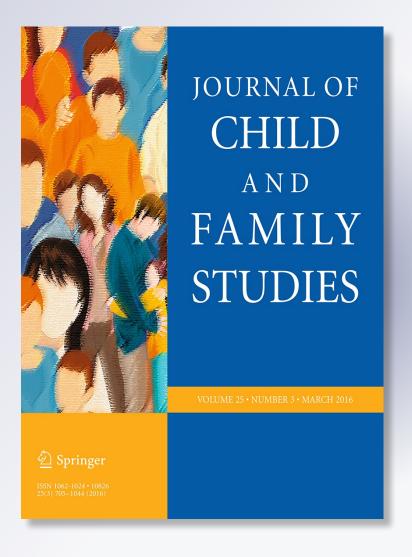
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ORIGINAL PAPER



Parent-Involved Prevention of Child Sexual Abuse: A Qualitative Exploration of Parents' Perceptions and Practices in Beijing

Qian Wen Xie¹ · Dong Ping Qiao¹ · Xiao Lei Wang²

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Abstract Parents are vital to the successful prevention of child sexual abuse (CSA). A better understanding of parents' perceptions and practice of CSA is essential for developing and implementing effective parent-involved prevention programs. Therefore, the purpose of this article is to explore how and why parents in China perceive and respond to the CSA problem in the way that they do. Semi-structured interviews were conducted with a sample of 26 parents of preschool- or primary school-aged children in Beijing, who were purposely selected to be diverse in gender, age, and socioeconomic status. The results show that parents' definition of CSA included four levels of sexual activities and invoked some additional factors. Parents perceived that CSA risks differed between all children and their own children, between boys and girls, and between poor and nonpoor children. They insisted that perpetrators were more likely to be familiar rather than strangers. There were some barriers hindering their CSA preventive practice, especially their ability or willingness to discuss CSA with their children. Furthermore, parents' perceptions and practices were analyzed and discussed within a Chinese sociocultural context, and compared with those in Western developed countries. This study's findings suggest that in the absence of government leadership

Keywords Child sexual abuse · Parent-involved prevention · Parental perceptions and practices · Chinese sociocultural context · Qualitative method

Introduction

Child sexual abuse (CSA) refers to "the involvement of a child in sexual activity which is unlawful, or, although not illegal, to which a child is unable to give informed consent" (World Health Organization [WHO] 1999). Sexual activity may include intercourse, attempted intercourse, sexual touching, genital exposure, exhibitionism, or exposing children to adult sexual activity or pornography, and the use of the child for prostitution or pornography. CSA affects children across a range of nationalities, ethnicities, and cultures. In mainland China, approximately one CSA case was reported every 2 days by the mass media in 2014, which was a substantial increase in frequency over reporting in 2013 (one every 3 days) (China Social Assistant Foundation [CSAF] 2014). Although there are no national statistics related to CSA, previous studies also found that many Chinese children have experienced CSA and subsequent mental health and behavioral consequences. According to a study with a large sample of students in four Chinese provinces, 16.7 % of females and 10.5 % of males have had unwanted sexual experiences before the age of 16 years (Chen et al. 2004). Furthermore, suspected cases of CSA may be underestimated because of the lack of mandatory reporting laws in mainland China.



and professional intervention services for CSA, parent-involved CSA prevention should be developed in mainland China and that CSA prevention education for Chinese parents should be a key part of these initiatives.

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Given the scope and seriousness of the CSA problem, a wide variety of prevention efforts have been developed and implemented in many countries (Butchart et al. 2006). A comprehensive prevention approach should target all people (e.g. children, parents, professionals, and the public) and aim to reach all levels of society (e.g. family, community, and social service institutions) (Wurtele 2009). Parents play an important role in any comprehensive CSA prevention system. First, how parents perceive CSA may impact how they protect and educate their children. It is well established that parents' perceptions of CSA and their communication with children about CSA prevention can positively affect children's prevention knowledge and selfprotection skills (Deblinger et al. 2010; Wurtele et al. 2008). Second, even in the event that CSA occurs, trained parents can identify warning signs of CSA and respond to their child's disclosure of CSA supportively and sensitively, which may reduce the child's feelings of self-blame, isolation, and anger (Miller-Perrin and Perrin 2006). Additionally, parents' involvement can provide support for their children's treatment and recovery process (Saywitz et al. 2000). Therefore, a growing number of researchers (e.g. Elrod and Rubin 1993; Reppucci et al. 1994; Wurtele and Kenny 2010) have suggested that parents should receive special training and be encouraged to participate in CSA prevention efforts to protect their children.

However, unlike most Western developed countries, it is currently very difficult to implement comprehensive prevention of CSA in mainland China. The CSA problem receives scant attention from both the academic community and government. Underscoring this point, there is no systematic policy, even for schools, mandating any prevention or intervention to protect sexually abused children. The emphasis on examinations in the Chinese educational system has significantly impeded the development of sex education in schools. Few Chinese schools have adopted CSA prevention programs as part of their curriculum. Moreover, there are few professional social workers and organizations available to provide adequate protective services to children and families in mainland China. Therefore, Chinese parents or caregivers need to protect their children from CSA. It is important to educate parents about how to protect their children and to teach their children about CSA prevention. Unfortunately, there are almost no parent-involved CSA prevention programs in China.

To design and implement effective parent-involved CSA prevention programs, it is critical to understand parents' perceptions and practices regarding CSA. Parents' perceptions of CSA reflect the way that parents understand or think about CSA, such as how they define CSA, and how they

think about the risk of CSA. Parents' practices regarding CSA reflect the way that they respond to the occurrence or the risk of CSA, such as how they respond to CSA cases, as well as how they discuss CSA prevention with their children. While there are a few studies assessing public perceptions and practice of CSA (Stop It Now 2010), very little research has directly centered on parents. Previous parentfocused research has measured parents' perceptions of CSA-related to the gender of victims and perpetrators (Chen et al. 2007), the negative effects of CSA on children (Mathoma et al. 2006), and the extent to which children disclose occurrences of CSA (Berrick 1988; Tutty 1993). However, research has also revealed that many parents lack crucial knowledge or information related to CSA, especially related to the risk of CSA occurring to boys (Chen and Chen 2005) and to their own children (Collins 1996). In terms of parents' preventive practices, research has typically focused on the nature of parent-child communication about CSA. Although parents report being interested and willing to discuss CSA with their children, very few actually had these conversations (Berrick 1988; Elrod and Rubin 1993). These parents did not feel confident in their ability (Campis et al. 1989), which may be because of their lack of relative knowledge and/or the availability of supportive materials (Wurtele et al. 1992). Additionally, some research exploring what parents tell their children about CSA indicates that the stereotype of the stranger as sexual perpetrator persists among many parents (Babatsikos 2010; Berrick 1988; Hebert et al. 2002).

Many important aspects of parents' perceptions and practices of CSA remain insufficiently understood. For example, according to a literature review of 23 Englishlanguage studies published between 1980 and 2008, only one study directly assessed parents' definitions of CSA (Babatsikos 2010). In that study, parents defined CSA as sexual intercourse with or without consent, but other nonpenetrative forms were not mentioned (Mathoma et al. 2006). In another study, the measurement of parents' perceptions and practices regarding CSA used a simple questionnaire (Chen et al. 2007). Few studies have explored the reasons behind parents' perceptions and practices regarding CSA. Moreover, since the majority of existing research on parents' perceptions and practices regarding CSA has been performed in North America, more studies need to be conducted in other cultural contexts where research on this topic is comparatively scarce. Recognizing both the important role of parents in the prevention of CSA and existing gaps in the research, this paper assesses parents' perceptions and practices regarding CSA through qualitative interviews conducted with a sample of parents living in Beijing, China.



Method

Participants

To capture a wide range of parents' perceptions and practices regarding CSA, maximum variation sampling was used with a set of criteria for recruiting informants: participants should be parents with children in preschool or primary schools because these parents may begin to consider risks outside the home when their children are at this age; participants should represent different backgrounds in terms of occupation, education, and economic status; and participants should have some understanding of CSA and be willing to discuss it. Twenty-seven participants from demographically diverse backgrounds in seven Beijing districts (five urban and two suburban districts) were recruited to participate in this study. Twenty-six completed interviews, with one withdrawal during the interview. The participants included 14 males and 12 females aged 30-46 years. Their sociodemographic characteristics are shown in Table 1.

Procedure

Participants were recruited between April and August 2014. Individual interviews were stopped when it was difficult to find any additional insights from new data being gathered. Prior to commencing data collection, participants were informed of their rights as research subjects, and they were made aware that their participation was voluntary and the information that they provided would be kept confidential. Each interview took approximately 45–90 min. To ensure that the participants felt safe and comfortable talking about sex-related issues, the first author (female) interviewed female participants and the third author (male) interviewed male participants.

Interview Guide and Data Analyses

The semi-structured interviews were conducted based on an interview guide. Four key questions about parents' perceptions about CSA included: What do parents think constitutes CSA? How do parents understand the risk of CSA in the general population for children in mainland China and for their own children? What do parents understand to be the characteristics of CSA victims and perpetrators? What do parents think about the effects of CSA on victims? Two key questions about parents' practices related to CSA included: What would parents do if they knew CSA had happened to a child? What do parents do to protect their children from CSA? All interviews were taped and transcribed. Data were analyzed using the

thematic analysis method (Guest et al. 2012), which organized and categorized the data according to key themes and each participant's responses.

Results

Parents' Definition of CSA

Four Levels of Sexual Activities Constitute CSA

Although all respondents defined CSA as specifically sexual activities with a child, they had different standards for what constitutes a sexual activity. Their responses can be grouped into four levels of CSA, including intercourse, other physical sexual activities, nonphysical sexual activities, and verbal sexual activities (see Table 2). Ninety-two percent of respondents indicated that a clear boundary for determining when CSA had occurred was physical contact with the child's genitals, such as genital touching or fondling. Two male respondents defined CSA very narrowly, only referring to intercourse with a child, which was perceived by other respondents as the most serious form of CSA. Half of respondents believed that CSA could occur without physical contact and they cited some nonphysical sexual activities including genital peeping, showing pornographic material to a child, and using a child in the production of pornography. One male respondent defined CSA very broadly as including "verbal sexual activities," such as flirting with a child with words related to sex. The first three levels of sexual activities mentioned by respondents are consistent with mainstream definitions in Western developed countries.

Additional Factors for Defining Activities as CSA

It is worthwhile to note that when determining whether activities constituted CSA, respondents invoked some additional factors, including the age of the victim, victim consent, the power differential between the perpetrator and the victim, the perpetrator's intention, and the relationship between the perpetrator and the victim. Generally, respondents believed that sexual activities involving a young child (usually younger than 14 years old) were CSA even if the child consented to involvement; however, five respondents felt that "it is hard to say" or "this needed to be discussed" whether some sexual activities (i.e. sexual intercourse) were CSA if the child was 14 years of age or older, because they thought a child of this age was mature enough to understand what sex was and was capable of consent. One out of three respondents defined CSA by virtue of sexual activities that occur between an adult and a child because children are taught to be obedient with



Table 1 Social-demographic characteristics of 26 participants

| | | | | | n | c, |
|--|--|---|--|---|---|--|
| Age | | | | | | |
| | 4 years | | | | 10 | 3 |
| 35–3 | 9 years | | | | 9 | 3 |
| 40–4 | 40–46 years | | | 7 | 2 | |
| Sex | | | | | | |
| Male | ; | | | | 14 | 5 |
| Fema | ale | | | | 12 | 4 |
| Level | of educa | tion | | | | |
| Prim | ary scho | ol compl | eted | | 1 | |
| Junior high school | | | | 3 | 1 | |
| Special secondary school | | | | 4 | 1 | |
| Senio | or high s | chool | | | 4 | 1 |
| Post-secondary school | | | | 4 | j | |
| Bach | elor deg | ree | | | 1 | |
| Mast | er degre | e | | | 4 | |
| Ph.D |). | | | | 2 | |
| Оссир | ation | | | | | |
| Profe | essional (| (e.g. teac | thers, doctors, government employe | ees et al.) | 10 | 3 |
| Non- | professio | onal | | | 13 | 4 |
| Uner | nployed | | | | 3 | |
| amily | income | (RMB/y | vear) | | | |
| 80,00 | 00-100,0 | 000 | | | 4 | |
| 100,0 | 001–150, | ,000 | | | 8 | : |
| 150,001–200,000 | | | | _ | | |
| 150,0 | J01–200, | ,000 | | | 8 | 3 |
| | 001–200, 001–300, | | | | 8 3 | |
| 200,0 | | ,000 | | | | 1 |
| 200,0 | 001–300, | ,000 | Occupation | Education | 3 | 3 1 1 Children's sex/ag |
| 200,0 300,0 No. | 001–300, 001–400, | 000, | | | 3 3 | 1 |
| 200,0 300,0 No. | 001–300, 001–400, Sex | ,000 ,000 Age | Unemployed | Junior high school | 3 3 Family income (RMB/year) 100,000 | Children's sex/ag |
| 200,0 300,0 No. | 001–300, 001–400, Sex | 000 000 Age 35 | Unemployed Self-employed business owner | | 3 3 Family income (RMB/year) 100,000 180,000 | Children's sex/ag F/12 & F/10 |
| 200,0 300,0 No. | 001–300, 001–400, Sex F F | 000 000 Age 35 34 | Unemployed Self-employed business owner University teacher | Junior high school Senior high school Ph.D. | 3 3 Family income (RMB/year) 100,000 180,000 250,000 | Children's sex/ag F/12 & F/10 M/11 |
| 200,0 300,0 No. F1 F2 F3 F4 | 001–300, 001–400, Sex F F F | 000 000 Age 35 34 34 | Unemployed Self-employed business owner University teacher Primary music teacher | Junior high school Senior high school Ph.D. Master degree | 3 3 Family income (RMB/year) 100,000 180,000 | Children's sex/a F/12 & F/10 M/11 F/6 |
| 200,0 300,0 No. F1 F2 F3 F3 F4 F5 | 001–300, 001–400, Sex F F F F | 000 000 Age 35 34 34 37 | Unemployed Self-employed business owner University teacher | Junior high school Senior high school Ph.D. | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 | Children's sex/a F/12 & F/10 M/11 F/6 M/5 |
| 200,0 300,0 No. 71 72 73 74 75 76 | 001–300, 001–400, Sex F F F F | 000 000 Age 35 34 34 37 45 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher | Junior high school Senior high school Ph.D. Master degree Post-secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 | Children's sex/as F/12 & F/10 M/11 F/6 M/5 M/10 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 | 001–300, 001–400, Sex F F F F F | 000 0000 Age 35 34 34 37 45 37 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 350,000 | Children's sex/as F/12 & F/10 M/11 F/6 M/5 M/10 M/11 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 F8 | 001–300, 001–400, Sex F F F F F F | 000 0000 Age 35 34 34 37 45 37 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 350,000 150,000 | Children's sex/a F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 F8 | 001–300, 001–400, Sex F F F F F F F F | 000 0000 Age 35 34 34 37 45 37 39 35 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school Master degree | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 350,000 150,000 250,000 | Children's sex/a F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 |
| 200,0 300,0 No. F1 F2 F3 F4 F6 F6 F7 F8 F8 F9 F10 | 001–300, 001–400, Sex F F F F F F F F F | 000 000 Age 35 34 34 37 45 37 39 35 32 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school Master degree Special secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 150,000 250,000 120,000 | Children's sex/a; F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 F8 F9 F10 | 001–300, 001–400, Sex F F F F F F F F F F | 000 0000 Age 35 34 34 37 45 37 39 35 32 30 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Master degree Special secondary school Special secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 350,000 150,000 250,000 120,000 180,000 | Children's sex/ag F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 F8 F8 F9 F10 F11 | 001–300, 001–400, Sex F F F F F F F F F F F | 000 0000 Age 35 34 37 45 37 39 35 32 30 43 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school Master degree Special secondary school Special secondary school Special secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 150,000 250,000 120,000 180,000 160,000 | Children's sex/aş F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 |
| 200,0 300,0 No. F1 F2 F3 F3 F4 F5 F6 F7 F8 F9 F110 F111 F112 M1 | 001–300, 001–400, Sex F F F F F F F F F F F F | 000 0000 Age 35 34 37 45 37 39 35 32 30 43 40 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Master degree Special secondary school Special secondary school Special secondary school Special secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 150,000 250,000 120,000 180,000 160,000 150,000 | Children's sex/aş F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 F8 F9 F11 F12 M1 M2 | 001–300, 001–400, Sex F F F F F F F F F F F F F F F | 000 000 Age 35 34 37 45 37 39 35 32 30 43 40 32 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker Manager of a printing house | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Master degree Special secondary school Special secondary school Special secondary school Special secondary school Junior high school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 250,000 150,000 120,000 180,000 160,000 150,000 190,000 | Children's sex/aş F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 M/7 |
| 200,0 300,0 No. F1 F2 F3 F3 F6 F7 F8 F9 F10 F11 M1 M2 M3 | 001–300, 001–400, Sex F F F F F F F F F F F F F F F M M | 000 000 Age 35 34 37 45 37 39 35 32 30 43 40 32 33 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker Manager of a printing house Real estate brokerage | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school Master degree Special secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 250,000 150,000 120,000 180,000 160,000 150,000 190,000 300,000 | Children's sex/as F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 M/7 F/4 |
| 200,0 300,0 No. F1 F2 F3 F3 F4 F5 F6 F7 F8 F10 F11 M1 M2 M3 M4 | 001–300, 001–400, Sex F F F F F F F F F F F F F M M | 000 0000 Age 35 34 37 45 37 39 35 32 30 43 40 32 33 43 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker Manager of a printing house Real estate brokerage Property manager | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school Master degree Special secondary school Senior high school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 350,000 150,000 120,000 120,000 180,000 150,000 150,000 150,000 160,000 150,000 190,000 300,000 160,000 | Children's sex/as F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 M/7 F/4 F/11 |
| 200,0 300,0 No. F1 F2 F3 F3 F4 F5 F6 F7 F10 F11 F12 M1 M2 M3 M4 M5 | 001–300, 001–400, Sex F F F F F F F F F F F M M M | 000 0000 Age 35 34 37 45 37 39 35 32 30 43 40 32 33 43 45 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker Manager of a printing house Real estate brokerage Property manager Prison guard | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Post-secondary school Master degree Special secondary school Senior high school Senior high school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 250,000 150,000 120,000 180,000 150,000 150,000 150,000 160,000 160,000 160,000 140,000 | Children's sex/aş F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 M/7 F/4 F/11 M/11 & F/11 |
| 200,0 300,0 No. F1 F2 F3 F4 F5 F6 F7 F8 F9 M1 M2 M3 M4 M5 M6 | 001–300, 001–400, Sex F F F F F F F F F F F F M M M M | 000 0000 Age 35 34 37 45 37 39 35 32 30 43 40 32 33 43 45 31 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker Manager of a printing house Real estate brokerage Property manager Prison guard Manager | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Master degree Special secondary school Senior high school Senior high school Senior high school Post-secondary school | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 250,000 150,000 120,000 180,000 160,000 150,000 190,000 300,000 160,000 140,000 130,000 | Children's sex/ag F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 M/7 F/4 F/11 M/11 & F/11 F/7 |
| 200,0 | 001–300, 001–400, Sex F F F F F F F F F F F F F | 000 000 Age 35 34 37 45 37 39 35 32 30 43 40 32 33 43 45 31 32 | Unemployed Self-employed business owner University teacher Primary music teacher Primary math teacher Pediatrician Financial planner NGO Program Director Accountant Nurse Police officer Community worker Manager of a printing house Real estate brokerage Property manager Prison guard Manager Manager assistant | Junior high school Senior high school Ph.D. Master degree Post-secondary school Post-secondary school Master degree Special secondary school Senior high school Senior high school Senior high school Post-secondary school Ph.D. | 3 3 Family income (RMB/year) 100,000 180,000 250,000 150,000 140,000 250,000 150,000 120,000 180,000 160,000 150,000 190,000 300,000 160,000 140,000 130,000 200,000 | Children's sex/ag F/12 & F/10 M/11 F/6 M/5 M/10 M/11 F/10 M/7 F/5 M/4 F/11 M/10& F/3 M/7 F/4 F/11 M/11 & F/11 F/7 F/3 |



| | _ | |
|-------|---|-----------|
| Table | 1 | continued |

| No. | Sex | Age | Occupation | Education | Family income (RMB/year) | Children's sex/age |
|-----|-----|-----|------------------|--------------------------|--------------------------|--------------------|
| M10 | M | 39 | Emergency doctor | Bachelor degree | 200,000 | F/8 |
| M11 | M | 41 | Driver | Primary school completed | 190,000 | M/18 & M/6 |
| M12 | M | 46 | Program director | EMBA | 400,000 | F/9 & F/9 |
| M13 | M | 33 | Unemployed | Senior high school | 100,000 | F/5 |
| M14 | M | 35 | Unemployed | Senior high school | 90,000 | M/9 |

Table 2 Four levels of sexual activities mentioned by respondents

| | Number reporting | Percentage ^a |
|----------------------------------|------------------|-------------------------|
| Intercourse | 10 | 38 |
| Other physical sexual activities | 24 | 92 |
| Non-physical sexual activities | 13 | 50 |
| Verbal sexual activities | 1 | 4 |

 $^{^{\}rm a}$ Categories are not mutually exclusive; percentages do not sum to 100 %

adults, while viewing sexual activities between children differently. As one respondent (M4) said, "CSA should be ... an act of bullying based on age or maturity. So (sexual activities) between two children of similar ages, such as classmates, are just playing games."

Five respondents distinguished normal family and caregiving interactions from "abnormal touches" based on the actor's intention. Activities that were intended for the sexual stimulation of the perpetrator were considered instances of CSA. The relationship between the actor and the child also impacted whether respondents classified activities as CSA. As a respondent (F2) said, "Looking at the private parts of a child's body, unless it is done by family members, constitutes sexual abuse." Notably, no respondents mentioned intrafamilial abuse (i.e. incest) when they defined CSA.

Parents' Perceptions of CSA Risk

Risk of CSA for All Children in Chinese Society

Forty-two percent of respondents did not believe CSA is an important or serious problem and that it is uncommon in the general population of children in mainland China. A respondent (M7) said:

The problem (of CSA) is nothing serious. About one out of a million children might encounter it. You see, there are so many children in our country and only a few cases were reported. Nowadays, almost all cases can be reported because of the progressive technology of the mass media.

One respondent (F2) also said that, "I don't hear of many (cases of CSA). I think these kinds of things are still very rare. Most people would not have experienced this." These respondents (42 %) felt reluctant to believe that unpleasant and horrible things like CSA would happen within Chinese society. This compares with 84.2 % parents in the study by Lge and Fawole (2011), who agreed that CSA is a common social problem in China.

Risk of CSA to Their Own Children

The same percent of respondents (42 %) recognized the existence of CSA in society, but they did not believe it could happen to their own children. As M3 said, "The percentage of CSA happening to my child is zero." One respondent (F7) also said that, "I think there are risks (of CSA), but there are no risks around us." Similarly, many American parents studied by Collins (55 %, 1996) and Wurtele et al. (59 %, 1992) also tended to believe that their children were at slight or no risk of CSA.

Can Parents Reduce the Risks of CSA?

One respondent (F8) expressed significant concerns about talking about the risk of CSA to her own child. However, she felt unconfident about discussing the risk by herself. She said:

It is very terrible because I felt CSA was very far away before, but now I feel it gets closer and closer, and it may happen to my own child.... Yes, it is common. CSA happens in the countryside, and also in cities. Now it is not true that it happens more in poor areas and less in developed areas.... It is very awkward. I feel worried, but I don't know how to talk about sex with my child.... Maybe it is better to let the school deal with this.

Conversely, two respondents accepted the existence and significance of the CSA problem, and said that they preferred to deal with the problem by themselves if it happened to their own children. As a respondent (M5) noted:



Many children might encounter CSA, mostly verbal sexual abuse. I think there may be some risks of CSA to my own child.... If CSA happened to my child, I prefer to deal with it by myself. I will let him (offender) be naked in public and let him become more hurt psychologically. Let him feel that, as an adult, if you cannot endure this, how about the child?

These respondents preferred to punish offenders as revenge for what was done to their children with violence or illegal methods. They also preferred not to ask the judicial system for help because they did not want other people to know what had happened to their own children.

Parents' Perceptions of the Characteristics of Victims and Perpetrators

Victim Characteristics

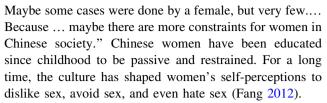
Seventy-seven percent of respondents indicated that girls are at higher risk of CSA than boys. However, the risk of CSA for boys was minimized. Two respondents even insisted that boys are not sexually abused. One respondent (F11) did not acknowledge any negative effects associated with CSA on abused boys: "I think boys should be OK because ... boys will not suffer trauma even if they have a sexual relationship with others in the future." Second, 20 respondents insisted that CSA risk was correlated with the socioeconomic status of the child's family, especially poverty. One respondent (F5) explained:

Poor children, especially girls, are more likely to be seduced by food, clothes, or money.... Because their material needs cannot be satisfied within families ... they may have a relationship with men who have some money.... They will have problems.

Third, respondents attributed CSA to the rural-to-urban labor migration that has resulted in 61.03 million "left-behind children" (living in rural areas with parents working in cities) and 35.81 million "migrant children" (migrating with parents and usually living in a rural-urban fringe zone) (National Bureau of Statistics of the People's Republic of China 2010). More than half of respondents indicated that "left-behind children" and "migrant children" were at especially high risk of CSA because their parents were busy working and often not at home with their children.

Perpetrator Characteristics

Ninety-six percent of respondents suggested that most CSA perpetrators were male, not female. As M6 said, "I have never heard about CSA cases conducted by females.



Seventy-seven percent of respondents recognized that children are more likely to be sexually abused by people with whom they are familiar rather than strangers, which is in contrast with some previous studies where parents emphasized the danger posed by strangers (e.g. Hebert et al. 2002). As F8 said, "Familiar people have more opportunities.... They often know the child's schedules and have more intimate access than strangers." F7 also indicated that, "I think children are more suspicious of and guard against strangers because parents have always told them about the risk.... They are less suspicious of people who are often around them." One respondent (F3) cited her friend's experience explaining that "the child would react strongly and tell others about what happened in the event that he or she was sexually abused by a stranger"; however, the child would feel more ashamed to tell others if violated by a familiar person.

Respondents considered the risk of CSA by male teachers to be very high. Ninety-two percent of respondents mentioned instances where male teachers committed CSA, as M9 notes:

Teachers are a large group because they have close contact with and unquestioned authority over children in the school.... Parents always tell their children to be obedient to teachers and study well. ... Thus, once a child is sexually abused by a teacher, he or she will not know how to resist or react.

In summary, respondents perceived children who were girls, living in poor families, and who were "left-behind children" or "migrant children" as being at greater risk for CSA than others. They also perceived that people who were males, especially male teachers, or those who were known to the child were more likely to be potential perpetrators. Respondents' perceptions of characteristics of victims and perpetrators are mainly consistent with a substantial number of CSA cases processed by a regional court (Jiang and Zhang 2015) and reported by the mass media (China Social Assistant Foundation [CSAF] 2014). Chinese parents' perceptions of CSA may be impacted by the nature and contents of the media (i.e. Internet, television, newspapers) since all of them indicated that their main and sometimes only source of information about CSA was the mass media. However, if this is the case, other types of CSA victims and perpetrators (such as male victims and female perpetrators) who are rarely reported by the mass media might be neglected.



Parents' Perceptions of CSA-Associated Effects on Victims

Impacts the Entire Life of Abused Children

In terms of the effects of CSA, only one female respondent mentioned the initial effects of CSA on victims, including "feeling uncomfortable and unsafe." Other respondents considered the experience of CSA to be a permanent shadow or an everlasting scar on a child's heart that would blight his or her entire life. As F6 said, "The little child ... if she is ruined by an adult ... that will ruin her entire life.... It is a shadow!" They also argued that CSA victims would suffer severe long-term psychological, behavioral, or interpersonal problems, which was consistent with the findings of other research conducted in other countries (e.g. Briere and Elliott 1994).

Hard to Recover

Eighty-eight percent of respondents believed that it was very difficult for abused children to recover from their experience successfully because of their vulnerability and fragility, as F9 said:

I think CSA is more serious and terrible than killing the child directly.... It is harder for a child to heal than an adult because the child is like a piece of blank paper. That means, in the beginning of their life, he or she has had such a bad experience without experiencing good things.... If the same occurred to an adult, he or she has experienced many good things.... The child will think that society is only full of bad things.

The low social tolerance for discussing sexual issues in Chinese society was also considered an important factor that might impede the recovery of abused children. As M2 said: "The child cannot recover in Chinese society. It may be easy in other countries because ... people can discuss this issue (CSA) openly without much worry. This issue remains under the table in our country." Indeed, although public perceptions related to sex have changed because of social changes over the last three decades, especially globalization (Fang 2012), Chinese people are still unwilling to discuss sex-related issues openly.

Less Attention, Less Harm

Thirty-one percent of respondents assessed the negative effects of CSA based on attitudes held by people close to the victim. This finding is consistent with Long's (2007) study that explored the experiences of rural Chinese families facing an extrafamilial CSA problem upon disclosure.

Respondents suggested that the experience of CSA assaulted the child's human dignity because he or she would be singled out for ridicule and humiliation as they grew up and be subject to gossip and judgment. One respondent (M3) even described the negative effects associated with CSA as "a problem of face" and suggested that there would be no negative effect if other people did not know what had happened. F8 also said:

It is better that society should not pay attention to this problem, especially the mass media. Mass media reports do capture the attention of people, and the perpetrator may be arrested; however, what are the final consequences? In the end, the family and this child will be hurt the most. How does this child find a boyfriend and get married later?

Only one respondent suggested that some professional organizations should provide services to sexually abused children and their families, which may be because extrafamilial intervention in sexual abuse or sexual violence is frowned upon by most Chinese people (Wang and Ho 2007).

Parents' Response to Hypothetical CSA Cases

When talking about what to do in the event that a case of CSA occurred to a child (not their own), M3 indicated that, "I will keep the secret for the child.... If no one knew it, it would cause no harm to the child." Other respondents reported that they would tell the child's parents and let them decide what to do next. All of the respondents firmly expressed that they would not report the incident to the police, mainly because they were not legal guardians of this child and they believed that they did not have the right to do so.

When talking about what to do if CSA happened to their own child, three respondents indicated firmly that they would report the incident to the police if the situation was serious. As M10 said, "In Chinese society you only can report to the police.... We don't have any other way to ask for help." Six respondents felt hesitant to report CSA to the police and felt it was difficult to make a decision. Other respondents indicated that they would not report the case to the police because they thought the child would suffer additional harm if more people knew what had happened. This belief was also found in a study conducted in Hong Kong (Tang and Yan 2004).

Parents' Prevention Practices

Although all respondents agreed that it was necessary to educate their children about the risks of CSA, only nine respondents discussed CSA prevention with their children



by explicitly telling them to not let other people touch their genitals, to say "no" and call for help if other people tried to touch them, to not go with strangers, or to tell them if anything like this happened. Sixty-five percent of respondents still did not discuss CSA prevention with their children for various reasons.

Enough Protection

Twenty-three percent of respondents felt it might be unnecessary talk with their children about the risk of CSA because they felt very confident about their child's protection. As M12 indicated, "I think my family has already done everything to protect our children.... There is no need to talk about CSA." Respondents described some general practices and strategies that they employed to protect their children and keep them safe from harm, including: choosing good schools for their children, only allowing them to play with people they trusted, always picking them up from school, and never allowing them to go outside alone, especially at night. In the absence of any support from the government and society, Chinese parents are apparently assuming the main responsibility for protecting their children from CSA.

Probably Harmful

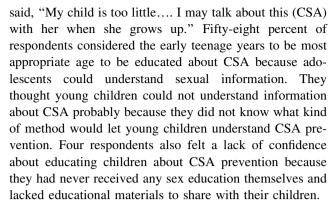
Two respondents thought discussing sex with children might not be beneficial. F12 said, "I am worried that if I talk about sex with him ... that will increase his curiosity about sex. That may lead to involvement in bad things. If I don't tell him, he will not pay much attention to sex." Many Chinese parents in a previous local study (e.g. Chen et al. 2007) have also shown their unwillingness to let their children know too much about sex.

Ashamed to Talk About Sex

Two respondents felt embarrassed to talk about sex with their children. M13 said that, "Chinese society is still relatively conservative.... I don't know how to start the conversation with my child about sex.... It's a little bit embarrassing." During the interviews, most respondents, especially females, preferred to use terms like "that" or "that thing" when referring to "sex" or "sexual intercourse." They felt embarrassed to discuss sex-related issues in general and even more so when involving children.

Do Not Know How to Educate

Forty-two percent of respondents thought their children were too young to receive information about sex. As M6



Chinese parents are ambivalent about taking primary responsibility for CSA prevention education with their own children. Sixty-two percent of respondents considered CSA prevention education as the school's responsibility when considering the question, "Who was the most appropriate educator to provide CSA prevention education?" F2 explained that, "Teachers can provide this kind of knowledge using their professional position, but parents cannot do it like this." One male respondent also said that, "Children always listen to what teachers say.... They pay little attention to what parents say." In fact, the phenomenon of limited communication regarding sexual matters between parents and children has been shown not only in China (Zhang et al. 2007), but also in the West (Wurtele et al. 1992).

Discussion

CSA is a significant social problem with far-reaching consequences for victims and families. Parent-involved prevention is widely recognized as an important strategy for tackling the CSA problem. Parents' perceptions and practices regarding CSA should be carefully considered in the design of a parent-involved program. Based on semi-structured interviews conducted with a sample of 26 parents of preschool- or primary school-aged children in Beijing, this study provided a comprehensive description of parents' perceptions and practices regarding CSA, which may provide important evidence and new insights to inform the development of parental education programs in Chinese society.

Although Chinese parents in this study defined CSA in terms of an array of sexually oriented physical and non-physical activities, physical contact with the child's genitals is still an important standard for many of them to determine whether CSA has occurred. Similarly, in a previous study, only about 3 in 10 Chinese parents knew that usually there are no obvious physical signs when CSA has occurred (Chen et al. 2007). Therefore, developing a clear and standardized professional definition of CSA to be



adopted by the public in China is necessary and important for developing effective prevention and intervention strategies. However, the issue of defining CSA becomes complicated within a cultural context because perceptions of what actions constitute sexual abuse vary widely around the world (Korbin 1991). There are three essential differences between the definition of CSA that prevails in China and mainstream definitions common to Western developed countries.

First, some parents in this study defined CSA as sexual activities involving a child under the age of 14 years. However, many Western developed countries consider CSA victims to be aged under 16-18 years. The age of childhood is commonly considered 0-14 years in both public perception and practice in China. According to the Criminal Law of the People's Republic of China, the definition of a victim of the Crime of Raping Young Girls (Article 236) is a girl aged under 14 years. A person younger than 14 years old is not responsible for any criminal liability (Article 17). Moreover, Chinese governmental child welfare institutions have used the age of 14 years as a boundary when defining "children" in determining their eligibility for services. Teenagers older than 14 years have to be placed with adults in adult welfare institutions. In China, age is related to children's maturity and a person under 14 years old is commonly considered as "little" and immature. Some of these questions are still controversial and need to be discussed in different cultures, such as: Should the age of consent in CSA should be abolished? What should be the appropriate age of consent? This is complicated by the fact that the age of consent in the definition of CSA varies in different sociocultural contexts and during different historical periods, and children's understanding of sex has evolved and changed as well. We suggest that the most important criterion that should be considered when attempting to define CSA in China is that the definition must protect children's rights and safety outside and within the family.

Second, Chinese parents in this study defined CSA as being sexual activities conducted by adults while ignoring juvenile CSA offenders. The advantage of age that perpetrators have over their victims is an important component of the definition of CSA in Western developed countries, which usually focus on age discrepancies of 5 years or more (Miller-Perrin and Perrin 2006). An increasing number of research studies have shown that juvenile offenders are a significant segment of CSA perpetrators (Saunders et al. 1999). Therefore, prevention programs need to educate Chinese parents that sexual activities conducted by children's peers or other adolescents may be more than "playing games."

Third, Chinese parents largely define CSA in terms of extrafamilial abuse. However, the definition of CSA in

Western developed countries usually includes both intraand extra-familial abuse. It seems that Chinese parents prefer to believe that CSA does not happen within the family. This is consistent with studies that indicate that Chinese people emphasize the difference between "insider" and "outsider" (King 1993). In the "insider" circles, especially within the family, the important prerequisites for maintaining relations are affection and responsibilities, rather than rights. Parents are considered to do everything for children's good in traditional Chinese culture, which stresses "family-centered" relationships where affection among family members is particularly valued (Oiao 2012). However, fathers are the most likely perpetrators in substantiated cases of intrafamilial CSA in the US (U.S. Department of Health and Human Services, Administration on Children, Youth and Families 2005). The "familycentered" value may obscure intrafamilial abuse in Chinese society. Therefore, a clear definition of CSA that includes intrafamilial abuse may increase the public's awareness and promote better prevention strategies.

The discount hierarchy model developed by West (1989) in the US is useful to assess Chinese parents' perceptions of the risk of CSA in this study. The discount hierarchy model, as part of protective behaviors training, has proved useful in explaining many barriers to acknowledging the existence and impact of societal problems. In this model, a hierarchy is formed by four resistance levels: "existence," "significance," "solvability," and "self." In this study, 42 % of respondents could be categorized at the "existence" level of resistance, feeling reluctant to believe that unpleasant and horrible things like CSA could happen within Chinese society. The same percentage (42 %) of respondents could be categorized at the "significance" level, who accepted the existence of the CSA problem, but did not believe that CSA was an important or serious problem. In particular, these respondents did not believe that CSA could happen to their own children. None of the parents in this study were found to be at the "solvability" resistance level, in which people accepted the existence and significance of the CSA problem, but believed that it could not be solved. Chinese parents might not know or consider whether the CSA problem can be dealt with because even the government and wider society has not paid attention to or tried to deal with the CSA problem. Only one female respondent could be described as being at the "self" level of resistance. She accepted the existence and significance of the problem, and that there were solutions, but she did not believe that she could solve the problem by herself. Conversely, two respondents, who were outside the discount hierarchy model, accepted the existence and significance of the CSA problem, and preferred to deal with the problem by themselves if it happened to their own children. However,



they preferred to use violence or illegal methods to punish offenders, which would not deal with the CSA problem in a public manner. Identifying the parents' discount hierarchy level may help us to determine what information should be presented and how to deliver it. In the US, protective behaviors training (West 1989) has been found to be effective in overcoming social barriers to acknowledging family violence, including child abuse. However, a Chinese sociocultural context needs to be considered when adapting this model. Implementing protective behaviors training may be impeded in mainland China because of the lack of professional social workers and organizations in the field of child abuse. The process of addressing societal barriers to acknowledging CSA should be performed in incremental stages with education about CSA as the first step. Given the absence of social service resources, this would be the most economic and effective approach.

This study also explored Chinese parents' perceptions regarding victims and perpetrators of CSA. First, most parents continue to endorse a persistent myth regarding CSA, which is that few boys are sexually abused. In reality, boys may be abused more often than data indicates because males appear to be less likely to report sexual abuse (O'Leary and Barber 2008). Chinese government officials and academics are beginning to become aware of male vulnerability. In October 2014, the revised Criminal Law of the People's Republic of China (Article 237) changed the language used to describe a victim of a "Crime of an Indecent Act" from "woman or girl" to "people." However, the language surrounding victims of rape in this Criminal Law still refers to women or girls. Therefore, educating the public about the risk of CSA to boys should be an important focus. Second, Chinese parents correctly identified the greater risk of CSA on "left-behind children" and "migrant children." Therefore, rural areas and ruralurban fringe zones should be a focal point when developing CSA prevention in China. However, resources such as services and professionals in these areas are even scarcer than in cities. Therefore, mass media campaigns and providing CSA-related resources, such as audiovisual materials and books, to parents and caregivers can be used as a cost-effective CSA prevention method in rural areas and rural-urban fringe zones. Third, many Chinese parents correctly recognized that children are more likely to be sexually abused by people with whom they are familiar rather than strangers. However, this does not mean that these parents know how to prevent CSA perpetrated by familiar people. In contrast, nearly all of the parents in two Chinese studies emphasized the risk from strangers when discussing CSA with children (Chen et al. 2007; Chen and Chen 2005). It is much more challenging to bring up the risk of familiar and intimate perpetrators with Chinese families. Moreover, the repeated association of male teachers with CSA perpetrators unnecessarily frightens parents, and contributes to tension between teachers and parents. Therefore, identifying and responding to the risk of CSA from familiar people needs to be an important focus in parent-involved prevention programs.

Chinese parents appeared to consider the effects of CSA through the lens of reputation or "face" rather than the health or rights of children. Chinese culture attaches more importance to collectivism as opposed to individualism in the West. In contrast to an emphasis on human rights, personal values, and freedom in the West, Chinese culture emphasizes the centrality of family and interpersonal harmony. Therefore, CSA often raises the specter of "losing face" for the whole family. Moreover, the traditional idea of masculine superiority in China, which places the man as the head of the household, continues to shape public attitudes about women even in modern China. An accompanying notion is that of chastity for women before marriage. "Chastity" is the most important "face" for a woman in Chinese society. "Face" is not just determined by a woman's actual virginity, but also by the opinions of people around her, making it an issue of "reputation" (Long 2007, pp. 447–448). Given this dynamic, most parents fear the shame accompanying CSA and strive to keep it secret, which results in abused children not receiving support services. Chastity and fears of losing face trump children's feelings and rights. In fact, Chinese police forces are beginning to pay more attention to cases related to children and sex. Reporting to the police also may decrease the opportunity for the reported offender to abuse other children. Therefore, promoting parental awareness about the consequences of CSA for victims in prevention programs may decrease the harm to abused children when CSA does occur.

This study's findings may provide important evidence to inform the development of parental education programs in Chinese society. However, the sample of this study should not be seen as representative of all parents in mainland China because participants were selected purposively to represent the diversity of Chinese parents. According to the model of three-level prevention of CSA (Centers for Disease Control and Prevention [CDCP] 2004), we suggest developing a three-level CSA prevention education for parents in China. In the beginning period of prevention education, the content of education should be systematical, clear, and simple. Parents should be educated about what to do before and after CSA has occurred. At the level of primary prevention education, key content should include what behaviors constitute CSA, the risk factors for CSA, and how to talk about sex-related issues and CSA prevention with children in the Chinese cultural context. The key content of secondary prevention education of CSA includes the warning signs of CSA and how to identify them, how to respond to a child's disclosure of CSA



immediately and supportively, and how to report perpetrators to the police. At the level of tertiary prevention education, parents need to know how to provide long-term support for their children's recovery after CSA has occurred, and how to adjust their internal or social pressures resulting from "losing face." To improve the effectiveness of prevention education, supportive materials or information about CSA prevention should be provided directly as well as being delivered through the mass media.

In conclusion, in the absence of adequate government attention and given the lack of professional intervention services for CSA, culturally relevant CSA prevention programs need to be developed in mainland China and CSA prevention education for parents should be a key part of these initiatives.

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