evaluation, monitoring grave violations against children in conflict, measuring online child sexual exploitation and abuse, and program-level monitoring and evaluation tools.

International classification of violence

UNICEF developed the International Classification of Violence Against Children to address the lack of comprehensive data on violence against children, and it has standardized definitions for all forms of violence, including sexual violence, in times of peace and conflict.³⁴⁶ This classification helps countries collect and categorize data consistently, align with international standards, enhance data comparability across countries, and facilitate a clearer understanding of the prevalence of violence. This, in turn, supports the development of effective strategies and interventions, enables better public policies, and encourages international collaboration and sharing of best practices to combat violence against children.

National-level monitoring and evaluation

Four main national data initiatives are mentioned in the reviewed studies and discussed here, all of which are implemented in a range of countries and seek to harmonize indicators and methods to generate comparable data sets:

- The Demographic and Health Surveys (DHS) program uses standard procedures, methodologies, and manuals to collect, analyze, and disseminate

representative data on population, health, HIV, nutrition, domestic violence prevalence and consequences, education, female genital mutilation, fertility, knowledge and use of contraceptives, and sexual behavior. The program has carried out more than 400 surveys in over 90 countries.³⁴⁷ For example, data from the 2007 **DHS** in Liberia (which indicated high rates of sexual debut, school dropout, pregnancy, and marriage among 15- to 17-year-old adolescent girls)³⁴⁸ led the **International Rescue Committee's** Girl Empower program to target girls aged 13 to 14 and potentially prevent negative outcomes before they arose. Importantly, however, the Demographic Health Survey does not cover some populations of interest, it is subject to certain biases, and the tools primarily cover health indicators, omitting other potentially key indicators.³⁴⁹

• **Violence Against Children and Youth Surveys (VACS)** are nationally representative population-based household surveys of 13- to 24-year-old women/girls and men/boys. The surveys are designed to measure the prevalence of emotional, physical, and sexual violence against boys and girls in childhood (before age 18) and the prevalence of violence in the last 12 months in adolescence and young adulthood (ages 18 to 24). VACS also assesses the circumstances surrounding violence (for example, age of first experience of sexual violence, perpetrators, and location), risk and protective factors, and the consequences of violence, including risk behaviors and health outcomes.³⁵⁰ Surveys are led by national



governments and carried out by local organizations with technical assistance and support from the US Centers for Disease Control and Prevention and Together for Girls partners. In 2022, VACS was implemented for the first time in refugee settlements in Uganda and Ethiopia. The adaptation of the VACS for humanitarian contexts is an important step toward addressing a significant research gap and ensuring there is comprehensive, population-level data to inform a multi-stakeholder, multisectoral response to violence against children and youth in such settings. To date, surveys have been or are being carried out in 23 countries, providing data on 13percent of children, adolescents, and youth under age 24 globally and 30 percent of the world's children, adolescents, and youth under age 24 living in lower-income countries.³⁵¹ Some countries have opted to include questions around functional disabilities, allowing for a better understanding of the intersection between violence and disability. Limitations to VACS include the exclusion of certain populations (e.g., adolescents and young people with an intellectual or physical disability that inhibits their ability to consent or understand the survey, institutionalized adolescents and young people. They also have limited information about sexual orientation and/or gender identity.³⁵²

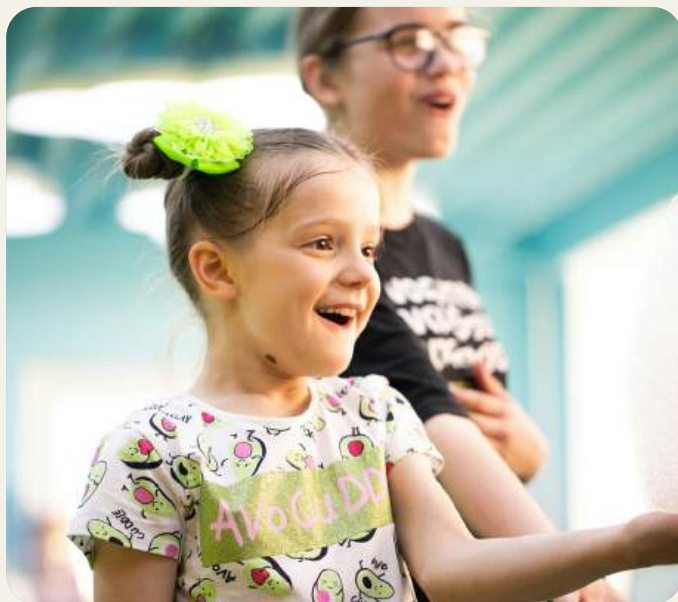


One example of how VACS findings have been used began with a **2010 VACS in Kenya**, which revealed that 76 percent of young women and nearly 80 percent of young men experienced sexual, physical, or emotional violence before age 18.³⁵³ Subsequently, Kenya developed a national prevention and response plan, strengthened child protection legislation, and made significant investments in primary prevention. A repeat survey in 2019 identified declines in lifetime violence among female respondents (including sexual violence), fewer girls in child marriages, and positive changes in attitudes toward gender equity. Annor et al. (2022) infer that the VACS data triggered the Kenyan government's actions, which then led to declines in incidents of violence against children.³⁵⁴

• **Multiple Indicator Cluster Surveys (MICS)** involve a household survey of respondents who provide data on the household as a whole and mothers (or caregivers) who provide data on children under age 18. It adopts a multistage sample design, with oversampling of households with children under age

5. Topics relevant to childhood sexual violence include fertility, contraceptive use, maternal and newborn health, female genital mutilation, menstrual hygiene management, and child development.³⁵⁵ As of 2019, MICS had been run in 116 countries, providing data for analysis of trends over time and integrations into public health and child rights research (e.g., five of the 21 studies included in Backhaus et al.'s [2024] systematic review of parenting used MICS data).³⁵⁶ MICS data offers valuable insights, but it also has limitations. For example, challenges noted when using MICS data to assess child development include varying sample sizes across countries; the data often being reported by mothers only, which can lead to bias; and its being captured at a single moment in time, meaning results may be affected by the time and season when data was collected.³⁵⁷

- **Global School-based Student Health Survey (GSHS)** seeks to understand the risky and protective behaviors of young people aged 13 to 17. Students fill out the questionnaire in schools, making this a low-cost survey process. The 10 subjects covered include a number of topics relevant to childhood sexual violence, including protective factors, sexual behaviors, violence and unintentional injury, and risk factors such as alcohol and drug use.³⁵⁸ One study using GSHS data from 68 low- and middle-income countries to understand patterns in violence among adolescents found variations in the availability and quality of data, diverging coding practices, and potential underreporting on the types and causes of



injuries or bullying; also, few of the studies reflected on differences in urban versus rural settings. Another drawback to GSHS is that it only includes children currently attending school.³⁵⁹

Monitoring grave violations against children in conflict

The monitoring of grave violations against children in conflict, including sexual violence, involves systematic data collection and analysis to help clarify the impact of armed conflict on children.

- **The UN's Monitoring and Reporting Mechanism on grave violations against children** was developed in response to UN Security Council Resolution 1612 of 2005, and one of the six grave violations is rape or other sexual violence.³⁶⁰ Additionally, **monitoring, analysis, and reporting arrangements** arose in response to UN Security Council Resolution 1960 of 2010 to standardize monitoring, analysis, and reporting arrangements related to sexual violence committed against boys, girls, men, and women in conflict and to improve prevention and response activities.³⁶¹ These mechanisms have significantly raised awareness, improved data collection, and influenced policy and legal frameworks to better address sexual violence and child protection in conflict zones. They also provide a legal basis for imposing sanctions on parties to conflict. However, there is conflicting feedback on whether these tools work well as deterrents since sanctions for 'sexual and gender-based violence' are rarely imposed and political considerations and resource constraints can hinder the full implementation of their findings and recommendations.³⁶²

Measuring online child sexual exploitation and abuse

Increased efforts are being made to understand technology-facilitated child sexual violence, including the forms it takes, the scale of the problem, who is at risk, and who the perpetrators are.

- **Disrupting Harm**³⁶³ established in 2019 by Safe Online, is a partnership between ECPAT International, International Criminal Police Organization (INTERPOL), and UNICEF Innocenti. Involving 25 countries across 6 regions, the program collates data on online child sexual exploitation and abuse from literature reviews,



legal analyses, surveys, interviews with service providers, and consultations with children. Findings from the Disrupting Harm reports feed into tailored, country-specific roadmaps that highlight the gaps in existing systems and provide key recommendations for governments and other stakeholders to prevent and respond to online child sexual exploitation and abuse. To date, data collection has been completed in 13 countries across Southeast Asia and Eastern and Southern Africa, and the data from 12 more countries will become available in 2025.

- **Into the Light**³⁶⁴ launched by Childlight, is a global index of ‘*child sexual exploitation and abuse*’ (CSEA). It highlights the global prevalence of CSEA through comprehensive data collation. It seeks to raise awareness, advocate for urgent action, and inform interventions to protect children.

Into the Light 2024 data: At least 300 million children per year are subjected to online sexual exploitation and abuse (OCSEA). Girls make up 8.7 percent of cases of online child sexual exploitation and abuse and boys represent 7.5 percent of cases.³⁶⁵



Program-level monitoring and evaluation tools

Additional data is needed on the quality and relevance of the tools used to measure program participants’ knowledge, attitudes, beliefs, and practices relating to childhood sexual violence. Our screening process did not identify any literature that evaluated program-level monitoring and evaluation tools, though many mentioned the tools used to assess outcomes.

- **The Personal Safety Questionnaire and the “What If” Situations Test**, originally developed in the US, were used as part of the evaluation process for studies in Italy, Türkiye, Indonesia, China, and Iran.³⁶⁶

Personal Safety Questionnaire and “What If” Situations Test question sets³⁶⁷

The **Personal Safety Questionnaire** includes 10 questions to evaluate children’s knowledge of ‘*sexual abuse*’ (for example, “Is it OK for kids to touch a bigger person’s private parts?”) and two questions to assess attitudes toward sexuality (for example, “Is it OK for kids to touch their own private parts?” and “Do you like your private parts?”). Children answer each question with “yes,” “no,” or “I don’t know,” and each correct response receives 1 point, with scores ranging from 0 to 12.

The **“What If” Situations Test** includes six scenarios for assessing children’s ability to recognize and respond to hypothetical ‘*sexual abuse*’ situations. Three scenarios (1, 2, and 6) describe appropriate requests to touch or look at children’s genitals, whereas scenarios 3, 4, and 5 describe inappropriate requests. After each vignette, children are asked, “Would it be okay for [name of person in the vignette] to [touch your genitals/activity described in vignette]?”³⁶⁸

Audio Computer-Assisted Self-Interview (ACASI) is a tool that is mentioned in the reviewed studies as having been used in Zimbabwe,³⁶⁹ Ethiopia,³⁷⁰ and South Africa.³⁷¹ For example, a project in Borno State, Nigeria, developed an ACASI tool to collect data on sensitive topics from adolescent girls (aged 10 to 14), adolescent boys (aged 15 to 19), and caregivers with lower literacy levels. The tool’s development was informed by cognitive interviews,

ACASI demonstrations, and post-demonstration assessments with the target groups alongside a focus group discussion with enumerators. Although feedback indicated high levels of acceptance for the tool and provided recommendations to enhance usability, the survey length required that the final tool combine ACASI with computer-assisted personal interview formats to ensure effectiveness and user-friendliness.³⁷²

Challenges and evidence gaps

Multisector coordination

Challenges in the multisectoral coordination of childhood sexual violence interventions identified in the literature include:

- **Different objectives and ways of working:**

Stakeholders involved in preventing childhood sexual violence (e.g., those in the health, justice, economic strengthening, and education sectors) often have varying goals and methods, which can hinder effective coordination.

- **Lack of clarity and coordination:** There is a lack of clarity on how to address gaps and prevent duplication of efforts among the different coordination and advocacy groups and initiatives that work on intersecting subjects related to childhood sexual violence (e.g., gender-based violence, intimate partner violence, online sexual violence, trafficking, sexual exploitation and abuse, and child protection).

- **Weak coordination in fragile states and post-conflict settings:** In fragile states and post-conflict settings, coordination structures, record-keeping, and data collection practices are often weak, leading to child survivors and/or victims of sexual violence being overlooked.

- **Lack of focus on underserved groups:** There is a lack of evidence on how the coordination system accounts for the needs of specific, often underserved, groups, such as children with disabilities, those who are or identify as LGBTQ+, children on the move, and other marginalized populations.

Monitoring and evaluation

There are many ongoing challenges in the monitoring and evaluation of childhood sexual violence prevention. Results from a systematic mapping of efforts to measure the mitigation of gender-based violence overall (versus child-specific forms of violence) indicated a significant

“There is no collaboration among the organisations (sic) to work on the protection of sexual exploitation activities, which needs to be established. To prevent the risks of sexual exploitation and respond to the crisis, community awareness activities including government staff, the provision of recovery centres (sic) for the victims, strengthening different community structures, and strengthening country laws and policies are essential.”

—Key informant, Ethiopia, ECPAT study on child sexual exploitation in humanitarian contexts³⁷³

knowledge gap. Additionally, while the amount of data has increased on the subject, ‘childhood sexual violence’ still lacks a uniform definition.³⁷⁴ Also:

- **There is no established, internationally agreed-upon guidance** on the safe and ethical measurement and production of statistics on this subject.³⁷⁵

- **The quantity of the evidence has increased**, yet it remains inconsistent in scope and quality.³⁷⁶

- **It is difficult to standardize measures and instruments** for longitudinal analysis and cross-country comparison while also adapting tools to the culture and context.³⁷⁷

- **Data is rarely disaggregated**, and thus, diversity (e.g., in gender identity, sexual orientation, age, race, ethnicity, or disability) is overlooked.³⁷⁸ This makes it hard to understand the diverse experiences of children and, subsequently, it hinders the design of policy and programs to target at-risk populations and limits our ability to make inclusive decisions and designs.

- **Many studies measured** changes in the presumed causes of childhood sexual violence, or proxy indicators (e.g., gender inequality, acceptance of violence, alcohol abuse), but they did not look at how this translates to a reduction in the number of cases of childhood sexual violence.



Insights and lessons on multisectoral coordination and monitoring and evaluation

Given the lack of appropriate studies, we cannot classify the efficacy of monitoring and evaluation or coordination. However, we have set out some attributes drawn from literature related to social protection, humanitarian action, and/or child protection more broadly, that could lead to better monitoring and evaluation and coordination in the future.

Multisector coordination

While the need for effective coordination mechanisms is clear, further research is required to understand the impact of different coordination approaches. Recommendations to strengthen prevention indicate that in the future, coordination should:

- **occur** throughout the project cycle (preparedness, needs assessment, strategy development, project design and implementation, and monitoring and evaluation);
- **encompass** service delivery, training, learning, communications, advocacy, data collection, and human and financial resourcing;
- **avoid** gaps or duplication by mapping interventions by focus areas, such as type of activity, geographical area, and target groups;
- **demonstrate** strong and clear leadership with well-defined roles and responsibilities;³⁷⁹
- **include** governments (national and district level), civil society organizations (including disabled people's organizations), non-state actors, and donors where relevant;
- **provide** sustained, dedicated resources, including human resources and budgets;³⁸⁰
- **leverage** global donor commitment and harmonized, collaborative funding mechanisms;
- **convene** actors across siloed and separate networks and sectors to provide comprehensive and complementary services for families and children

(e.g., bring together child protection, social welfare/protection, gender-based violence, justice, health, and education);³⁸¹

- **harmonize** data collection processes by agreeing on definitions, data sets to be collected, and methods for collecting, analyzing, and disseminating data and findings;
- **establish** standard operating procedures, memorandums of understanding, and partnership agreements that can align all actions toward the common goal of protecting children; and
- **standardize** training for professionals working with children across sectors to equip them with the necessary knowledge and skills to recognize and respond to signs of abuse.

Monitoring and evaluation

Recommendations to strengthen prevention indicate that monitoring and evaluation approaches should:³⁸²

- **systemically monitor and evaluate programs** that prevent childhood sexual violence, assessing their impact, as well as outputs and outcomes;
- **adopt internationally agreed definitions** at a national level to allow for comparison across countries and over time;
- **agree on a set of proxy indicators** that may contribute to our ability to evaluate programs for efficacy, given how hard it is to measure the prevention of childhood sexual violence;
- **disaggregate data** to seek to understand context-specific aspects of diversity that can place children at risk (e.g., race and ethnicity, religion, refugee status), and adopt the Washington Group Questions to help disaggregate data for children with disabilities. At a minimum, *all* data should be disaggregated by age, gender and disability; and
- **provide sustained investment and resourcing** for data collection on childhood sexual violence.



PART III

Implications for preventing
childhood sexual violence:
Conclusions and key lessons





The evidence has a hopeful message: We know what works to prevent childhood sexual violence. A safer future for all children and youth is possible.



Key lessons learned

Childhood sexual violence is a global crisis that requires urgent and bold action. We know enough to act decisively to prevent childhood sexual violence for all children, everywhere.

While the path to prevention presents challenges, it is filled with opportunities for transformative impact. By recognizing the obstacles and harnessing strategic opportunities, we can develop a robust and coordinated response that protects children worldwide. Based on this systematic review's findings on what works to prevent childhood sexual violence in low- and middle-income countries, we have learned the following lessons.

Successful interventions can prevent childhood sexual violence

The review has identified various successful intervention types proven to prevent childhood sexual violence across different strategies. These include adolescent development clubs, multi-component “cash plus” interventions targeting women and adolescent girls, and skills development programs for preschool children and their parents. Other effective interventions range from parent skills programs for preventing childhood sexual violence in pre-adolescents and adolescents, to broad-based prevention modules embedded in school curricula, school-based self-defense interventions, and educator training for delivering prevention modules. The evidence from these intervention types offers hope. Moreover, many interventions show promising or prudent results, which, with further evidence, may expand the pool of effective approaches.

Comprehensive programming approaches enhance effectiveness

We have seen the importance of well-resourced, multisectoral, community-led actions that cut across different levels of the system. Adopting technology as appropriate can improve effectiveness, accessibility, and appeal to the younger generation. We have noted

the need for strong legal and policy frameworks, as well as for providing resources and training to service providers. We have seen the importance of combining approaches that aim to reduce risks (with an emerging focus on perpetration prevention), increase protection, and improve response. Strategies that simultaneously encompass inclusive approaches and an anti-discrimination focus can improve program reach to at-risk children and shift harmful social norms and behaviors.

Systemic and nuanced evaluation must inform practice

The evidence has surfaced insights about the importance of systemic, but also nuanced, practices in research on prevention interventions. These include the critical importance of measuring sexual violence outcomes, as well as the power of using standardized monitoring frameworks and engaging multiple knowledge sources. There is also a strong need for disaggregated data on identity markers such as age, gender, disability, and race.

Many challenges and gaps remain

The review identified significant challenges, evidence gaps, and areas for improvement. Child protection and justice systems are frequently under-resourced. Given the multisectoral nature of childhood sexual violence, coordination and strategic planning across the social welfare system, education, public health, and law enforcement are often difficult. Many gaps remain within the research, in particular, the lack of rigorous evaluation on childhood sexual violence outcomes. The absence of disaggregated data further obscures program impacts on diverse children.

Despite these challenges, there is sufficient evidence to take informed and decisive action now. What we need now is strong engagement for action at all levels — local, national, and global — to drive the large-scale changes needed to protect children worldwide.



Recommended actions in programming and practice

Drawing from our analysis of the systematic review literature, this section outlines key recommendations to (i) address childhood sexual violence through targeted programming and practice, and (ii) to build our understanding on the impact of interventions through research and evaluation.

Practice accountability to children and communities

- **Engage children and communities from the start.** Listen to and engage diverse children, adolescents, and their communities (including families, traditional and religious leaders, and local organizations) in designing, implementing, and evaluating interventions.³⁸³ This helps ensure relevance and local ownership, and it can address resistance and create more supportive environments for children. This is especially important because childhood sexual violence touches on sensitivities and deep-seated cultural norms relating to power dynamics, childrearing practices, caregiving, and sexual activity.



- **Make evidence-based decisions.** Ground policies and programs in the latest research data, identifying discriminatory dynamics (e.g., around age; sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC); disability; race; ethnicity; and other identities) and determinants of risks, at-risk groups, perpetrator contexts, and forms and sites of harm. Design program responses to reflect the evidence base and support the evolution of more effective, comprehensive strategies. Establish clear mechanisms for monitoring and evaluating interventions' effectiveness. Design for flexibility; monitor changing circumstances and respond to the emerging risks and needs of children, adolescents, and communities in that context.

- **Be guided by the context.** When implementing a program that has been previously evaluated in another setting, adjust and tailor it based on robust evidence relevant to the new environment. This is crucial because a program that yielded positive outcomes in one context may not necessarily have the same impact in another. For example, when an intervention was implemented in South Africa using similar approaches to the US-based Shifting Boundaries program,³⁸⁴ it was found to be stigmatizing, cause exclusion, and reinforce racialized patterns of discipline.³⁸⁵

- **Acknowledge when we get it wrong, learn lessons, and adapt.** Practice a culture of open learning and reflection about what is working and what is not. Adjust when needed, ensuring accountability to children, families, and funders.

Leverage multisectoral, multilevel, holistic approaches

- **Engage all levels in the system.** Engage stakeholders across all levels of the ecological model, from children themselves to national- and international-level stakeholders.



- **Work across sectors.** Health, education, justice, and social services sectors — at a minimum — must collaborate to create a holistic and integrated response. Cross-sectoral engagement can increase reach and leverage funding from sectors that receive higher levels of investment (such as livelihoods or HIV/AIDS).
- **Build comprehensive approaches with multiple areas of focus.** Ensure all programming focuses on reducing risks, boosting protective factors, **and** enhancing response. Deliver multiple activities simultaneously, and avoid isolated, single-focus programs. This helps address the multiple root causes of childhood sexual violence and achieve desired outcomes.³⁸⁶
- **Build strong program foundations.** Ensure all programs support the enforcement of progressive legislation, alongside dismantling discriminatory behavior through positive norms and values change individually and systemically.
- **Deliver broad-based and targeted interventions in tandem.** Use both wide-reaching and targeted tailored interventions for specific groups. This can ensure both broad scale action and inclusion, where discriminatory and harmful behaviors can be addressed across wider communities and no one is left behind.³⁸⁷
- **Address sources of harm. . .**
 - . . . **among adults.** Address harmful behaviors and their root causes through approaches such as trauma-informed perpetrator prevention programs, positive parenting, and codes of conduct, alongside strengthening adults’ awareness and protective behaviors; this can prevent harm and ensure early response. In many cases, sexual violence can be perpetrated by an adult known to the child in a trusted position or by family members.
 - . . . **among children and adolescents.** Develop specialized, trauma-informed programs to address harmful or problematic sexual behaviors among adolescents and children.³⁸⁸ Evidence suggests that a significant proportion of incidents of childhood sexual violence are perpetrated by peers.³⁸⁹

Strengthen legal and policy frameworks

- **Work with government and international entities.** Strengthen legislation reform and the enforcement of comprehensive, anti-discriminatory laws protecting diverse children from all forms of sexual violence, both online and offline. International collaboration is essential to tackle cross-border and technology-facilitated sexual violence.
- **Use a rights-based approach.** Root programs in the promotion of children’s rights, as outlined in international conventions and national laws.



Create accessible, inclusive, anti-discriminatory, trauma-informed programs

- **Design equitable, accessible programs.** Ensure all children have access to prevention, response and support programs. Acknowledge and address the unequal treatment of children within sexual violence prevention programs and broader prevention and response systems, and by justice actors.³⁹⁰ Give special attention to making programs inclusive and accessible to diverse children, such as girls; children who are or identify as LGBTQ+;³⁹¹ Black, Indigenous, children of color, and/or from other ethnic groups experiencing oppression, discrimination, or marginalization;³⁹² and children with disabilities³⁹³ among others.
- **Tackle discrimination-based sexual violence across all programs.** Systematically incorporate program content to challenge societal norms that discriminate against certain groups of children (specific to each context). This addresses the root causes of the behaviors that can lead to gender-based, homophobic, transphobic, anti-disabled, racist, or other forms of discrimination-based sexual violence. This includes **gender-transformative programs** that challenge (rather than replicate) existing harmful notions of masculinity and gender power dynamics, and **unconscious bias training** for those in service provision.³⁹⁴
- **Consider diverse experiences.** Design interventions grounded in evidence of the full range of diverse children’s lived experiences. This requires assessing, designing, delivering, and evaluating interventions with disaggregated data that illustrates the experiences of diverse children and adolescents.



Engage with children’s layered, overlapping identities not in isolation from each other but in ways that reflect children’s social realities and the compounded risks they may face. Inviting diverse children’s engagement in program design can offer critical insights into more inclusive, nuanced, and effective programming.³⁹⁵

- **Engage across genders.** Engage people of diverse genders, including boys and men, in prevention activities to address the dynamics of power and oppression, shift harmful norms and behaviors, and reduce risks.³⁹⁶ For example, while many parenting interventions still only engage mothers, some evaluations are pointing to the importance of involving fathers and the ways they may influence participation and acceptance of changing norms.

- **Develop age- and ability-sensitive content.** Adapt program content for different age groups,³⁹⁷ literacy levels, levels of maturity and understanding, and learning abilities.³⁹⁸ Evidence has also shown that positive results can be achieved through well-designed targeted programs that take a range of needs into account.³⁹⁹



- **Focus on children with disabilities.** Design targeted interventions for children with disabilities, who are particularly at risk and who may have specific learning needs or communication challenges.⁴⁰⁰ This has been shown to increase their protective factors and encourage disclosure and help-seeking behavior. However, such targeted programs must be coupled with broader community-based anti-discrimination programming that addresses societal root causes.

- **Deliver trauma-informed programs.** Work with care and acknowledgment of the likely widespread experiences of sexual trauma among adult and child program participants — including among adults and children who may display harmful sexual behavior themselves — and among implementers.

Enhance training and capacity

- **Invest in training.** Prioritize the time and resources to equip educators, healthcare providers, law enforcement, and community members with the skills to deliver interventions sensitively and effectively. Skilled professionals are vital to the success of prevention efforts.

- **Train social service workers.** Train frontline workers to respond appropriately to cases of childhood (not only adult) sexual violence.

Harness innovation, adaptation, and technology



- **Test innovative approaches.** Prototype new technologies, adaptive designs, and cross-sector collaborations to stay ahead of evolving risks.

- **Harness digital platforms.** Use technologies for mapping and data collection, for education, awareness-raising, and reporting to enhance the reach of prevention efforts.

- **Future-proof.** Design prevention actions with consideration for how technology may evolve⁴⁰¹ as well as potential access limitations. Technology is changing the nature and forms of childhood sexual violence. Actors addressing childhood sexual violence need to recognize technology’s potential and value in preventing harm; understand children and adolescents’ patterns of accessing and using technology; know the site-specific risks for children online and using technology; and account for technology’s costs and limited access in certain settings.

Invest in transformative impact

- **Invest in phased, incremental, and sustainable programs.**⁴⁰² Focus on creating long-term, sustainable solutions that address root causes, strengthen prevention and response systems, address discrimination, and lead to actual behavior changes that reduce sexual violence outcomes.⁴⁰³

- **Scale up proven models.** Replicate and expand successful interventions across various contexts to amplify their impact. Scaling up what works will protect more children and build resilience in diverse settings.⁴⁰⁴



We envision a world where every child can learn, play, and grow without the fear of violence — a world where survivors receive the support they need to heal and reclaim their futures. A world where justice prevails and no child is left behind.



Recommended actions in research and evaluations

The current evidence review offers an important baseline to inform future research and advocacy efforts to address challenges and gaps in evidence-based childhood sexual violence interventions.

Based on the systematic review, these research approaches are considered essential for evaluating the prevention of childhood sexual violence in low- and middle-income countries.

Build stronger research methods

- **Engage children and communities in research.**

Ensure children are meaningfully engaged in research so their experiences and perspectives can directly influence study design and subsequent interventions.

- **Develop shared definitions and data standards.**

Establish consistent definitions of key terms like “childhood sexual violence”⁴⁰⁵ and standardize age disaggregation for childhood and adolescence to improve data analysis across settings. Many program implementers count adolescents as being up to 19 years old and do not distinguish children (those under 18) from that cohort.⁴⁰⁶

- **Promote diverse research methods.** Combine qualitative and quantitative evaluation methods to understand program impacts and areas for improvement. Recognize, value, and make visible multiple sources and forms of knowledge as valid and complementary in deepening understandings of the experiences of diverse children, families, service workers, and communities in various settings.

- **Disaggregate data.** Disaggregate and analyze childhood sexual violence data by gender, age, disability, race, and other identity markers. This can improve our understanding of how different groups are impacted by interventions, and can make

visible the specific experiences of, and outcomes for, groups of children with heightened risks due to discrimination.⁴⁰⁷

- **Adopt more nuanced measurement methods.** Use research designs, such as dismantling studies and multi-timepoint outcome measurements, along with innovative tools like classification and registration tree (CART) analysis, to better capture which groups of children benefit most and which aspects, or combinations of activities, are most effective across multi-component programs.⁴⁰⁸

- **Develop and evaluate programs with implementation, contextualization, and scale up in mind.** Design and evaluate interventions that can be scaled up and adapted to different contexts, and document the pre-conditions for implementing interventions in one context to help inform adaptation and implementation in others. Keep in mind that the coverage and scale of an intervention may be an



important determinant of outcome.⁴⁰⁹ Additionally, test interventions for applicability and replicability in a range of contexts. Evaluating these outcomes in different countries should confirm if they can work across contexts, what pre-conditions are needed, how to adapt them, and what must remain the same.

- **Engage with research in multiple languages.** Review and document studies in the diverse languages that are relevant to program contexts.

Improve monitoring and evaluation systems

- **Strengthen routine data collection and capacity.** Invest in routinely collecting monitoring data to inform policy and evaluate outcomes.⁴¹⁰ Research and evaluation frameworks should include all forms of violence, including those largely ignored by data collection. This requires shared definitions to guide and align data collection across countries and ethical procedures on how to gather such data, while safeguarding research participants' dignity, rights,



and welfare. National ownership is critical throughout data generation and use, requiring investment in national capacity to lead on all aspects of the process. Civil society actors, national organizations, and international organizations must play a role in calling for the creation of, and accountability for, high-quality and robust statistics on violence.⁴¹¹

- **Systematically evaluate and test program innovations.** Innovations (e.g., SMS campaigns and social media messaging, cartoons, online games for deaf children, and football/soccer) need to be systematically evaluated and tested in wider, more varied settings.

- **Explore and test possible proxy indicators.**⁴¹² We lack evidence on how increased knowledge affects sexual violence rates, partly due to the difficulty of tracking the incidence of childhood sexual violence. More effort should be made to establish and agree on a set of proxy outcome measures.

- **Establish systems to monitor the implementation of legal instruments such as the UN Convention on the Rights of the Child (UNCRC).** The ethical and safe collection and dissemination of quality data is necessary for countries to monitor and be held accountable for implementing this convention⁴¹³ and other legislation on protecting children. This review found no evaluations of interventions seeking to raise awareness on and/or enforce rights and legal frameworks.

Invest in addressing research gaps

Strong evidence and rigorous evaluations on prevention strategies for specific groups of children and understudied intervention areas is crucial for refining and enhancing childhood sexual violence prevention strategies. Very few studies focused on how childhood sexual violence prevention interventions considered gender identity, sexual orientation, or race, for assessing intersectional, discrimination-based risks or measuring program impacts. Few studies focused on children who exhibit harmful or problematic sexual behavior. This may be in part due to subconscious discomforts these topics may generate, or the undervaluing of their importance, among academics and decision-makers who do not fully represent these identities.⁴¹⁴ Building diverse teams and a strong evidence base will support effective policy

and program decisions. Specific areas to explore in more detail in low- and middle-income countries and humanitarian settings include:

- **Restorative and transformative justice mechanisms:**⁴¹⁵ the effectiveness and impacts on children.

- **Offender management and support:**⁴¹⁶ the management of adult offenders, and considerations for the management of alleged child and adolescent offenders. Test the possible use of mental health treatment for potential, alleged, and convicted perpetrators.

- **Perpetration prevention:**⁴¹⁷ the effectiveness of programs for adults, and of programs to prevent and respond to harmful or problematic sexual behaviors by children of all ages.

- **Diverse children at risk:**⁴¹⁸ including younger girls; boys; LGBTIQ+ children; children who are Black, Indigenous, children of color, and/or from ethnic groups or castes experiencing oppression, discrimination or marginalization; children with disabilities; as well as girls of all ages.

- **Contextualization:** what works to effectively adapt interventions for various contexts.

Overall, what we need now is strong engagement at all levels — local, national, and global — to drive the large-scale changes needed to protect children worldwide. Together, we can make significant strides in preventing all forms of childhood sexual violence — offline and online. We have enough evidence to act now to protect millions of children. What we need is political will, investment, and a concerted effort to apply the lessons we have learned.



Annexes

Annex A. How this review complements other research

This systematic review builds upon the approach established in 2019’s What Works to Prevent Sexual Violence Against Children: Evidence Review and focuses on a few key areas where significant gaps exist in our field. Additionally, this report complements, incorporates findings from, and provides a deeper exploration of childhood sexual violence prevention compared to other existing studies and overviews related to violence, including:

- The INSPIRE update;⁴¹⁹
- Bacchus et al. (2024);⁴²⁰
- Russell et al. (2020);⁴²¹
- UNICEF (2020);⁴²²
- Radford et al. (2015);⁴²³ and
- The World Health Organization Violence Info website <https://apps.who.int/violence-info/>

This report makes additional contributions by:

- focusing specifically on low and middle-income countries;
- incorporating evidence from humanitarian settings and infectious disease outbreaks;
- examining all forms of sexual violence against children, including those facilitated by technology;
- reflecting on how outcomes differ for children in all their diversity, including children and adolescents (i) of different ages; (ii) who are or identify as of

diverse sexual orientation, gender identity, gender expression and sex characteristics (SOGIESC); (iii) with a range of physical and cognitive abilities and disabilities; (iv) with different racial/ethnic identities; and (v) from a range of backgrounds and identities;

- drawing on a broader range of knowledge sources; and
- including the most recent evidence available up to June 2024.



Annex B. Additional details on the methodology

In this annex, we provide details on our strategy for identifying, screening, and analyzing the evidence. The scope of our review focused on recent interventions aimed at preventing childhood sexual violence in low- and middle-income countries. We identified this evidence using multiple approaches. Our primary strategy entailed searching peer-reviewed literature published between 2018 and 2024. Our search used specific keywords found in either the abstracts or titles across five domains: low- and middle-income countries, children or adolescents, and variations on the terms “sexual violence,”⁴²⁴ “interventions” and “prevention.”

Our process of screening studies had two steps. In our initial screen of the searched literature, we uploaded article references into the EndNote software program to identify and delete duplicates. Studies that did not meet the inclusion criteria were removed, especially those not focused on children or young people. Titles and abstracts of the remaining articles were screened for relevance, and any articles that were not intervention-focused, such as commentaries, were excluded.

A summary of our initial screening of titles/ abstracts includes:

- English-language publications;
- published between January 2018 and June 2024;
- had a focus on the prevention of sexual violence against children (all those under 18 years old); and
- had concern for children and/or included practitioners or people responsible for safeguarding children.

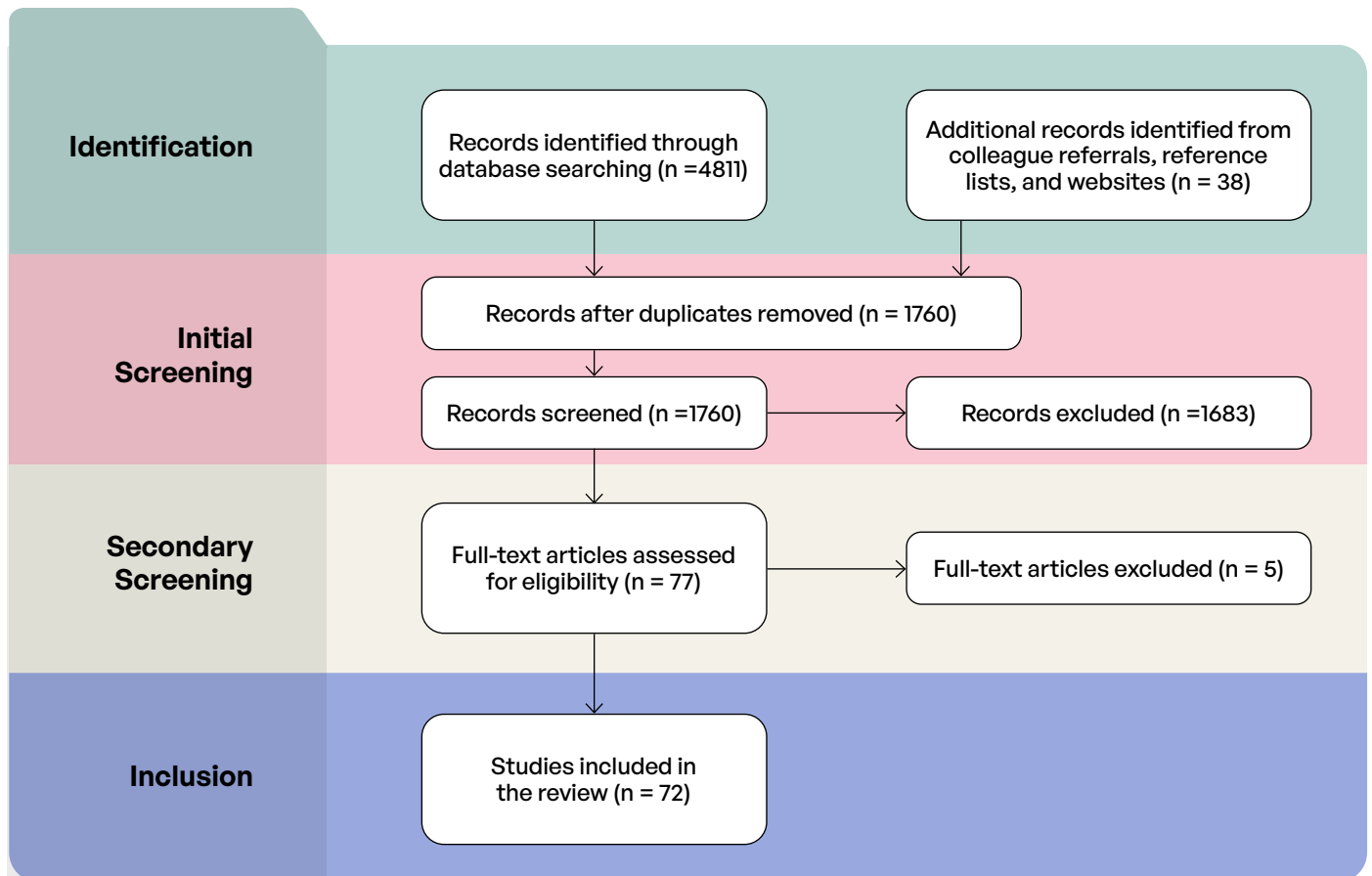
This screening process led us to identify a total of 4,778 records across the databases: Embase (n=960), MedLine (n=972), PsycInfo (n=607), PubMed (n=1,110), Web of Science (n=1,091), and Google Scholar (n=38). Additionally, we included 35 records that were shared by colleagues, found in reference lists, and sourced from various websites, bringing the initial pool to 4,811 entries. After removing duplicates, we narrowed down the list to 1,762 records. We conducted an initial screening of these records, leading to the exclusion of 1,683 records due to various reasons, such as irrelevance to our research topic. For the remaining 79 articles, we proceeded to a more detailed secondary screening by assessing the full texts for their eligibility to be included in our review.

A summary of our secondary screening includes:

- quantitative studies, such as randomized controlled trials, quasi-experimental studies, and pre-post studies with defined and measured outcomes;
- qualitative and mixed methods studies, including evaluations, assessments, and case studies of interventions, programs, or policies;
- a defined approach or method (for all studies and systematic reviews); and
- a discernible focus on low- and middle-income countries and/or humanitarian contexts.

Thus, we excluded seven articles that did not meet the inclusion criteria we had set. We therefore included 72 studies in this evidence review.

When deemed relevant, select additional evidence that did not meet our inclusion criteria was included under a separate heading, “Additional insights from wider Literature,” in each chapter. Studies in this section did not influence the efficacy of intervention types.



Annex C. The collaborative research process

The creation of this document highlights the Safe Futures Hub’s commitment to a stakeholder-driven approach, emphasizing that the most effective solutions come from inclusive and collaborative efforts. From the beginning, our goal was to ensure the document represented not only the latest research but also the diverse perspectives of those actively working in sexual violence prevention and support.

Engaging key informants

We started with consultations involving over 15 key informants from various sectors, including academia, nonprofits, donors, and survivor advocacy groups. Their collective expertise and experience provided invaluable insights that shaped the document’s structure and content, grounding it in both theory and practical realities.

Collaborating with diverse stakeholders from across the globe

Our Advisory Group, consisting of leaders in sexual violence prevention and response, played a crucial role in guiding the development process. Regular meetings and consultations helped align the document with current trends, best practices, and emerging research. This collaborative effort ensured the content addressed the needs of various stakeholders.

We also gathered perspectives from key stakeholders outside of our Advisory Group, such as international organizations, community-based groups, and survivor networks, to create a comprehensive and inclusive resource.

Incorporating stakeholder feedback

A key phase involved sharing the draft widely for review and feedback. We received over 750 comments, suggestions, edits, and specific intervention ideas. Each piece of feedback was carefully reviewed, reflecting the high level of engagement and commitment within the field. This collaborative spirit is central to the Safe Futures Hub’s approach.

The “Additional insights from wider literature” sections benefited significantly from this extensive feedback. Stakeholders contributed rich, contextual insights beyond academic literature, including practical interventions, innovative approaches, and lived

experiences. These inputs helped create comprehensive sections that not only review existing research but also highlight real-world practices and emerging trends.

This document, shaped by diverse voices and experiences, embodies our commitment to fostering collaboration and inclusivity in the ongoing effort to prevent sexual violence and support survivors and/or victims.

Annex D. Bias and privilege statement

The Safe Futures Hub team who wrote, reviewed, and managed the development of this report is composed of individuals from various backgrounds and experiences. We honor and acknowledge our personal and family experiences of childhood sexual violence. At the same time, we recognize the privileges that may come with our respective identities, as well as the socio-economic circumstances we were born into. We are conscious that our identities and backgrounds can influence and may also limit our perspectives and interactions.

We appreciate that a range of decisions has been made in the development of this report and that this has the potential to redistribute power and privilege in the field of childhood sexual violence prevention. This includes every decision that policy makers, researchers, and academics before us has made about what is studied, written, and published, about whom, by whom and for whom. It also includes every decision we have made about which document to screen, select, and include here, and in which language.

As a result, we are and have been committed to approaching our work with sensitivity and humility. We are keen to listen to and learn from others. We recognize our responsibility to advocate for equity and justice in our work and in broader communities. We have strived to create an inclusive and respectful process where all voices were valued and heard. We aimed to develop a method where we actively challenged systems of privilege and oppression.

To this end, we have, where possible, included the voices of children, parents, community members, and service providers. We reached out for and included literature that is not published through academic sources. We also are in the process of establishing a living systematic review process that will seek out and highlight diverse sources of knowledge on an on-going basis.⁴²⁵

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⁴¹ Whilst individual studies identified programs that, alone, would be classed as "no effect" once these were grouped with other similar programs for classification, the quality of the other studies moved the classification to "conflicting."

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