A Review of Child Sexual Abuse in China and A CSA Prevention Program for Chinese
Preschool-aged Children

by

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Abstract

Although Child Sexual Abuse (CSA) has become a recognized global problem, studies about CSA in China are scarce. The purpose of this project is to survey and report evidence about the nature, prevalence of CSA in China, to discuss the possible cultural factors for the prevalence and characteristics of reported child sexual abuse and to design a new CSA prevention program for Chinese preschool-aged children. In the literature review part, 27 peer-reviewed research papers about CSA in China are reviewed to provide definitions of CSA, describe the prevalence of CSA in China, and compare the prevalence of CSA in China and western countries. Reasons for the great variations in prevalence of CSA reported in the available studies of CSA in China are proposed including research design and information gathering tools used, age cohorts and regions. The main findings about nature of CSA in China such as the types of CSA, offenders’ and victims’ characteristics provide a guidance in evaluating the design of a school-based CSA prevention program for Chinese preschool-aged Children.

Keywords: Child Sexual Abuse, China, CSA prevention program
Introduction

Child Sexual Abuse (CSA) is prevalent worldwide; approximate 73 million boys and 150 million girls under the age of 18 have experienced sexual violence in various forms. (Singh, Parsekar, & Nair, 2014).

Studies of CSA in China remain scarce (Lin, Li, Fan, & Fang, 2011). Some studies have reported the prevalence of CSA in some specific provinces in China. Nevertheless, CSA is rarely known in the whole country. But no matter what level of research is available it does not change the fact that “CSA is a serious infringement of a child’s rights to health and protection” (Zhu et al., 2015, p. 2). Sexual abuse causes negative physical and psychological consequences to children (Johnson, 2004; Postmus, 2012). For example, children with CSA history showed a higher rate of health risky behaviors, such as drinking, smoking, gambling, suicidal ideation and suicide attempt (Chen, 2004; Chen, Dunne, & Han, 2004b; Lin et al., 2011; Zhu et al., 2015) and suffered from a number of mental health outcomes, such as “psychological symptoms of somatization, obsessiveness, interpersonal sensitivity, depression, anxiety, hostility, phobic anxiety, paranoid ideation and psychoticism” (Chen, Han, Lian, & Dunne, 2010, p. 866). This kind of injury could be serious and may last a long term even possibly throughout the victims’ adulthood (Dube et al., 2005).

This project illustrates CSA in two parts. The first part is a literature review of existing studies; the second part is a reflection on educational practice. The goal of the first part is to review the available background research literature related to CSA in China to identify reliable
evidence about the nature, prevalence and consequences of CSA in China. It provides evidences that support the second parts of this project where a new CSA prevention program will be designed for Chinese preschool-aged students to help them build knowledge of CSA and self-protection skills. As such, this study contributes to a better understanding of the nature of child sexual abuse in China, including prevalence of CSA for females and males, main CSA type, mean age of the victims when they experienced first CSA, and offenders’ characteristics such as gender, relationship with victims, so that to design a solution to help to decrease the number of CSA victims in China.

In Part 1 of the project, the definition of child sexual abuse and illustrations will be provided to help readers to have a better understanding of the range of incidents that are collectively termed as CSA. Available studies about CSA in China are summarized thereafter. The discussion part of the analysis will be based on comparing the prevalence of CSA in China and western countries, and explain the reasons that have been proposed for the great variations in prevalence of CSA reported in the available studies of CSA in China.

**Method**

To locate research relevant to the goals of the first part, two search strategies were used:

(a) searching computer-based databases; and

(b) tracking references used in other systematic reviews related to CSA in China.

There are four databases used in this project: (a) Thomson Reuters Web of Science, (b) Google Scholar, (c) Resources from University of Victoria Library, and (d) Chinese National
Knowledge Infrastructure (CNKI). The first three databases were used to find out studies published in English using search terms such as “Prevalence of CSA in China”. CNKI was used to find out studies published in Chinese, and search term is “中国儿童期性虐待调查 (Investigation of child sexual abuse in China).” In Thomson Reuters Web of Science, 20 papers related to this topic were located and 443 papers were shown up in CNKI.

Two systematic reviews of CSA in China also provided lists of related research; one was from Fry’s (2012) systemic review of research on CSA in East Asia and Pacific Region, and the other was a meta-analysis of 27 CSA studies in China (Ji, Finkelhor, & Dunne, 2013).

Some papers identified in Web of Science could also be found in the reference lists, and most papers found in CNKI were not used in this paper because they referred only to child abuse instead of child sexual abuse. Moreover, there were also some papers in common in those two reference lists. Therefore, to limit the range of papers related to CSA in China, selection criterion for studies included in the literature review:

(a) data of the studies should be collected directly from children or adults instead of the justice system, clinical cases or cases from newspapers;

(b) including a description of their information gathering measurements of CSA and questions used in their study;

(c) there is no restriction to the relationship between offender and victims in the study. For example, the study may investigate sexual abuse in specific relationships like parent-child;
(d) there is no restriction to the gender of the participants. The samples could be female-only, male-only, and both genders;

(e) by using quantitative methods, the study should report both prevalence of CSA for females and prevalence of CSA for males. The study will not be selected if it only reported prevalence of CSA as a whole instead of analyzing it by gender.

After applying the criteria to selection and removing unqualified articles, 27 studies were referred to analysis in the first part. It should be noted that although there were also 27 studies reviewed by Ji et al. (2013), there were 14 papers in common as some papers reviewed in Ji et al.’s study did not meet the selection criterion.

**Definition of Child Sexual Abuse**

Sexual abuse against children exists across societal and cultural boundaries (Finkelhor & Dziuba-Leatherman, 1994). Although CSA has become a global phenomenon (Johnson, 2004; Dube et al., 2005), CSA “definitions vary according to different perspectives, and are reflected in different policy responses from human rights and development organizations as well as governments” (Chitereka, 2010, p. 30). There are a variety of descriptions of what constitutes sexual abuse, for example, “any activity with a child before the age of legal consent that is for the sexual gratification of an adult or a substantially older child” can be regarded as CSA (Johnson, 2004, p. 462); or “the involvement of a child in sexual activity (e.g. rape, oral sex) which is unlawful, or to which a child is unable to give informed consent” (Hong Kong Social Welfare Department, 2007, p. 3) can be regarded as child sexual abuse. However, neither of
those two descriptions is comprehensive. Johnson’s description does not include the child who is over the age of legal consent but does not have the capability to give informed consent (e.g. mentally retarded child). In the description from Hong Kong Social Welfare Department, sexual activity is only limited to unlawful activity. Therefore, in this project of child sexual abuse, a comprehensive definition of CSA from World Health Organization (2015) will be used to differential sexual abuse on other forms of sexual behavior. Accordingly, CSA is defined as:

the involvement of a child in sexual activity that he or she does not fully comprehend, is unable to give informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society.

(World Health Organization, 2015, p. 1)

To explain the sexual activity clearly, researchers often give examples of sexual activity and divide CSA into two types; one is physical contact CSA behavior, and the other is non-physical contact CSA behavior (e.g. Chen, 2004; Munro 2000; Sun et al., 2004a; Zhu et al., 2015). The reason why researchers use the term physical contact behavior instead of the term physical assault behavior is that “sexual assault is typically associated with contact by force and violence” (Luo, Parish, & Laumann, 2008, p. 722). However, in most of the CSA cases, offenders did not use violence to involve a child in sexual activities, for example, only 3.2% of abusers used violence when they sexually abused female victims, and 6.7% of abusers used violence when they sexually abused male victims (Sun, Dong, Yi, & Sun, 2006b). Therefore, the term physical contact behavior is more accurate than the term physical assault behavior.
Moreover, there is another classification by dividing sexual activity into direct exploitation and abuse of a child, and indirect exploitation and abuse of a child (Hong Kong Social Welfare Department, 2007). However, specific examples are not provided to explain what activities need to be regarded as direct exploitation and abuse of a child or indirect exploitation and abuse of a child. Therefore, in this project, the classification that divided CSA into physical contact behavior and non-physical contact behavior will be used to classify different kinds of CSA behaviors.

After reviewing different examples from the 27 research papers related to CSA in China, a list of examples was obtained to explain the classification of physical contact behavior and non-physical contact behavior clearly.

Physical contact CSA behavior includes the following examples, but is not limited to:
- making the child to touch or fondle their bodies (genitals/breasts);
- touching or fondled the child’s bodies (genitals/breasts);
- making the child touch their bodies in a sexual way or sexually arouse them;
- rubbing their bodies (genitals/breasts) against the child’s body;
- using their mouth to touch the child’s bodies (genitals/breasts);
- trying to have oral/vaginal/anal sexual intercourse with the child;
- having oral/vaginal/anal sexual intercourse with the child;
- using a penis, finger or other foreign objects to penetrate the orifice of the child body (mouth, vagina, anus);
- asking the child to swallow others’ semen; and raping.

Non-physical contact CSA behavior includes the following examples, but is not limited to:
- exposing one’s body (genitals) to the child;
- masturbating in front of the child;
- trying to sexually
arouse the child; make the child watch others’ when they are having sexual intercourse; showing or making the child watch pornographic materials (including books, magazines, images and videos); taking pornographic pictures of the child; asking the child to fondle his or her own sex organs; taking advantage of the child to product pornographic materials; watching the child when the child was unclothed for sexual gratification; and speaking foul language to the child or telling erotic jokes to the child for sexual gratification.

Generally, the term child is used to refer to a person who is under the age of 18. But age is not the only decisive factor of CSA. When a child does not fully understand a sexual activity, even though the child may say yes to the sexual activity, the child cannot be considered as able to give informed consent. For instance, when an offender uses money, snacks, or candies to trick the child to be involved in a sexual activity, even though the child may accept the temptation and agree to participate in the sexual activity, this cannot be considered as informed consent. Therefore, in this situation, it is still regarded as a case of child sexual abuse (Hong Kong Social Welfare Department, 2007). If the child is mentally retarded, he or she should also be considered as unable to give informed consent. The child whether immature or adolescent is not developmentally prepared and cannot give consent.

Definitions of CSA in China.

Definitions of CSA in studies done by researchers from China are not comprehensive. Most researchers from China tend to define CSA as children experienced unwanted sexual activities offered by an adult in their childhood. In fact, the offender of CSA can be either an
adult or a child who is substantially older (usually 5 years older) or has power over the victim
(Hong Kong Social Welfare Department, 2007), which means offenders can be strangers or
anyone who is already known or trusted by the child (including but not limited to siblings,
parents, stepparents, grandparents, relatives, teachers, care persons, officials, classmates).
Compared with this definition of offenders, Chinese scholars only consider adults as CSA
offenders, which is the reason why their definition is less comprehensive.

A child can be an offender in a CSA case. For example, 2.6% of 2994 participants in one
study from China have experienced sexual contact (including vaginal intercourse and other ways
of stimulating breasts or genitals) before the age of 14 by peers including schoolmates,
playmates, siblings and others of approximately the same age as the victim (Luo et al., 2008). A
close examination of the other papers about CSA in China fails to reveal any reasons for not
investigating or reporting peers as perpetrators of CSA. It may be a reflection of the law in China
where a child under 14 years old does not bear criminal liability even for serious crimes such as
rape (People’s Republic of China Criminal Law, Amended 2015). Moreover, cases involving
cries committed by children who are at the age of 14 to 18 shall not be heard in public (Law of
China on Prevention of Juvenile Delinquency, 2012). Therefore, except for a single researcher
who has investigated peer contact CSA (Luo et al., 2008), there is no public reporting of the CSA
cases committed by a child or an adolescent. This is only a lack of reporting and does not signify
that minors do not commit sexual abuse in China.
An Overview of Studies Related to Child Sexual Abuse in China

To find out the prevalence of CSA in China, this review will examine the relatively limited research related to child sexual abuse that has been conducted over the past decade in China first, and then compare the results with the prevalence of CSA in other countries.

Studies related to CSA in China that are reported begin from the early 21st century. After removing the studies that do not meet the selection criteria, 27 research papers remained to analyze and all those studies collected the data through questionnaires or interview from both students and adults. All of these studies were conducted in different cities or provinces in China, including Mainland China (this paper will use China to refer to Mainland China), Hong Kong and Taiwan. The methods adopted generally rely on anonymous self-administered questionnaires or face to face/ computer-based interview among students/adults from elementary schools, middle schools, secondary schools, medical schools, colleges, or universities. Some studies also included those children who were not attending schools when they were participating in the investigations.

Methods of gathering CSA data.

In all of the studies the prevalence of CSA was measured by asking participants whether they had experienced any of CSA events (yes/no) through a questionnaire including both physical contact and non-contact CSA behaviors. The behaviors that were asked about in the measurement questionnaires were different among those 27 papers. Table 1 displays the items used in the three main measurement questionnaires. These three questionnaires together were

Table 1

<table>
<thead>
<tr>
<th>Measurement name</th>
<th>Measurement description</th>
<th>Questions under non-physical contact CSA: a person</th>
<th>Questions under physical contact CSA are: a person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen 2004 CSA Scale:</td>
<td>The Chen CSA questionnaire asks participants whether they had experienced any one of the listed 12 unwanted sexual activities before the age of 16, researchers tried to find out the prevalence of CSA.</td>
<td>(a) exposed their genitals to the respondent;</td>
<td>(a) touched or fondled their body including breasts or genitals;</td>
</tr>
<tr>
<td>Chen 2004 CSA Scale is</td>
<td></td>
<td>(b) masturbated in front of the respondent;</td>
<td>(b) made the respondent arouse them and touch their body in a sexual way;</td>
</tr>
<tr>
<td>several studies among</td>
<td></td>
<td>(c) tried to sexually arouse the respondent.</td>
<td>(c) rubbed their genitals against their body in a sexual way;</td>
</tr>
<tr>
<td>Chinese researchers.</td>
<td></td>
<td></td>
<td>(d) perpetrator touched the child’s genitals with their mouth;</td>
</tr>
<tr>
<td>Chen 2004 CSA Scale</td>
<td></td>
<td></td>
<td>(e) made the respondent touch the perpetrator’s genitals with their mouth;</td>
</tr>
<tr>
<td>without modification,</td>
<td></td>
<td></td>
<td>(f) tried to have intercourse with the respondent;</td>
</tr>
<tr>
<td>and five modified</td>
<td></td>
<td></td>
<td>(g) had intercourse with the respondent;</td>
</tr>
<tr>
<td>Chen 2004 CSA Scale in</td>
<td></td>
<td></td>
<td>(h) tried to have anal intercourse with the respondent;</td>
</tr>
<tr>
<td>their papers.</td>
<td></td>
<td></td>
<td>(i) had anal intercourse with the respondent.</td>
</tr>
<tr>
<td>Li 2012 CSA Scale:</td>
<td>The Li questionnaire asks the participants whether they had experienced any one of the listed eight unwanted sexual activities before the age of 14,</td>
<td>(a) exposed themselves to you</td>
<td>(a) had you touch or fondle their genitals</td>
</tr>
<tr>
<td>Li 2012 CSA Scale is</td>
<td></td>
<td>(b) watched you while you were unclothed</td>
<td>(b) touched or fondled your genitals</td>
</tr>
<tr>
<td>widely used in studies</td>
<td></td>
<td></td>
<td>(c) had their genitals touch you</td>
</tr>
<tr>
<td>related to CSA among</td>
<td></td>
<td></td>
<td>(d) had oral sex with you</td>
</tr>
<tr>
<td>researchers from</td>
<td></td>
<td></td>
<td>(e) had vaginal sexual intercourse with you</td>
</tr>
<tr>
<td>Taipei. Two papers</td>
<td></td>
<td></td>
<td>(f) had anal sexual intercourse with you</td>
</tr>
<tr>
<td>used Li 2012 CSA Scale</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>as their measurements.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Zhao 2006 CSA Scale: The Zhao questionnaire asks the participants whether they had experienced any one of the listed six unwanted sexual activities before the age of 16.

(a) spoke foul language to you without your willingness
(b) deliberately exposed their genitals without your willingness
(c) attempted to have sexual intercourse with you but did not prevail
(d) had sexual intercourse with you

In addition to those three main CSA Scale measurements, eight other research papers measure the prevalence of CSA by using self-developed questions, and those questions are attached in Appendix 1.

The three main CSA scales for collecting information about CSA share similar questions. For example, in the questions of non-physical contact CSA, all three measurements have the question asking whether the offenders have exposed their genitals to the participants or not. The questions related to physical contact CSA have two items in common; asking participants whether their intimate parts are touched or made to touch others’ intimate parts of body; and also whether the offender have intercourse with them. Those behaviors are easily recognized to be decided as CSA behaviors, whereas there are still a lot of behaviors that are hard to be considered as CSA behaviors or not, especially for non-physical contact CSA. For example, one survey instrument regarded the behavior of watching a child when he/she is unclothed as non-physical contact CSA (Li, 2012), and in another survey instrument, researchers regarded speaking foul language to a child as non-physical contact CSA (Zhao & Li, 2006). However, in the other
survey questionnaires those two behaviors are not considered as CSA, because when parents examine the child’s body they may need to watch an unclothed child and peers may speak foul language to each other for fun. Therefore, in Li and Zhao’s CSA Scale, they should make more accurate explanations for those two behaviors, such as watching a child when he/she is unclothed for sexual gratification, or speaking foul language to sexually arouse the child in order to be clear about why these are regarded as as non-physical contact CSA. Moreover, the items included in the survey instrument may also influence the prevalence of CSA results and this will be reported in the discussion part.

Prevalence of CSA in China

Child sexual abuse is not rare in China. Table 2 is a listing of 27 studies by their publication year, including regions of participants and prevalence of CSA for both genders. Table 2 shows that the percentages of female victims range from 0.30% (Leung, Wong, Chen, & Tang, 2008) to 35.23% (Zhao & Li, 2006), and percentages of male victims range from 0.65% (Chan, Yan, Brownridge, Tiwari, & Fong, 2011) to 39.42% (Ye, Tao, Fang, Huang, & Sun, 2006). These frequencies vary a great deal not only from the studies in China, but also from the worldwide rates. Explanations about this great variation will be reported in the discussion part.

Table 2

Prevalence of CSA in 27 Papers

<table>
<thead>
<tr>
<th>Study</th>
<th>Regions</th>
<th>Female victims</th>
<th>Male victims</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cm Chen, Dunne, &amp; Wang (2002)</td>
<td>China</td>
<td>25.48%</td>
<td></td>
</tr>
<tr>
<td>Tang, (2002)</td>
<td>Hong Kong</td>
<td>7.38%</td>
<td>4.28%</td>
</tr>
</tbody>
</table>
Column 1 shows the measurement of the study.

C = Chen 2004 CSA Scale, Cm= Chen 2004 modified CSA Scale, L = Li 2012 CSA Scale,
Z=Zhao 2006 CSA Scale, Zm= Zhao 2006 modified CSA Scale

**Prevalence of CSA between females and males.** Both females and males can be
sexually abused in their childhood (Chen & Chen, 2005). Among those 27 papers, although most
studies showed that females were more likely to experience CSA than males in their childhood,
there were still six studies showed that males were reported to have more CSA cases than
females (Gu, Chi, & Zhang, 2005; Lin et al., 2011; Luo et al., 2008; Su, Tao, & Cao, 2008; Ye et al., 2006; Zhao et al., 2011). However, there are many differences in those 27 papers that may account for this. For example, the research studies include differences in measurements, age cohort, and region selections.

To get more accurate finding about prevalence of CSA between females and males, only the studies that use the same measurements, same age cohort and same region are selected. This resulted in two groups; Table 3 shows Group 1 with four papers using Chen 2004 Scale in China, and Table 4 shows Group 2 with two papers using Li 2012 Scale in Taiwan. In this way the differences caused by the survey questionnaires is controlled, which allows for a clearer analysis of the other possible reasons why the results are so different.

Table 3

**Group 1: Papers Using Chen 2004 Scale**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen, Dunne, &amp; Han, (2004b)</td>
<td>China</td>
<td>Chen 2004 CSA Scale before 16</td>
<td>193 (16.71%, 193/1155)</td>
<td>120 (10.48%, 120/1145)</td>
</tr>
</tbody>
</table>
In Table 3, all the participants were from both urban and rural places in China. When comparing the percentage of female victims and male victims in those four papers, the percentages of female victims are always higher than percentages of male victims, with 20.00% females and 14.32% males in Chen (2004), 16.71% females and 10.48% males in Chen et al. (2004b), 24.8% females and 17.6% males in Chen et al. (2010), and 18.24% females and 10.23% males in Niu et al. (2010). The research studies in Table 4 also all included urban and rural participants. The frequency of sexual abuse in Table 4 are consistent with results from Table 3, showing that females are more likely to be sexually abused than males in Taipei Taiwan, with 6.19% females and 4.29% males in Li et al. (2012), and 6.14% females and 4.16% males in Zhu et al. (2015). Moreover, comparing with the percentages of female victims and male victims in China and Taiwan, it shows a more significant difference between percentage of females and males in China than in Taipei Taiwan. These differences in the age, gender and region of the victims are important factors to take into account when designing a school-based CSA education program. The frequencies of CSA that can be estimated in China emphasize the need and urgency for CSA programs to be offered. The implications for a CSA program are developed further in Part 2.

Table 4

<table>
<thead>
<tr>
<th>Study</th>
<th>Region</th>
<th>Measurement</th>
<th>Female victims</th>
<th>Male victims</th>
</tr>
</thead>
<tbody>
<tr>
<td>Li, Ahmed, &amp; Zabin, Taipei,</td>
<td>Li 2012 CSA</td>
<td>126 (6.19%),</td>
<td>88 (4.29%),</td>
<td></td>
</tr>
</tbody>
</table>
Comparison between physical CSA and non-physical CSA. CSA can be classified into two types, one is physical contact CSA and the other is non-physical contact CSA. Victims often experienced more than one type of CSA behaviors, but it is still meaningful to investigate which type is the more prevalent.

Among those 27 studies, three of them only investigated physical contact CSA (Chan et al., 2011; Leung et al., 2008; Luo et al., 2008). Four did not separate the total number of victims who suffered from physical contact behaviors from the number reporting non-physical contact behaviors (Li, 2008; Li et al., 2012; Niu et al., 2010; Zhao et al., 2006). Therefore, those seven studies were excluded. The remaining 20 studies that could be compared in Table 5 investigated both physical contact behaviors and non-physical contact behaviors in relation to the total number of victims who reported experiencing physical contact behaviors and non-physical contact behaviors.

Table 5

Studies reported both physical contact CSA and non-physical contact CSA

<table>
<thead>
<tr>
<th>Study</th>
<th>Urban or Rural</th>
<th>Location</th>
<th>Female physical CSA</th>
<th>Female non-physical CSA</th>
<th>Male physical CSA</th>
<th>Male non-physical CSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Chen, Dunne, &amp; Wang, (2002)</td>
<td>92.9% Urban; 7.1% Rural</td>
<td>China</td>
<td>97</td>
<td>154</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>#Tang, (2002)</td>
<td>N/A</td>
<td>Hong Kong</td>
<td>67</td>
<td>43</td>
<td>27</td>
<td>17</td>
</tr>
<tr>
<td>Study</td>
<td>Urban/Rural Composition</td>
<td>Country</td>
<td>Cities</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>-------</td>
<td>-------------------------</td>
<td>---------</td>
<td>--------</td>
<td>-----</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td>*Chen, Dunne, &amp; Wang, (2003)</td>
<td>100% Urban</td>
<td>China</td>
<td>N/A</td>
<td>N/A</td>
<td>36</td>
<td>19</td>
</tr>
<tr>
<td>#Chen, (2004)</td>
<td>36.36% Urban; 61.94% Rural</td>
<td>China</td>
<td>18</td>
<td>23</td>
<td>31</td>
<td>38</td>
</tr>
<tr>
<td>* Sun, et al., (2004a); Sun, Li, Duan &amp; Sun, (2004b); Sun, Li, Duan &amp; Sun, (2006a); Sun, Li, Duan &amp; Sun, (2006b); Sun et al., (2008)</td>
<td>Both China (Shandong provinces)</td>
<td>80</td>
<td>75</td>
<td>44</td>
<td>45</td>
<td></td>
</tr>
<tr>
<td>#Chen, Dunne, &amp; Han, (2004a)</td>
<td>25.56% Urban; 66.37% Rural</td>
<td>China</td>
<td>129</td>
<td>175</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>#Chen, Dunne, &amp; Han, (2004b)</td>
<td>58.4% Urban; 41.6% Rural</td>
<td>China (Beijing, Hubei, Henan, Hebei provinces)</td>
<td>103</td>
<td>149</td>
<td>57</td>
<td>101</td>
</tr>
<tr>
<td>#Chen, Dunne, &amp; Han, (2006)</td>
<td>59.0% Urban; 41% Rural</td>
<td>China (Henan province)</td>
<td>49</td>
<td>61</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>#Chen, Ma, Cheng, Chen, &amp; Liang, (2006)</td>
<td>37.69% Urban; 59.28% Rural</td>
<td>China (Hebei province)</td>
<td>31</td>
<td>34</td>
<td>33</td>
<td>29</td>
</tr>
<tr>
<td>* Ye, Tao, Fang, Huang, &amp; Sun, (2006)</td>
<td>Both</td>
<td>China (Anhui Province)</td>
<td>81</td>
<td>404</td>
<td>190</td>
<td>857</td>
</tr>
<tr>
<td>#Su, Tao, &amp; Cao,(2008)</td>
<td>Both</td>
<td>China</td>
<td>56</td>
<td>58</td>
<td>50</td>
<td>196</td>
</tr>
<tr>
<td>#Chen, Han, Lian, &amp; Dunne, (2010)</td>
<td>34.5% Urban; 65.5% Rural</td>
<td>China (Beijing, Hebei, Shanxi, Jiangsu, Shaanxi)</td>
<td>192</td>
<td>272</td>
<td>90</td>
<td>168</td>
</tr>
</tbody>
</table>
CHILD SEXUAL ABUSE IN CHINA

<table>
<thead>
<tr>
<th>Study</th>
<th>Region</th>
<th>Sample Size</th>
<th>Physical Contact CSA</th>
<th>Non-Physical Contact CSA</th>
</tr>
</thead>
<tbody>
<tr>
<td>#Zhao et al (2011)</td>
<td>100% Rural China</td>
<td>31</td>
<td>116</td>
<td>40</td>
</tr>
<tr>
<td># Lin, Li, Fan, &amp; Fang, (2011)</td>
<td>100% Rural China (Hunan province)</td>
<td>30</td>
<td>43</td>
<td>45</td>
</tr>
<tr>
<td>#Zhu, et al (2015)</td>
<td>88.3% Urban; 11.7% Rural Taipei, Taiwan</td>
<td>58</td>
<td>62</td>
<td>58</td>
</tr>
</tbody>
</table>

Notes

i. Most victims had experienced both physical contact CSA and non-physical contact CSA, and studies above had two ways to counted the numbers.

ii. Studies with * counted the number by asking participants’ the most grievous CSA experience.

iii. Studies with # counted the number by asking whether participants had experienced at least one type of physical contact CSA or non-physical contact CSA.

Among those 20 researches, four of them investigated only one gender, and the remaining 16 researches (14 were conducted in China, and one was conducted in Hong Kong, the other one was conducted in Taipei Taiwan) investigated both genders. There are 16 researches in Table 5 comparing the number of physical contact victims and non-physical contact victims, seven researches completed in China show that both female and male children are more likely to experience non-physical contact CSA. Whereas other seven papers done in China show that the number of physical contact CSA victims and the number of non-physical contact CSA victims are nearly equal. However, in Hong Kong and Taiwan, physical contact CSA is more general.

The results from papers that investigate only female students in China are consistent with the findings, showing that more female victims have experienced non-physical contact CSA. Whereas the result from the paper that only investigates male students in urban areas of China shows that physical contact CSA is more general for male children. By comparing the area
factors, it shows that all the participants in this paper are from urban areas in China, and participants in other papers done in China are from both urban and rural areas.

Victims mean age. It is important to know about the mean age of victims when they have experienced their first CSA because the CSA prevention programs need to be focused on the children younger than the victims’ mean age. The content of a CSA program needs to take into account the age at which females and males are at risk and the nature of the type of abuse that they might experience. Such considerations have implications for the scope and sequence of a CSA program and are discussed further in Part 2.

Among those 27 studies, 16 papers have investigated the age when victims have experienced their first CSA. To control the variable in age category, six papers were removed, because in Tang’s paper, he investigated CSA experiences before the age of 14, and in Sun’s five papers they investigated CSA experiences before the age of 18. These are much wider age ranges than most other studies. In addition, the wider age range will influence the average age of victims. Therefore, those six papers were excluded thus leaving ten studies to be analyzed. Among those ten papers, Chen et al. (2006) was excluded because they used Zhao (2006) CSA Scale to get their data meanwhile other nine papers used Chen 2004 CSA scales, therefore, in the end, only nine papers were analyzed in this part. All those nine studies were conducted in China and investigated victims’ CSA experiences before the age of 16. These nine studies were divided into two groups and each group was discussed separately.
In Table 6, there are five papers reported the mean age when victims have experienced their first CSA. It clearly shows that the mean age is around 12 for both genders.

Table 6

*Papers reported mean age of victims when they experience their first CSA*

<table>
<thead>
<tr>
<th>Study</th>
<th>Measurement</th>
<th>Victims Mean Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen, Dunne, &amp; Han, (2004a)</td>
<td>Chen 2004 Scale</td>
<td>Female: 11.49</td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2004b)</td>
<td>Chen 2004 Scale</td>
<td>Female and Male: 11.5</td>
</tr>
<tr>
<td>Gu, Chi, &amp; Zhang, (2005)</td>
<td>Chen 2004 Scale without anal questions</td>
<td>Female: 12.35; Male: 11.91</td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2006)</td>
<td>Chen 2004 Scale</td>
<td>Female: 11.5</td>
</tr>
</tbody>
</table>

In Table 7, there are four papers reported the proportion of victims at certain age, and it shows that nearly half or more than half of the victims for both genders experienced CSA before the age of 11. Results from Table 6 and Table 7 indicate that the children need to start to learn CSA prevention program in their early ages.

Table 7

*Papers reported proportion of victims at certain age*

<table>
<thead>
<tr>
<th>Study</th>
<th>Measurement</th>
<th>Proportion at certain age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen, Dunne,&amp; Wang,(2003)</td>
<td>Chen 2004 Scale without anal questions</td>
<td>49.1% males experienced first CSA before the age of 11</td>
</tr>
<tr>
<td>Chen, (2004)</td>
<td>Chen 2004 Scale</td>
<td>59.4% female 51.7% male experienced first CSA before age of 11</td>
</tr>
<tr>
<td>Li, (2008)</td>
<td>Chen 2004 Scale without question “tried to sexually arouse the respondent”</td>
<td>55.93% females and 85.7% males first experienced CSA before age of 11</td>
</tr>
<tr>
<td>Chen, Han, Lian, &amp; Dunne, (2010)</td>
<td>Chen 2004 Scale</td>
<td>48.6% victims first experienced CSA before age of 11</td>
</tr>
</tbody>
</table>
**Relationships between offenders and victims.** Among those 27 research papers, only 12 investigated the relationships between offenders and victims. Moreover, the number of male victims in Li (2008) and the number of female and male victims in the study of Chan et al. (2011) is too small to report. Another study (Leung et al., 2008) only focused on one specific-relationship; and two other studies (Chen et al., 2006; Tang, 2002) did not report the relationship separated by victims’ gender or relationship, so these five papers were excluded, thus leaving only seven papers for comparison when analyzing the relationship between abusers and victims.

Among those seven papers, six of them were conducted in China and one was conducted in Taipei Taiwan. The relationships between offenders and victims for two genders is reported first only in China, and then in comparison with the report from Taipei Taiwan.

Table 8

**Comparing the Relationships of Offenders and Victims between China and Taiwan**

<table>
<thead>
<tr>
<th>Study</th>
<th>Location</th>
<th>Relationships between victims and offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sun, et al., (2004a); Sun, Li, Duan &amp; Sun, (2004b); Sun, Li, Duan &amp; Sun, (2006a); Sun, Li, Duan &amp; Sun, (2006b); Sun et al., (2008)</td>
<td>China</td>
<td>Female: 52.9% strangers; 47.1% known people. Females tend to be non-physical abused by strangers, and physical abused by known people. Male: 89.9% Known people.</td>
</tr>
<tr>
<td>Niu, Lou, Gao, Zuo, &amp; Shah, (2010)</td>
<td>China</td>
<td>Females: 52.3% strangers; 47.7% known people. Males: 91.67% known people</td>
</tr>
<tr>
<td>Zhu et al., (2015)</td>
<td>Taipei, Taiwan</td>
<td>Female: 44.8% strangers; 55.2% known people. Males: 93.0% known people</td>
</tr>
</tbody>
</table>
Table 8 displays the relationship between offenders and victims in six studies conducted in China and one study conducted in Taiwan. Over 50% of offenders are strangers to female children, and nearly 90% of offenders are people known to male children in China. However, when comparing the relationships between China and Taipei Taiwan, Table 8 also shows that for male children from both China and Taipei Taiwan, the majority of offenders are people known to them, however for female children, only 44.8% of offenders are strangers in Taipei Taiwan compared with more than 50% of offenders are strangers in China.

**Gender of offenders.** There are only seven papers investigate the gender of offenders among those 27 papers. Those seven papers all investigated CSA experiences from both female and male victims. Table 9 summarizes the evidence about the gender of the offenders. Both females and males may sexually abuse children; however, the majority of abusers are male. There is also evidence that offenders’ gender is not always opposite of the victims’, which means male children can also be sexually abused by male abusers and female children can be sexual abused by female abusers.

Table 9

<table>
<thead>
<tr>
<th>Study</th>
<th>Gender of offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tang, (2002)</td>
<td>88% offenders are male; 12% are female</td>
</tr>
<tr>
<td>Sun, et al., (2004a); Sun, Li, Duan &amp; Sun, (2004b); Sun, Li, Duan &amp; Sun, (2006a); Sun, Li, Duan &amp; Sun, (2006b);</td>
<td>Most offenders were male</td>
</tr>
</tbody>
</table>
Discussion

Comparison of the CSA Prevalence in China and Western Countries

CSA is a global phenomenon. The estimated rates of CSA are 19.7% for females and 7.9% for males worldwide (Pereda, Guilera, Forns, & Gómez-Benito, 2009), another paper shares the consistent result, showing that 18% for female participants and 7.6% for male participants reported experiencing CSA in their childhood worldwide (Stoltenborgh et al., 2011). The prevalence rates of CSA in China vary a great deal from the worldwide rates that are reported by Pereda et al. (2009) and Stoltenborgh et al. (2011). Previously Table 2 shows that 7.38% of females and 4.28% of males in Hong Kong and 6.14%–6.19% of females and 4.16%–4.29% of males in Taiwan reported to have suffered from CSA. The prevalence of CSA in Hong Kong and Taiwan is not only significantly lower than the prevalence of CSA in China, but also lower than the prevalence reported in western countries; for example, a 1985 study in Great Britain claims that 8% of males and 12% of females of their participants have experienced CSA before the age of 16 (Baker & Duncan, 1985), whereas a 1997 study conducted in Canada mentions that 4.3% of males and 12.8% of females of the participants report that they have been sexually abused during their childhood (MacMillan et al., 1997). In United States, 26.6% female children and 5.1%

<table>
<thead>
<tr>
<th>Source</th>
<th>Offenders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sun et al., 2008</td>
<td></td>
</tr>
<tr>
<td>Li, 2008</td>
<td>92.4% male; 7.6% female</td>
</tr>
</tbody>
</table>
male children are reported to have been sexually abused before the age of 17 (Finkelhor, Shattuck, Turner, & Hamby, 2014).

To compare the prevalence of CSA between China and western countries, first it needs to figure out the general prevalence of CSA reported in China as the prevalence rates of CSA in China vary greatly as well. These are shown in Figure 1 and Figure 2. Leung and Luo’s studies were removed from the comparison, as items in their questionnaires were much fewer than other studies and only focused on physical contact CSA.

In the 23 studies conducted in China reported in Table 2, three studies only focused on female victims, two studies only focused on male victims. These were removed for the comparison of frequency by gender leaving 18 papers.

Figure 1 shows that in those 18 papers, 17 papers report that more than 10% of male children have experienced CSA in their childhood.
Figure 1. *Number of Articles Reported the Prevalence Range for Males in China*

Figure 2 shows that in those 20 papers, 13 papers report that more than 20% females suffer from CSA in their childhood.

![Bar chart showing the prevalence of CSA among males in China.](image)

Figure 2. *Number of Articles Reported the Prevalence Range for Females in China*

When comparing the highest prevalence of CSA reported in research papers in China with prevalence of CSA in other countries and areas, Figure 3 shows that prevalence of CSA in China is much higher than the prevalence of CSA in Australia, Great Britain, Canada, USA and in Europe area.

The general prevalence of CSA reported in China (more than 10.48% of males and more than 20.00% females reported experiencing CSA) is higher than that in Great Britain, Canada and in Europe area.
Some aspects of the higher prevalence of CSA in China have been explained by Tang (2002) as arising from aspects of Chinese cultural traditions and moral principles which may influence the frequency of child sexual abuse. The first cultural tradition that has been suggested is, “filial piety is the prime guiding principle for socializing children and gives justification for the absolute authority of parents over children” (Ho & Kwok, 1991, p. 599). This principle directs children to always show respect to their parents and obey their parents’ commands without questioning. Rejecting parental authority could result in warning and punishment (Hsu & Tseng, 1972).

The majority of offenders identified in this review against male children and nearly half of the offenders against female children are people known to them, including their parents and...
relative. *Filial piety* may facilitate family members and relations taking advantage of the child as sexual objects for adult sexual gratification and also inhibit children from disclosing CSA cases. This not only applies to the child that is a victim, but also to others who may know or suspect abuse but remain silent out filial piety.

Second, discussion of most aspects of sexuality is avoided in traditional Chinese culture. In addition to that, but direct physical expressions of affection such as touching and hugging are avoided even with children beyond the age of infants. This is not only the case for acquaintances, but also with family members (Tang & Lee, 1999). These taboos make it difficult for parents to talk about topics related to sex with their children and also for children to articulate their sexual abuse experiences to others.

Third, the inhibitions that arise from traditional culture also contribute to nondisclosure of CSA cases may even indirectly facilitate the occurrence of child sexual abuse (Luo, et al, 2008). Although not disclosing CSA cases is common worldwide, more cases may be hidden in China because of the violation of traditional beliefs. Both female and male children in China are likely not to disclose their experiences. For female children, there are several reasons they tend to hide their incidents. First, “Chinese traditional culture emphasizes different sexual propriety for different genders. Virginity and virtue are most important for Chinese women” (Lin et al., 2011, p. 685). It is a social stigma for Chinese women if they lose their virtue before marriage. Such stigma not only would cause social embarrassment, but could also interfere with prospects for marriage and a ‘normal’ adult life. Second, “When facing sexual violence, Chinese victims
tend to believe that women should be held responsible for preventing violence” (Postmus, 2012, p. 78) and victim-blaming explanations are popular in China to “blame women for provoking men to violence” (Tang, Wong & Cheung, 2002, p. 992). Patriarchal values (Postmus, 2012) and victim-blaming explanations (Tang, Wong, & Cheung, 2002) make it even harder for females to disclose their experiences because they do not want to bring shame to their family or be blamed.

For male children, it is not easy for them to disclose their CSA experiences either. Male homosexuality is a pervasive stigma in Hong Kong society (Tang, & Wong, 2001). In China, it has been reported that most of the offenders of boys are males. Therefore, male children are in fear of being identified as having a homosexual orientation (Tang, 2002). Male victims may feel doubly victimized being labeled homosexual (Watkins & Bentovim, 1992). Although homosexuality may be a stigma in many countries, in China, it is a much greater shame and humiliation if their children are labeled as homosexual. Chinese families are under tremendous social pressure to protect the whole family reputation from shame and humiliation. This influences not only the victims but also other family members who know the incidents but are reluctant to report the sexual victimization experiences.

**Reasons for Distinct Variations in Prevalence of CSA in China**

As noted above, prevalence rates of CSA in China vary distinctly, the percentage of female victims ranges from 0.30% to 35.23% and the percentage of male victims ranges from 0.65% to 39.42%. Such a great variation can be explained by differences in data collecting measurements, choices of age categories and investigation regions.
**Different measurements.** Different types of measurements can always lead to differences in calculating prevalence rates (Finkelhor, 1994). For example, compared with other studies, prevalence rates in study of Chan et al. (2011), Luo et al. (2008) and Leung et al. (2008) are extremely low.

Table 11

**The Relationships between Measurements and Frequency**

<table>
<thead>
<tr>
<th>Study</th>
<th>Measurement</th>
<th>Non–physical</th>
<th>physical</th>
<th>Female victims</th>
<th>Male victims</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen, Dunne, &amp; Wang,(2002)</td>
<td>Chen 2004 CSA Scale without anal questions</td>
<td>3</td>
<td>7</td>
<td>25.48%</td>
<td></td>
</tr>
<tr>
<td>Tang, (2002)</td>
<td>Tang measurements</td>
<td>4</td>
<td>6</td>
<td>7.38%</td>
<td>4.28%</td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Wang, (2003)</td>
<td>Chen 2004 CSA Scale without anal questions</td>
<td>3</td>
<td>7</td>
<td>23.01%</td>
<td></td>
</tr>
<tr>
<td>Sun, et al., (2004a); Sun, Li, Duan &amp; Sun, (2004b); Sun, Li, Duan &amp; Sun, (2006a); Sun, Li, Duan &amp; Sun, (2006b); Sun et al., (2008)</td>
<td>Sun measurements 4 for girls; 3 for boys.</td>
<td>8 for girls; 7 for boys.</td>
<td>22.11%</td>
<td>14.70%</td>
<td></td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2004a)</td>
<td>Chen 2004 CSA Scale</td>
<td>3</td>
<td>9</td>
<td>25.56%</td>
<td></td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2004b)</td>
<td>Chen 2004 CSA Scale</td>
<td>3</td>
<td>9</td>
<td>16.71%</td>
<td>10.48%</td>
</tr>
<tr>
<td>Gu, Chi, &amp; Zhang. (2005)</td>
<td>Chen 2004 CSA Scale without anal questions</td>
<td>3</td>
<td>7</td>
<td>18.75%</td>
<td>25.12%</td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2006)</td>
<td>Chen 2004 CSA Scale</td>
<td>3</td>
<td>9</td>
<td>21.94%</td>
<td></td>
</tr>
<tr>
<td>Chen, Ma, Cheng, Chen, &amp; Liang, (2006)</td>
<td>Zhao 2006 CSA Scale without question “the child was forced to touch or stroke other people’s intimate parts of body without your willingness”</td>
<td>2</td>
<td>3</td>
<td>20.34%</td>
<td>17.84%</td>
</tr>
<tr>
<td>Ye, Tao, Fang, Huang, &amp; Sun, (2006)</td>
<td>Ye measurement</td>
<td>4</td>
<td>4</td>
<td>19.52%</td>
<td>39.42%</td>
</tr>
<tr>
<td>Zhao, &amp; Li, (2006)</td>
<td>Zhao 2006 CSA Scale</td>
<td>2</td>
<td>4</td>
<td>35.23%</td>
<td>20.89%</td>
</tr>
</tbody>
</table>
The comparison of the methods of collecting the evidence summarized in Table 11 shows that there are fewer items in their questionnaires than other studies. Those three papers only asked participants about their physical contact experiences. Leung et al. (2008) and Luo et al. (2008) had only two items, and Chan et al. (2011) had four items in their questionnaires. Fewer items in their questionnaires may account for such low prevalence. What’s more, in Leung’s study, he only focused on unwanted touch among a specific relationship: parents and children. These limits on the scope of data that are asked about accounts for the low rates of incidents that are reported. After removing those three papers, the range of prevalence of CSA becomes smaller. The Hong Kong prevalence range of CSA was 7.38% for females and 4.28% for males, and in Taipei Taiwan, the range was between 6.14% to 6.19% for females and between 4.16% to 4.29%
for males, and in China, the range was from 11.73% to 35.23% for females and 5.59% to 39.42%.

**Different age categories.** The choice of age categories can make a big difference in their results. Child sexual abuse cases may happen at any age during the childhood. The wider the age ranges are, the more victims will be found. Therefore, when using the same measurement, prevalence rates of CSA in papers that defined age category before the age 16 are always higher than those papers that defined age category before the age 14.

Table 11 shows that there are six papers that used the Chen 2004 CSA Scale without modifications (12 items before the age of 16) and five papers used a modified Chen 2004 CSA Scale (one asked 12 items before the age of 14 and the rest four asked less than 12 items before the age of 16). The purpose of Table 11 is to examine how the choice of age categories in a study can influence the results. To achieve this goal, seven papers were selected which shared the same 12 items on their questionnaires but used different age categories. From this set, the study of Chen et al (2004b) was excluded as they did not report the age of victims, and also excluded Lin’s result because all participants were from rural places and the age cohort was younger than other papers. Therefore, five papers were selected to analyze. The participants from those five papers were from both urban and rural places. In the remaining papers, percentages of victims (both for females and males) in Niu’s paper were lower than other four studies. In fact, many victims reported that their first CSA experience happened between the age of 14 and 16. In Table
12, it clearly shows that nearly 30% victims reported their first CSA between the age of 14 and 16. This result proves that the choice of age categories in a study could influence the results.

Table 12

*The Number of Victims Who Experienced CSA between the Age of 14 and 16*

<table>
<thead>
<tr>
<th>Study</th>
<th>Urban or Rural</th>
<th>Age cohort</th>
<th>First CSA happens between the age of 14 and 16</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chen, (2004)</td>
<td>36.36% Urban; 61.94% Rural</td>
<td>18~26, average age: 20.53±1.33</td>
<td>CSA before 16 9(28.13%, 9/32) females; 17(29.31%, 17/58) males</td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2004a)</td>
<td>25.56% Urban; 66.37% Rural*</td>
<td>16~29, average age: 17.46±1.37</td>
<td>CSA before 16 80(35.09%, 80/228) females</td>
</tr>
<tr>
<td>Chen, Dunne, &amp; Han, (2006)</td>
<td>59.0% Urban; 41% Rural</td>
<td>16~23, average age: 17.6±1.1</td>
<td>CSA before 16 26 (33.77%, 26/77) females</td>
</tr>
<tr>
<td>Chen, Han, Lian, &amp; Dunne, (2010)</td>
<td>34.5% Urban; 65.5% Rural</td>
<td>17~25, average age: 19.9±1.3</td>
<td>CSA before 16 153 (28.39%, 153/539) victims (female and male)</td>
</tr>
<tr>
<td>Niu, Lou, Gao, Zuo, &amp; Shah, (2010)</td>
<td>Both</td>
<td>18~24, average age: 21.5±0.8</td>
<td>CSA before 14</td>
</tr>
</tbody>
</table>

Notes
i. *: some participants did not mention where they lived in the investigation
ii. Urban: participants lived in cities;

**Different investigation regions.** Except for the difference in measurements and age categories, the regions where the participants come from may also influence the results. China is a country full of diversity. Diversity of China reflects in every aspect of the society, such as economic development, social values and norms, and sexual attitudes. In Table 2 it is shown that the prevalence of CSA in Taiwan and Hong Kong is significantly lower than the prevalence in China. Those results may reflect real differences in the prevalence of CSA in different investigation regions. Although Chinese cultural traditions and moral principles are still in the
dominant position of Chinese societies (Tang, 2002), Hong Kong and Taiwan have been open to foreign businesses and foreign travel for much longer years compared with China. Only since the early 1980s, China has evolved from a closed society to a more open one because of an evolvement from a planned economy to a market economy (Luo et al., 2008). Therefore, Hong Kong and Taiwan may be influenced more by western culture and values compared with China, those effects may weaken Chinese traditional social norms and change people’s sexual attitude, which could encourage CSA victims to disclose their experience thus may indirectly decrease CSA cases. This might account for the difference in the prevalence of CSA in Taiwan and Hong Kong compared to China.

**Conclusion**

Child sexual abuse is not uncommon in Chinese society. Although both female and male children may be sexually abused, females are more likely to become CSA victims than males in China. In China, both females and males are more likely to experience non-physical contact CSA than physical contact CSA, whereas in Hong Kong and Taiwan, physical contact CSA is more general for both genders. Moreover, for male children, the majority of offenders are people known to them; for female children, only nearly half of the abusers are people known to them whereas the rest of the offenders are strangers. Most of the offenders are male. When reported the mean age when victims first experienced CSA, in China, nearly half or more of the victims of both genders experienced first CSA before the age of 11.
Because of some aspects of Chinese cultural traditions, moral principles (e.g., filial piety, sexuality suppression, patriarchal values, victim-blaming explanations) and nondisclosure of CSA cases may encourage the occurrence of child sexual abuse, therefore, the prevalence of CSA in China is higher than the prevalence of CSA worldwide.

Therefore, child sexual abuse in China is not rare, which makes the establishment of CSA prevention programs necessary and urgent. However, it is improbable for us to know the real number of children who have been experiencing sexual abuse in their childhood (Johnson, 2004). Many research studies indicate that it is common for children to delay disclosure for a long time or even never disclose (Paine & Hansen, 2002), both for male children (O'Leary & Barber, 2008; Watkins & Bentovim, 1992) and female children (Postums, 2012). This phenomenon is named “silencing” (O'Leary & Barber, 2008, p. 134).

Although this literature review has analyzed 27 papers related to CSA in China, it is hard to make a definitive conclusion about the prevalence of CSA for females and males in the whole country. Further study should select more schools and students in a randomized way across whole China and use the same measurements to collect data, even though this may not be easy because of the sensitive topic and time-consuming cost.

Moreover, as both male and female children may not disclose the incidents, the findings reported in this project may be biased; however, those findings can still give some clues when creating CSA prevention programs in China.
School-Based Child Sexual Abuse Prevention Program in China

Summary of Findings

The literature review in Part 1 identified a number of significant factors related to child sexual abuse around the world, especially in China. In addition to research documenting the characteristics of CSA, there were also a number of suggestions about how to combat it.

In the literature review, it was found that the prevalence of CSA in China was much higher than prevalence of CSA in Hong Kong and Taipei Taiwan, which made it more urgent and important for children in China to learn how to protect themselves from being sexually abused. Moreover, the victims of CSA in China could be males and females, but females in China were more likely to be sexually abused than males in their childhood. There were two types of CSA behaviors, one is physical contact CSA behavior and the other is non-physical contact CSA behavior. In China, more victims (both males and females) suffered from non-physical contact CSA behavior, whereas in Hong Kong and Taipei Taiwan, physical contact CSA behavior was the main type for both genders. The majority of CSA offenders were the people known to the male children, and nearly half of the offenders were strangers to female children. Although most offenders were male, there were also a small number of female offenders in CSA cases. In China, around half of the victims for both genders experienced first CSA before the age of 11. Those findings give clues and suggestions when designing what to teach in the class under traditional Chinese culture. Therefore, in this part, a CSA prevention program targeting at Chinese preschool-aged children will be reflected and justified.
Background Information about CSA Prevention Programs in the World

There are many strategies that have been proposed to reduce the occurrence of sexual abuse among children and adolescents, such as school-based CSA prevention programs, community-based CSA prevention programs and family-based CSA programs. For example, *Stop It Now* is a well-known community-based program in USA helping to prevent child sexual abuse at the community level (*Stop It Now*, n.d.), and *Families Matter* program is a parent-focused intervention designed to reduce child sexual abuse risks in Africa (Miller, 2014). However, compared with community-based CSA prevention programs and family-based CSA programs, there are more advantages reported for school-based CSA prevention programs.

First, school-based CSA prevention program is the most widely used strategy worldwide. Since 1970s, school-based CSA prevention programs starting from preschool have already been developed and spread in western countries. In the United States, there is a comprehensive set of sexual violence prevention curricula and training programs, respectively a program for students in K–12 developed by the Sex Abuse Treatment Center (SATC) in Hawaii (Baker, et al., 2013), a CSA prevention program named *Talking About Touching* (Seattle Institute for Child Advocacy, Committee for Children, 2001) and a state-wide *Child Assault Prevention Programs* in New Jersey (Finkelhor, 2007). In British Columbia province of Canada, there is a program named *Let’s Talk About Touching* teaching students knowledge related to CSA in Kindergarten and Grade 1(*Health and Career Education K to 7*, 2006), and in Calgary, a program named *Who Do You Tell* for elementary students is used in sexual abuse education (Tutty, 2000).
Second, school-based CSA prevention programs are the most directly accessible strategy for the vulnerable population - the children. Several studies have shown that children have the ability to learn the knowledge and skills related to CSA (Alonso, Wurtele, & Kenny, 2012; Kenny & Wurtele, 2010; Wurtele & Owens, 1997; Zhang et al., 2014). As the children are the age-group which is most vulnerable for sexual abuse, it is feasible to implement the CSA prevention programs in schools.

Third, school-based CSA prevention programs are the most efficient and common strategy to gain children’s knowledge and skills related to CSA. In the study of Davis and Gidycz (2000), they used meta-analysis to evaluate 27 school-based CSA prevention programs and found that children who participated in the programs performed to have a better knowledge compared with the children who did not participate in the programs; in the review of 22 studies by Topping and Barron (2009), they also found that school-based CSA prevention programs could increase students’ knowledge and abuse prevention skills. Moreover, literature showed that in China, pupils’ knowledge and skills related to CSA prevention were increased significantly after having school-based CSA prevention program (Chen, Du, & Zhang, 2013).

Therefore, this implication of this project focuses only on school-based CSA prevention programs. Although school-based CSA prevention programs are not new in western countries, in China, there are no school-based curricula related to CSA prevention education. Moreover, several studies conducted in Chinese society have claimed that Chinese children are lacking the knowledge of sexual abuse and related skills to protect themselves (Chen, 2012; Chen, Du, &
Zhang, 2012; Zhang et al., 2013). As a result, designing a school-based CSA prevention program, which is appropriate to the Chinese cultural context, becomes more important and urgent.

**CSA Prevention Programs in Canada**

As it is hard to find information about curriculum related to CSA in other countries, in this part, two prevention programs used in BC Canada are reviewed, one is *Talking About Touching (TAT): A Personal Safety Curriculum, Grade 1–3* (Seattle Institute for Child Advocacy, Committee for Children, 2001) and the other is *Let’s Talk About Touching (LTAT): A Child Sexual Abuse Prevention Program for Young Children* (Sippel, Swanson, & British Columbia, 2001).

“The *Talking About Touching* program for grade 1–3 focused on teaching children basic skills that will help them keep safe from dangerous or abusive situations” (Seattle Institute for Child Advocacy. Committee for Children, 2001, p. 5). There are three units in each grade: Unit 1 is to teach common safety issues such as walking safety, fire safety and gun safety; Unit 2 is focused on touching safety, including recognizing their private body parts, setting personal boundaries and touching rules; and Unit 3 is to teach the students to stand up for themselves in an assertive way and to ask for help and support when they are in uncomfortable, abusive or dangerous situations. The teaching contents clearly have shown that Unit 2 could help students to learn how to avoid physical contact CSA behaviors and Unit 3 could teach the students skills to protect themselves and to report their experiences.
“Let’s Talk About Touching (LTAT) is an educational program for teaching young children some basic safety concepts and skills that can help protect them from sexual abuse” (Sippel, Swanson, & British Columbia, 2001, p. 1). In this program, young children means preschool-aged children. There are also three units in this program, unlike TAT program starting with a unit teaching common safety issues, LTAT program starts to help students know their body parts and distinguish good touches and bad touches in Unit 1, teaching topics related to private body parts including recognizing their private body parts and how to keep their private body parts clean and healthy in Unit 2. In Unit 3, LTAT program is focused on teaching self-protection skills and report-skills. For the framework of LTAT, this program is also concentrated on teaching young children to avoid physical contact CSA behaviors and skills to report the incidents when CSA happens.

Although the frameworks of TAT and LTAT are different, both prevention programs are aiming at teaching children basic safety knowledge and skills to protect themselves from dangerous or abusive situations. Moreover, those two prevention programs also emphasize that parents play the key role in protecting children from sexual abuse, especially in TAT, it provides a parent education video What Do I say Now? to help parents gain knowledge and skills related to CSA.

Some aspects of those two programs are consistent with CSA in China. For example, in part 1 it is reported that, in China, most victims (both females and males) have experienced their first CSA experiences when they are around 11 years old, which indicates that it is important to
involve primary school students and preschool-aged children in CSA prevention programs, and TAT is a curriculum for students from Grade 1 to 3, and LTAT is designed for preschool and kindergarten age children, so the age level of those two prevention programs is consistent with the nature of CSA in China. Moreover, in TAT and LTAT programs, both of them emphasize that the majority of abusers are people that children have already known or trusted and teach students to say “NO” to unwanted touch or unsafe touch to the people even they are familiar with. This emphasis is consistent with the factor that in China the majority of offenders for males and nearly half of the offenders for females are people known to the children.

However, most aspects are inconsistent. Those two prevention programs cannot be directly used in China as the contents of those two prevention programs are not consistent with most of the characteristics of CSA in China. For example, in TAT and LTAT programs, the main content in teaching is only focused on how to avoid physical contact CSA. However in China, children are more likely to experience non-physical contact CSA than physical contact CSA. Therefore, more teaching content of avoiding non-physical contact CSA should be added in China. Considering the comprehension ability of young children, especially of the preschool-aged children, how to avoid physical contact CSA will be taught first because it is much easier for young children to recognize physical contact CSA behaviors. Moreover, offenders’ characteristics were not mentioned in TAT and LTAT programs, for example, in China, although most offenders tend to sexually abuse the opposite gender, in some cases, CSA cases
happen between people of the same gender, therefore, the possibility of both genders should be emphasized in Chinese CSA prevention programs.

**A Proposal for a School-Based Child Sexual Abuse Prevention Program in China**

Studies have shown that Chinese teachers from preschools had limited knowledge of CSA prevention and only less than 5% of the teachers had ever attended training courses for CSA prevention programs (Zhang, Chen, & Liu, 2015). Therefore, teaching guidebook of CSA prevention program should be designed for Chinese teachers. In this part of the paper, it reflects on how to teach the CSA prevention program in China, including teaching target and teaching contents, and justifies those ideas based on those findings learnt from the literature review part.

**Target: Preschool-aged children (four to six years old).** In China, most victims (both females and males) experienced their first CSA when they are around 11 years old. This finding indicates that it would be too late for middle school students to start to learn CSA prevention programs because some of them may have already be sexually abused before they had the programs. CSA prevention programs should start from preschool and to be continued in primary school, several studies have mentioned that preschool-aged children lack related knowledge about CSA and can benefit from the instruction of CSA prevention program (Alonso, Wurtele, & Kenny, 2012; Kenny & Wurtele, 2010; Wurtele & Owens, 1997). Therefore, it is necessary to start to involve preschool-aged children in CSA prevention programs. Only after learning the knowledge and self-protect skills can the students protect themselves when CSA happening. More so, in British
Columbia Canada, students learn the CSA prevention program in their early age as well, for example, *Let's Talk About Touching* is designed for preschool-aged children.

**Teaching contents for preschool-aged children (four to six years old).** CSA prevention program for preschool-aged children is to help them start to build basic CSA knowledge, self-protection skills and disclosure skills. Considering the students’ age, the term *sexual abuse* will not be mentioned in the class.

As in China, children may suffer from both physical contact CSA and non-physical contact CSA. Therefore, the CSA prevention program will concentrate on teaching how to avoid both physical contact CSA and non-physical contact CSA behaviors. Although non-physical contact CSA behaviors are more common in China, children still need to learn how to avoid physical contact CSA behaviors first, as physical contact CSA behaviors are much easier for children to recognize than non-physical contact CSA behaviors.

As literature review reported above, the examples of physical contact CSA behavior include but not limited to: making the child to touch or fondle offenders’ bodies (genitals/ breasts); touching or fondling the child’s bodies (genitals/ breasts); rubbing offenders’ bodies (genitals/ breasts) against the child’s body; trying to have oral/ vaginal/ anal sexual intercourse with the child; having oral/ vaginal/ anal sexual intercourse with the child; using a penis, finger or other foreign objects to penetrate the orifice of the child body (mouth, vagina, anus). Those examples show that physical contact CSA behaviors are always connected with touching private body parts. Therefore, for preschool-aged children, they should learn to recognize their private
body parts and develop the ownership of their body first, and then they can learn to avoid those physical contact CSA behaviors and protect themselves from potential abusive situations.

What is more, as literature review reported above, examples of non-physical contact CSA behavior include but not limited to: exposing one’s body (genitals) to the child; masturbating in front of the child; trying to sexually arouse the child; making the child watch others’ when they are having sexual intercourse; showing or making the child watch pornographic materials (including books, magazines, images and videos); taking pornographic pictures of the child; asking the child to fondle his or her own sex organs; taking advantage of the child to product pornographic materials; watching the child when the child was unclothed for sexual gratification; speaking foul language to the child or telling erotic jokes to the child for sexual gratification.

In the class, those examples will not be defined as non-physical contact CSA behaviors, because some words in those examples are not appropriate for preschool-aged students to learn (e.g. masturbation, sexual intercourse). Moreover, the choice of language in this project is different from the language used in western CSA prevention program. For example, in LTAT programs, the terms for private body parts are nipples, vulva and bottom for girls and penis, testicles and bottom for boys. However, in this project, the anatomical vocabulary (such as vulva, breasts, penis, buttocks) will not be used to describe the private parts. Instead, the preschool-aged children will learn that the private parts of their body are those parts that are covered by swimming suits. The idea of not using anatomical vocabulary in Chinese class is that those terms are not appropriate for preschool students in China and would not be general accepted. As
literature review reported above, discussion of most aspects of sexuality is avoided in traditional Chinese culture. It is difficult for both teachers and parents to talk about topics related to sex with young children and also for children to learn the CSA knowledge and articulate their sexual abuse experiences. To balance the challenge between traditional Chinese culture and the CSA knowledge acquisition, the choice of language and examples used in the class should be cautious.

Therefore, to teach examples of non-physical contact CSA behaviors, two categories will be used. Category 1 is behaviors connected with private body parts (e.g. showing their private body parts to the child, watching the child’s private body parts for sexual gratification); Category 2 is behaviors connected with pornographic materials (e.g. showing or talking about pornographic materials to the child, using the child to product pornographic materials). As non-physical contact CSA behaviors may be much more difficult for children to recognize than physical contact CSA behaviors, therefore, those two categories will be used to help students to learn how to avoid non-physical contact CSA behaviors.

To achieve the goal of teaching students the knowledge of CSA and self-protection skills, there are seven topics that should be included in this prevention program to teach to preschool-aged children in the class: (a) Recognize your private parts, (b) Touching Rules, (c) Good person and bad person, (d) Three-Steps, (e) Always Ask First Rules, (f) It may make you feel uncomfortable, and (g) Never Keep Secrets Rules. Except topic (c), each topic will be taught in one lesson. There are two lessons when teaching topic (c), therefore, there are eight lessons in
total in this program. Moreover, although this CSA prevention program is written in English, in the class, the language will be Chinese.

(a) Recognize your private parts: The literature shows that several physical contact CSA behaviors are related to sex organs (e.g. asking children to fondle adults’ sex organs; touching the children’s breast or genitals) (Chen, 2004; Tang, 2002). Therefore, to avoid being a victim of CSA cases, recognizing the private body parts becomes important and urgent. Teaching the students to recognize their private body parts is not new, it can also be found in LTAT programs. In this topic, preschool-aged children will be taught to recognize their private parts of their own body and start to develop the ownership awareness of their body. Developing the ownership awareness of their body is the foundation of the next topics. Only after knowing that their bodies belong to themselves will the children understand that they have the right to say no to unwanted body touching.

First, by showing pictures of different human races, the students will learn that everyone has a body and your body belongs to yourself. Second, two puppets (a boy and a girl) dressed in swimming suits will be shown to the students. Preschool-aged children will learn that the private parts of their body are those parts covered by swimming suits. Then, some activities will be used to confirm that the students have the ability to recognize their private body parts. The activities include handing out a picture of a boy and a girl, and let the students mark the kids’ private body parts in the picture, or showing another two puppets dressed in school uniforms and pointing at some parts of the puppets’
body parts and ask the students whether it is a private body parts or not. If the body parts are private, the word “this body part” will be used to avoid using anatomical vocabulary and the question will be “Is the body part private?”. If the body parts are not private, the anatomical vocabulary (e.g. arm, leg, foot) will be used in the question.

After the lesson, students should be able to recognize their private body parts and know that their body belongs to themselves.

(b) Touching Rules: Studies have shown that Chinese preschoolers lack CSA knowledge. For example, more than 30% of the children believed that all big people could touch their private body parts and nearly 35% of the children believed that they could touch a bigger person’s private body parts (Zhang et al., 2013). Therefore, it becomes necessary for preschoolers to learn the Touching Rules. The Touching Rules are: (i) never touch others’ private body parts, and (ii) never let others touch your private body parts unless they are trying to keep you clean and healthy. The idea of Touching Rules is also mentioned in TAT program, but the difference is that in TAT program, it only emphasizes that no one should touch the students’ private body parts except to keep the children clean and healthy and it does not mention that the child should not touch other’s private body parts as well. Therefore, the idea of Touching Rules is developed in this project.

When teaching this topic, parents and doctors/ nurses will be invited to the classroom to make explanations about what kind of private touching should be allowed to the
students (for example, parents may help you to wash your private body parts to keep you
clean, and doctors and nurses may touch your private body parts to make you healthy).

Activities in this class include presentations from doctor and nurse, and story readings.
In the presentation, the doctor and nurse will use a doll to explain that sometimes the
children may feel uncomfortable on their private body parts, and the doctor and nurse
should be allowed to see and touch the private body parts to keep the child clean and
healthy when the parent of the child is present. In the activity of reading stories, teacher
will read a story to the students:

Uncle John visits his niece Amy, and gives her some candies. When they are
alone, Uncle John wants to touch Amy’s private body parts, and Amy remembers
that in the class she has learnt that no one is allowed to touch her private body parts
except to keep her clean and healthy, so Amy says no. At the end of the story, the
question “Does Amy do it right?” “If Uncle John wants Amy to touch his private
body parts, should Amy touch the body parts?” will be asked to the children.

After this lesson, students should be able to tell what the Touching Rules are, and
used the Touching Rules in their daily life.

(c) Good person and bad person: Under this topic, there are two lessons for preschool-aged
children to learn, one is Touching Rules with adults and the other is Touching Rules with
peers. CSA offenders may be strangers or people known to the children (e.g. parents,
neighbors, siblings, teachers, classmates). The literature review has noted that the
majority of offenders for male children and nearly half of the offenders for female children are people known to the victims. Study has shown that preschoolers have more difficulty recognizing the inappropriate private body touch requests made by good people (e.g. someone described as good, nice, kind) compared with bad people, which means that very few children could correctly understand that a good person could be a potential CSA offender (Kenny, & Wurtele, 2010). Those results support the idea of helping preschoolers learn to recognize potential CSA offenders, especially the people known to the children or describe as good people.

Although most researchers did not investigate peer contact CSA in China, it does not mean that a child cannot be a CSA offender. Therefore, it is necessary to emphasize that both adults and peers may break the Touching Rules. The lessons of Touching Rules with adults and Touching Rules with peers will be taught separately in this period.

To teach the Touching Rules with adults, first students need to know that an adult, including strangers, parents, neighbors, teachers, community members and other people known to you, may break the Touching Rules. The adult may be someone that being trusted or described as a good person. Then stories will be read in the class.

Story 1: Jenny is a little girl; she likes her uncle Carlos because Carlos always makes toys for her and plays with her. One day, when Jenny and Uncle Carlos were at home, Carlos said, “Jenny, let’s play a game. I touch your private body parts first and then you touch mine.” Jenny remembered the Touching Rules she learnt in the
class so she said “No. I don’t want to play this game.” Do you think Jenny is correct?

Story 2: You have heard that Jane is a very good lady, and she is very kind and always shares the cookies she made with children. If Jane said, “Could you pull down your pants and let me touch your private body parts?” What should you do?

Would it be OK for Jane to touch your private body parts?

To teach the Touching Rules with peers, first the students should know that their classmates, friends, siblings or children who are older than them may break the Touching Rules. Then stories will be read in the class.

Story 1: Alex and Cindy are good friends, and they always play together. One day, when Alex and Cindy were playing in the park, Alex said, “Cindy, I heard that a girl’s private body parts are different from a boy’s, could I see yours?” If you were Cindy, what should you do? Will you let Alex see your private body parts?

Moreover, although studies have shown that the majority of offenders are male, female may also be the CSA offender, therefore, students should know that the person of the same gender as he or she may also break the Touching Rules.

(d) Three-Steps: Study has shown that “preschool-aged children have a lack of sexual abuse knowledge and related self-protection skills in China, and children need to be educated to be effective in stopping the abusive behavior” (Zhang et al., 2013, p. 629). Therefore, in this unit, the idea of Three-Steps will be taught to help students learn a direct and
effective method to protect themselves from the risk of being sexually abused. When someone breaks the Touching Rules, children should use three steps to protect themselves. Step 1 is say no or other words that mean no (e.g. “Stop doing that”, “I don’t like that”) to those touching, step 2 is to get away from the person immediately and step 3 is to tell an adult about this experience.

Activities in this topic include story reading and scene play. In the activity of reading stories, the story could be:

Alan is Tom’s older cousin. One day, Alan comes to visit. They are making forts and tunnels with blankets in Tom’s room. After finishing the fort, Alan asks Tom to go inside and touches Tom’s private body parts. Tom remembered three steps so he says “No! Stop!” and runs out of his room. This is the end of the story, and the teacher need to ask the students that there is still one more thing Tom needs to do, what is that? After getting responses from the students, the teacher should review the Three-Steps again.

Another activity is scene play. There are several scenarios that the students could practice:

(i) Uncle Joey wants you to touch his private body parts, what should you do?

(ii) In the park, an older child wants to touch your private body parts, what should you do and who do you tell?
(iii) You are a boy, and a male teacher wants to touch your private body parts, what should you do? The purpose of those scenarios is to perform a simulated CSA situation so that students could rehearse to use Three-Steps.

After this class, students should clearly remember how to use Three-Steps to get away from abusive situations.

(e) *Always Ask First Rules*: Offender may use money, snacks, or candies to trick the child to be involved in sexual activities that the child does not fully understand (Hong Kong Social Welfare Department, 2007). Therefore, to avoid this abusive situation, the Always Ask First Rules should be taught to the students. Always Ask First Rules require the students that they need to always ask their parents or the person in charge first when somebody wants to give them something, asks them to do something or wants to take them to some places. Remembering the Always Ask First Rules can not only help the young children avoid being involved in a sexual activity which they do not fully comprehend, but also help them keep away from abusive situations.

The activities in this topic include showing posters and scene play. There are three posters can be shown in the class and those three posters can help the children to remember the Always Ask First Rules.

Poster 1 shows that a friend of Amy’s mother wants to give Amy a doll, Amy says, “Thanks you, but I have to ask my mother first”.
Poster 2 shows that a brother of Tom’s friend offers to take Tom to the beach, and Tom says, “I need to ask my parent first.”

Poster 3 shows that neighbor Joey wants Jenny to help him rake his yard and gives her some money as return, and Jenny says “I have to ask my parent first”.

In the scene play game, there are two scenarios that the students could practice:

(i) A person you known (e.g. your neighbor, your relatives, your babysitter) offers to give you some gifts and asks you to do something for him/her or go to somewhere together. What should you do?

(ii) A stranger gives you some money and wants you to touch his/her private body parts as exchange, what should you do? The purpose of those scenarios is to help students to remember the Always Ask First Rules.

After this class, students should clearly remember the Always Ask First Rules and be able to use the rules in their daily life.

(f)  *It may make you feel uncomfortable:* In this topic, students will learn that they may feel uncomfortable even they are not touched by others, which indicates that students will start to recognize non-physical contact CSA behaviors in this unit. As literature review mentioned that in China, more victims (both males and females) suffered from non-physical contact CSA behavior. Therefore, learning how to avoid non-physical contact CSA behavior becomes urgent. Including non-physical contact CSA behavior in
CSA prevention programs is a new idea, neither TAT nor LTAT programs has include non-physical contact CSA in their teaching content.

When teaching the behavior in category 1, first the students need to know that they should never let others see their private body parts unless they are trying to keep your clean and healthy. Second students need to know that they should never see others’ private body parts. Students may see some males (a stranger or a known person) showing their private body parts on purpose or as a joke, especially for female children, because male strangers prefer to show their private body parts to female students in public (Chen, 2004). And when you find that someone wants to show their private body parts to you, you should leave the place first and tell an adult about your experience.

There are two scenarios that the students could practice to emphasize this knowledge:

(i) Pretend that you are a girl, on your way home, suddenly a man came out and showed his private body parts to you, what should you do?

(ii) Anna and her cousin Tim were alone at home, and Tim showed his private body parts to Anna as a joke, what should Anna do?

Non-physical contact CSA behavior in category 2 are those behaviors connected with pornographic materials. For example, in some CSA cases, offenders may show pornographic materials to the child or take advantage of the child to product pornographic materials like taking pornographic pictures of the child or videotaping when the child was taking a shower. When teaching behavior in category 2, instead of
using the term *pornographic materials* in the classroom, students will learn that some materials, including books, videos, posters, and magazines, may make them feel uncomfortable. One of the characteristics of those materials is that you can see people’s private body parts in those materials. Students should also know that when someone wants to show you those kinds of materials you should use Three-Steps to protect yourself (Step 1, say no; Step 2, get away from the person; Step 3, keep telling an adult until you find someone who are willing to help). When someone wants you to do something for them, you should always remember the Always Ask First Rules.

There are several scenarios that the students could practice:

(i) You and your friend Jack (who is older than you) were playing in the park, and Jack whispered, “Come here and I will show you something special.” Then, Jack gave a book to you. You see a naked model on the surface of the book, what should you do?

(ii) Tom is your father’s friend, and he is a photographer. You like Tom taking photos of you. One day, Tom came to visit and said, “[Child’s Name], could you do me a favor? I want to enter a photo competition and I need a model. This is a toy for you and could I take photos of you?” What should you do? The students are supposed to answer “I need to ask my father/mother first.”

(iii) The child got his/her father’s permission to accept the toy and let Tom take photo of him/her. During photographing, Tom said, “[Child’s Name], take off your
clothes and I need to take some photos of your body.” What should you do? The students are supposed to use Three-Steps to avoid this potential abusive situation and tell his/her father what happened.

By practicing those scenarios, students will learn how to avoid non-physical contact CSA cases.

**Never Keep Secrets Rules**: Study has shown that only a small number of preschool-aged students know that children should tell someone if the perpetrator tells them to keep it a secret (Zhang et al., 2013) and nondisclosure of CSA case may indirectly facilitate the occurrence of child sexual abuse (Luo, et al, 2008). As the potential offenders recognize a child who has the knowledge of disclosing abuse cases as a less likely target (Elliott, Browne, & Kilcoyne, 1995), teaching preschool-aged children the knowledge and skills to report their CSA experience becomes more important.

There are several reasons for Chinese children to hide their CSA experiences, for example, victim-blaming explanations are popular in China to “blame women for provoking men to violence” (Tang, Wong & Cheung, 2002, p. 992), and male children are in fear of being identified as having homosexual orientation if they are sexually abused by males (Tang, 2002). Therefore, when teaching this unit, first the students should know that it is not their fault and they will not be blamed if they cannot stop the abusive behaviors. Second, the students should know that they should never keep secrets
about any kind of uncomfortable physical contact behaviors or non-physical contact behaviors.

When teaching Never Keep Secrets Rules, a story will be read to the children. The story is:

“One day, Sam and Jesse were swinging at the park. An older boy came over to them. He asked if they wanted to play a secret touching game. He wanted to touch their private body parts. He said, “It will be just our secret.” Jesse felt so scared he didn’t say a word. Sam remembered what her mom had said. “No,” said Sam in a little voice. Then in a louder voice she said, “No! We don’t want to play that game with you!” The big boy left. Jesse was still unhappy. “Let’s not tell anyone,” he said to Sam. The two walked quietly to Sam’s mom sitting nearby. “Why do you look so sad?” she asked. Sam looked at Jesse and then at her mom. Then she told her what had happened at the swings. Sam’s mom bent down and hugged them both. She was very happy that Sam had told her. “What happened was not your fault,” she told them. “Always tell someone if an older person scares you or tires to trick you. I’m glad you told me, Sam.” Jesse and Sam felt much better. Soon they were back on the swings while Sam’s mom pushed first one, then the other” (Anderson, 1996, pp. 5–9).

Another activity is to play a film. Students who have already learnt this CSA prevention program and their parents will be invited to make this film, so that not only
the children can have a review of what they have learnt and but also the parents can be involved in this CSA prevention program.

In the film, a boy was touched his private body parts by a man, and he was threatened not to tell this experience to others. The boy was so scared. He was afraid that if he told his experience to others, he would be revenged or being blamed or being labeled. To his surprise, when the boy told his father about his experience, his father supported him instead of blaming and the man got his just deserts. The boy was thankful that he disclosed his experience and got help from others.

Involving parents in the CSA prevention program is important. As literature review reported, in China, parents may help the children to hide their CSA experiences for several reasons. First, being a CSA victim may bring a shame to the whole family, as the victim-blaming explanations are common in Chinese culture. Second, it is a social stigma for Chinese women to lose their virginity before marriage. Third, if the offender is the same gender, the child may be labeled as homosexual. Therefore, parents may prevent the child to disclose their experience so that they can protect the reputation of the child and of the whole family. By inviting the parents to the class, teacher could tell the parents that non-disclosure is not protecting your children, instead, sexually abuse may continue and other children may be sexually abused as well.

After learning this topic, students and parents should know that the only way to protect the children is to disclose the CSA cases when it happens.
After learning those eight lessons, preschool-aged children should have the following capabilities: (a) recognize their private body parts, (b) never touch others’ private body parts and never let others’ touch their private body parts unless they are trying to keep you clean and healthy, (c) know that anyone (including adults, peers, the person who is the same gender as you) may break the Touching Rules or showing uncomfortable materials to you, (d) use the Three-Steps and Always Ask First Rules to protect you from any abusive situations; (e) it is not child’s fault if someone breaks the Touching Rules or shows uncomfortable materials to you and the child will not be blamed if they cannot stop the abusive behaviors.

By using those basic knowledge and skills, the students will be able to protect themselves from being sexually abused and report their experiences promptly.

Assessment for Preschool-aged Children (four to six years old)

At the beginning of each class, the teacher should have a review of the previous lesson by handing out work sheets or asking questions (e.g. Who can tell me what the touching rules are? How many steps should you do if someone breaks the Touching Rules?) to assess whether the teaching has been successful, and the teachers will read the questions and explain the phrases on the work sheet for the preschool-aged children.

Work Sheet 1
Circle the private body parts of the kids.
Work Sheet 2

There is a list of different touching, could you put it in two groups? Write more touching in each group if you can.

Touching: pulling hair, hugging, hitting, scratching, pats on the back, an arm around the shoulder, punching, a shot from the doctor, high-five, pinching, biting, holding hands, kicking, touching your private body parts.

Group 1: Good touching:

Group 2: Bad touching:

Conclusion

Sexual abuse could cause negative physical and psychological consequences to children even for a long time. There are many strategies can be used to prevent the occurrence of child sexual abuse. School-based CSA prevention program is the most efficient strategy to protect children. The CSA prevention program, which is designed above, is only the framework, and
there is still a lot of work to do such as compiling the textbooks, designing posters and shooting the films.

By doing this project, the need to pay more attention to this field and reduce the prevalence of CSA in China is emphasized.
References


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Appendix 1

Measurements of Tang’s study (Tang, C. S. K. 2002, p. 28)

In Tang’s study, participants were asked whether they had experienced any one of 12 types CSA behaviors (including non-physical contact CSA and physical contact CSA) before the age of 17.

Non-physical contact child sexual abuse includes four behaviors:

(a) Engaging in sexual intercourse in front of children
(b) Taking pornographic pictures of children
(c) Masturbating in front of children
(d) Asking children to fondle children’s own sex organs

Physical contact child sexual abuse includes six behaviors:

(a) Asking children to fondle adults’ sex organs
(b) Asking children to kiss adults’ sex organs
(c) Fondling children’s breasts and/or sex organs
(d) Asking children to swallow adults’ semen
(e) Penetrating children’s vagina/anus with foreign objects
(f) Having sexual intercourse with children

Measurements of Sun’s study (Sun, et al, 2008, p. 291)
In Sun’s study, although both female and male were asked about their CSA experience before the age of 18, the questions are different.

Questions for female participants

Non-physical contact CSA including four behaviors:

(a) The sexual invader exposed his genitals in front of you

(b) The sexual invader played his genitals in front of you

(c) The sexual invader peeped your breast or genitals

(d) The sexual invader made you watch pornographic book or images

Physical contact CSA including eight behaviors:

(a) The sexual invader touched or stroked your breast or genitals

(b) The sexual invader forced you to touch his genitals

(c) The sexual invader intentionally rubbed his genitals with your body

(d) The sexual invader touched your genitals with his mouth

(e) The sexual invader forced you to touch his genitals with your mouth

(f) The sexual invader placed foreign matter in your vagina

(g) The sexual invader attempted genital sexual intercourse or anal sexual intercourse

(h) The sexual invader forced you for genital sexual intercourse or anal sexual intercourse

Questions for male participants

Non-physical contact CSA including three behaviors:
(a) The sexual invader played his genitals in front of you

(b) The sexual invader made you watch pornographic book or images

(c) The sexual invader forced you to watch others' sexual intercourse

Physical contact CSA including seven behaviors:

(a) The sexual invader touched your genitals

(b) The sexual invader forced you to touch his genitals

(c) The sexual invader intentionally rubbed his genitals with your body

(d) The sexual invader touched your genitals with his mouth

(e) The sexual invader forced you to touch his genitals with your mouth

(f) The sexual invader attempted genital or anal sexual intercourse

(g) The sexual invader forced you for genital or anal sexual intercourse

Measurements of Ye’s study (Ye, et al, 2006)

In Ye’s study, they measured the prevalence of CSA by asking participants whether they had experienced any one of eight types of CSA (including four types of physical contact CSA and four types of during their primary school time. However, in Ye’s paper, they did not list those eight types of CSA behaviors.

Measurements of Su’s study (Su, Tao, & Cao, 2008)
In Su’s study, they measured the prevalence of CSA by asking participants whether they had experienced any one of eight types of CSA (including four types of physical contact CSA and four types of during their primary school time. However, in Su’s paper, they did not list those eight types of CSA behaviors.

Measurements of Leung’s study (Leung, et al, 2008)

In Leung’s study, they focused on CSA between one specific relationship: parents and children. Leung got their data by asking participants two items of parental sexual abuse experience in the previous six months. Those two items are both physical contact CSA:

(a) Parents fondle the child’s breasts or genital or sex organs

(b) parents ask the child to fondle their genital or sex organs

Measurements of Luo’s study (Luo, Parish, & Laumann, 2008)

In Luo’s study, they only focused on physical contact CSA before the age of 14 among their participants. Physical contact CSA includes two types:

(a) Had vaginal intercourse with the child (sleeping with someone or make love)

(b) Caressed and other ways of stimulated the child’s genitals/ breasts.

Measurements of Chan’s study (Chan, et al, 2011)
In Chan’s study, they only focused on participant’s physical contact CSA experiences before the age of 18.

Physical contact CSA includes four types:

(a) the child was forced to touch someone in a sexual way
(b) offenders touched the child in a sexual way
(c) offenders had anal sex with the child
(d) offenders had oral sex with the child

Measurements of Zhao’s study (Zhao, et al, 2011, p. 206)

In Zhao’s study, participants were asked whether they had experienced any one of ten types CSA behaviors (including non-physical contact and physical contact) before the age of 16.

Non-physical contact CSA includes five types:

(a) Told erotic jokes to the child
(b) Tried to sexually arouse the child
(c) Invited child to watch erotic DVD or magazine/book
(d) Exposed genitals to the child
(e) Masturbated in front of the child

Physical contact CSA includes five types:

(a) Forcibly kissed or hugged the child
(b) Made child touch adult’s genitals
(c) Touched or fondled child’s breast or genitals

(d) Tried to have intercourse with child

(e) Had intercourse with child