



Health Promotion Strategies in Preventing and Handling Sexual Violence against Children : a Literature Review

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Abstract

Sexual violence against children (CSA) is a major public health issue with long-term physical, psychological, and social consequences. This study reviewed health promotion strategies effective in preventing and addressing CSA. A systematic literature review was conducted across four databases (PubMed, Scopus, Google Scholar, and SINTA) for articles published between 2020–2025. From 50 records identified, 17 met inclusion criteria after PRISMA-guided screening. Results showed that school-based sexual education reduced CSA risk by 23%, underscoring the importance of integrating comprehensive sexual literacy into formal curricula. Parenting education improved parents' ability to detect early warning signs and report cases promptly. Community-based interventions, safe houses, and social media campaigns helped reduce stigma and strengthen recovery support systems. Psychosocial approaches such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) and mindfulness were effective in alleviating PTSD, depression, and anxiety in victims. However, challenges remain, including underreporting, social stigma, and limited capacity among health workers. In conclusion, CSA prevention requires multisectoral collaboration involving families, schools, healthcare services, and communities. Policy implications emphasize strengthening sex education programs, institutionalizing parenting education, expanding digital literacy campaigns, and improving healthcare worker training on CSA. These integrated strategies are essential to building sustainable child protection systems and ensuring safer environments for children.

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Introduction

The case of sexual assault against children is one of the public health issues that has long-term effects on the quality of life of the victims. According to a WHO report (2020), 1 in 5 women and 1 in 13 men experience sexual violence before they reach the age of 18. This indicates that child sexual assault (Child Sexual Abuse / CSA) is a global issue with a significant incidence rate. A recent systematic study and meta-analysis affirm that sexual assault against children significantly contributes to the mental disorders faced by adolescents into adulthood, including depression, PTSD, and an increased likelihood of deviant behavior (Piolanti et al., 2025).

In the homeland, the number of cases is also quite concerning. Information from the Indonesian Child Protection Commission (KPAI) in 2022 recorded 2,162 incidents of violence against children, of which 45% were sexual violence (News, 2023). Usually, the perpetrators come from people close to the child, such as family members, friends, or someone they already know. This situation indicates a significant risk faced by children in an environment that is supposed to be a safe place for them. The COVID-19 pandemic has also worsened the situation of sexual violence against children. UNICEF (2021) noted that physical distancing policies kept children at home more, but this actually increased the likelihood of violence because the perpetrators are often family members. Cases of online sexual violence have also seen a significant increase, especially through digital media, as revealed in the study by Zhang

and Liu (2023). This indicates that technological advancements can create new opportunities for sexual violence against children.

The impact of sexual violence against children is very diverse and complex. Psychologically, victims usually experience feelings of anxiety, depression, post-traumatic stress disorder (PTSD), decreased self-esteem, and tend to withdraw from social environments (Alves et al., 2024). In terms of academics, research conducted by McMillan and Torres (2021) shows that victims of child sexual violence experience a significant decline in school performance. Additionally, physical impacts can include reproductive health issues and psychosomatic health problems (Rumble et al., 2020). These effects can persist into adolescence and even into adulthood.

Unfortunately, the issue of underreporting remains a significant challenge in handling CSA cases. Many individuals who are victims, along with their families, choose not to speak out due to social stigma, feelings of shame, or fear of negative judgment. The lack of capabilities among healthcare workers and the limited specialized training regarding CSA handling further exacerbate the situation (Kurniawan, 2024). As a result, many cases are not effectively addressed, leading to victims potentially experiencing repeated trauma and slow recovery.

In the field of public health, health promotion approaches are crucial in preventing and addressing CSA. A meta-analysis study conducted by Anderson and White (2024) indicates that comprehensive sexual education programs in schools can reduce the risk of CSA by up to 23%. Additionally, increasing sexual literacy for parents through parenting education appears to be effective in enhancing their ability to quickly detect and encourage more timely reporting of cases (Nurhayati, 2025). Campaigns conducted at the community level and social support, such as safe houses and healthcare workers, have also been proven to accelerate the recovery process for victims (Alvarez, 2024).

Thus, this research is crucial to summarize various effective health promotion tactics that have been proven to prevent and address cases of sexual violence against children. The implementation of sex education in schools, the development of community-based programs for parents, the enhancement of healthcare workers' skills, and strengthening community support are comprehensive approaches that must be undertaken. Only through collaboration between sectors involving families, schools, health services, and support from public policies can a safe and healthy environment for children be realized in Indonesia and around the world.

Methods

This study employed a systematic literature review approach to examine health promotion strategies in preventing and addressing sexual violence against children aged 0–18 years. 50 Articles were searched through PubMed, Scopus, ScienceDirect, SINTA, and Google Scholar using the keywords: "*child sexual abuse*," "*health promotion*," "*sexual education*," "*CSA prevention*," and "*community-based intervention*." The inclusion criteria included articles published between 2020 and 2025, focused on children aged 0–18 years, and discussed school- or community-based health promotion or interventions. Data analysis using PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses), the analysis focuses on the presence of sexual education, parenting, digital campaigns, community support, and psychological interventions. Identified barriers include social stigma, underreporting, and limited healthcare capacity, resulting in 17 eligible articles.

Table 2. Systematic Review

Selection Stage	Number of Articles	Reason for Exemption
Identification	50 records identified through database searching (PubMed, Scopus, Google Scholar, SINTA)	-
Screening (Title & Abstract)	50 records screened	Articles excluded because they: (a) did not focus on child sexual violence, (b) were outside the age range (0–18 years), or (c) did not address health promotion strategies
Eligibility (Full-text assessment)	17 full-text articles assessed for eligibility	No articles excluded at this stage
Included	17 studies included in the final systematic review	All studies met the inclusion criteria

A total of 50 records were identified from four databases: PubMed, Scopus, Google Scholar, and SINTA. After the screening process based on titles and abstracts, 33 records were excluded due to irrelevance, such as studies focusing on general violence, studies not limited to children aged 0–18 years, or those that did not discuss health promotion interventions.

The remaining 17 full-text articles were assessed for eligibility, and all of them fulfilled the inclusion criteria. Therefore, 17 studies were included in the final systematic review. This flow process follows the PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) guidelines, ensuring transparency, reproducibility, and methodological rigor in the article selection process.

Results

Table 2. Systematic Review

No.	Researcher Name	Research Title (Year)	Method	Results
1	Johnson et al.	Child Sexual Abuse and Psychological Outcomes in Adolescence (2020)	Longitudinal, Quantitative	TF-CBT is effective in reducing PTSD symptoms. Family education is needed to encourage participation in therapy.
2	Lestari, A.	The Impact of Sexual Violence against Children in the Family Environment (2021)	Qualitative, Case Study	Family education is crucial for emotional recovery. Promotion through public health centers is needed.
3	McMillan & Torres	CSA and Academic Performance: A Longitudinal Study (2021)	Longitudinal, Quantitative	Significant academic decline. School-based interventions through a sex education curriculum are recommended.
4	Ningsih, R	Psychosocial Interventions for Victims in Indonesia (2024)	Qualitative, Interview	Group therapy is effective. Media campaigns about peer support are crucial.
5	Fernandez et al.	Trauma and Resilience in CSA Survivors (2022)	Mixed-Method	Mindfulness and TF-CBT are effective. Promotion of children's mental health is still lacking.
6	Halidasari	A Case Study of Handling by P2TP2A (2023)	Qualitative, Observation	The need for intersectoral promotion (public health centers, schools, P2TP2A) is high. The capacity of support staff is still limited.
7	Zhang, Y. & Liu, C.	Online Child Abuse During COVID-19 Lockdown (2023)	Online Survey	A surge in online cases. Digital education and online campaigns need to be intensified.
8	Rini	Long-Term Impacts of Sexual Violence (2023)	Longitudinal, Qualitative	Without ongoing service promotion, children's recovery stagnates.
9	Okafor, A. et al.	CSA in Sub-Saharan Africa: Trends and Prevention (2023)	Systematic Review	Cultural stigma hinders promotion. A culturally sensitive, community-based promotional approach is needed.
10	Dewi, N.	Legal Protection for Child Victims (2023)	Normative-Empirical	Legal education for the community needs to be increased as part of promoting child protection.
11	Anderson, K. & White, L.	School-Based CSA Prevention Programs: A Meta-Analysis (2024)	Meta-Analysis	Comprehensive sexual education in schools reduces the risk of CSA by 23%. School programs are highly effective.
12	Sulastri, R.	Longitudinal Study of Post-Trauma in Female Victims (2024)	Longitudinal, Qualitative	TF-CBT is effective. Promotional support from teachers and health workers accelerates recovery.
13	Alvarez, P.	Community-Based Support in Latin America (2024)	Qualitative, Observation	Community support and safe housing are key to recovery. The role of local cadres/volunteers needs to be promoted.
14	Kurniawan,	The Involvement of Health Workers in Handling CSA (2024)	Descriptive Survey	Healthcare worker literacy is low. Promoting CSA training for healthcare workers is urgent.
15	Ramadhani, S	Preventing Cases of Sexual Violence Against	Qualitative Communication	- Open communication is key to prevention. Family-based parenting

No.	Researcher Name	Research Title (Year)	Method	Results
		Children Through Studies Communication (2021)		education is essential. Promotion should include strengthening the role of mothers in sexuality education.
16	Nurhayati, L	The Role of Parents in Early Detection of Sexual Violence (2025)	Quantitative Survey	Parenting promotion is not yet widespread. Education through integrated health posts, social media, and schools is urgently needed.
17	Singh, M. & Rahman, H	Gender Difference in CSA Impact among South Asian Children (2025)	Quantitative, Comparative	Girls are more prone to PTSD; gender-sensitive health promotion needs to be designed for age-based prevention.

A review of 17 studies shows that comprehensive sexual education in schools is the most effective method for preventing sexual violence against children. The implementation of a curriculum focused on sexual literacy has been proven to strengthen children's understanding of their rights over their bodies and how to protect themselves. In fact, a comprehensive analysis reports that this program can reduce the likelihood of Child Sexual Abuse (CSA) by up to 23% within one year (Anderson and White, 2024; Nakamura et al., 2024 in Hasmawati, 2025). These results emphasize the importance of incorporating sex education into the formal education system as a primary preventative measure.

In addition, education about parenting also plays a crucial role in identifying and preventing CSA. Many parents are unable to recognize early signs of sexual violence, thus intervention efforts involving the family are necessary. Educational programs conducted at community health centers, integrated health posts, or through digital modules have proven to enhance parents' skills in early detection and encourage reporting of cases (Nurhayati, 2025; Ramadhani, 2021). With increased understanding of sexual literacy among parents, the child protection system within the family context becomes stronger.

Community-based and digital interventions also have a significant impact. Social support from health cadres, the existence of safe houses, and social media-based campaigns have been shown to accelerate the recovery of victims while reducing stigma barriers in reporting (Alvarez, 2024). During the COVID-19 pandemic, online CSA cases sharply increased, making digital campaigns and media literacy an urgent need for prevention (Zhang & Liu, 2023). This highlights the importance of adapting health promotion strategies to technological developments and social contexts.

From the handling perspective, evidence-based psychosocial interventions such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), mindfulness, and family counseling are effective in reducing PTSD, depression, and anxiety symptoms in child victims of CSA (Johnson et al., 2020; Fernandez et al., 2022; Sulastri, 2024). However, barriers such as low reporting rates, social stigma, and limitations in healthcare capacity remain significant challenges (Kurniawan, 2024; Halidasari, 2023). Gender factors also influence, with girls being more vulnerable to experiencing PTSD, so interventions need to be sensitively adjusted to age and gender (Singh & Rahman, 2025). Therefore, the success of health promotion strategies requires a multisectoral approach involving families, schools, communities, and public policy support (Hasmawati, 2025).

Discussion

A review of 17 articles shows that health promotion strategies play a crucial role in preventing and addressing sexual violence against children. Comprehensive sexual education in schools has proven effective in enhancing children's understanding of body rights and self-protection. In fact, meta-analysis studies indicate that the implementation of this curriculum can reduce the risk of Child Sexual Abuse (CSA) by about 23% over the course of one year (Anderson & White, 2024; Nakamura et al., 2024 in Hasmawati, 2025). This emphasizes the importance of integrating sex education into the formal education system as a primary prevention strategy.

In addition, parental sexual literacy through parenting programs is also an important aspect. Many parents are still unable to recognize the early signs of sexual violence in children, so family-based education through counseling, parenting classes, and digital modules can enhance early detection skills and expedite reporting (Nurhayati, 2025; Ramadhani, 2021). With the increased capacity of parents, the child protection system at the family level can operate more optimally.

Community-based interventions and digital campaigns also have a significant impact. The support of health cadres, the existence of safe houses, and campaigns through social media have proven to strengthen local protection systems while accelerating the recovery process for victims (Alvarez, 2024).

During the COVID-19 pandemic, online sexual violence cases increased significantly, making digital literacy and online campaigns important strategies in prevention efforts (Zhang & Liu, 2023).

From the recovery perspective, psychosocial interventions such as Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), mindfulness, and family counseling have been shown to be effective in reducing PTSD symptoms, anxiety, and depression in child victims (Johnson et al., 2020; Fernandez et al., 2022; Sulastri, 2024). However, challenges still arise in the form of low case reporting, social stigma, and limited healthcare workforce capacity (Kurniawan, 2024; Halidasari, 2023). Gender factors also play a role, where girls are more vulnerable to experiencing post-incident psychological disorders compared to boys (Singh & Rahman, 2025). Therefore, effective health promotion strategies require a multisectoral approach that is adaptive to cultural contexts and gender-sensitive, supported by sustainable public policies (Hasmawati, 2025).

Conclusion

Sexual violence against children is a public health issue that has serious impacts on the physical, psychological, and social aspects of victims, thus requiring a comprehensive health promotion strategy. Comprehensive sexual education in schools has proven effective in reducing risks by up to 23%, while increasing parental sexual literacy through parenting education is crucial for early detection and reporting of cases. Community support in the form of health cadres, safe houses, and digital campaigns plays a significant role in prevention as well as in reducing stigma. From a handling perspective, evidence-based psychosocial interventions such as TF-CBT, mindfulness, and family therapy need to be strengthened with trained health personnel. To be more optimal, this strategy should be implemented multisectorally involving families, schools, health services, law enforcement, and public policies that are gender-sensitive and adaptive to the cultural context.

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