#### G Model CHIABU-3310; No. of Pages 14

#### ARTICLE IN PRESS

Child Abuse & Neglect xxx (2017) xxx-xxx

FISEVIER

Contents lists available at ScienceDirect

#### Child Abuse & Neglect



Research article

## Reports of child sexual abuse of boys and girls: Longitudinal trends over a 20-year period in Victoria, Australia

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#### ARTICLE INFO

## Article history: Received 26 September 2016 Received in revised form 30 January 2017 Accepted 31 January 2017 Available online xxx

Keywords: Child sexual abuse Boys Girls Reports and Outcomes Longitudinal analysis

#### ABSTRACT

Although prevalence studies show girls are more frequently sexually abused than boys, a significant proportion of boys also experience child sexual abuse (CSA). The challenges for public policy are amplified for boys due to less developed public and professional sensitisation to boys' experiences, conceptions of masculinity, and less research on boys including into reporting trends and outcomes. We conducted a 20-year longitudinal time-trend analysis of government data to identify reporting trends and report outcomes for CSA in Victoria, Australia from 1993 to 2012. We stratified by child gender and reporter status. Results indicate a new sensitisation to CSA, especially for boys, although this trend was not stable. Marked change occurred in the last five years, likely influenced by major social and political events. Comparison over time revealed that from 1993 to 2012, the rate of reporting of boys increased 2.6-fold whereas there was a 1.5-fold increase for girls. Comparing genders, with regards to rate of reporting, in 1993, the sex ratio of girls to boys was 2:1, while by 2012 this ratio changed to 1.14:1. Reports by police and other mandated reporters accounted for the majority of the increase in reports over the 20-year period, suggesting unequal sensitisation. Positive report outcomes (i.e. substantiations, findings of harm, and referral to services) increased twelve-fold for boys, and nearly five-fold for girls, indicating the increased levels of reports were based in actual clinical need. Most of this increase occurred from 2009 to 2012, influenced by a compound of social, political and agency-related factors.

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#### 1. Introduction

Meta-analyses of prevalence studies of child sexual abuse (CSA) indicate high levels of victimisation in most nations for both girls and boys. It is estimated that 15–20% of girls and 5–10% of boys experience CSA. Barth, Bermetz, Heim, Trelle, and Tonia (2013) found rates of contact CSA of 13% for girls and 6% for boys. Pereda, Guilera, Forns, and Gomez-Benito (2009) found CSA rates of 19.2% for girls and 7.4% for boys. Stoltenborgh, van Ijzendoorn, Euser, and Bakermans-Kranenburg (2011) found rates of 18% for girls and 7.6% for boys. Similar findings exist in Australia. A meta-analysis by Moore et al.

http://dx.doi.org/10.1016/j.chiabu.2017.01.025

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Please cite this article in press as: Mathews, B., et al. Reports of child sexual abuse of boys and girls: Longitudinal trends over a 20-year period in Victoria, Australia. *Child Abuse & Neglect* (2017), http://dx.doi.org/10.1016/j.chiabu.2017.01.025

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(2015) found prevalence in children aged under 16 of 14.1% for girls (6.0–24.7%) and 5.5% for boys (2.1–10.2%). A study in the state of Victoria found 14.0% of girls and 4.6% of boys reported contact CSA (Moore et al., 2010). A nation-wide study found that before age 16, 33.6% of women and 15.9% of men experienced non-penetrative CSA, and 12.2% of women and 4.1% of men experienced penetrative CSA (Dunne, Purdie, Cook, Boyle, & Najman, 2003). The age of onset has been found to be approximately 9–10 years for both girls and boys (Finkelhor, Hotaling, Lewis, & Smith, 1990; Fleming, 1997; Goldman & Goldman, 1988).

Although girls are reported by most studies to be more frequently victimized than boys, the data clearly indicates boys' experience of CSA is substantial. In addition, boys appear to be more frequently victimized than girls in some specific contexts, such as some religious institutions and sporting organisations (John Jay College of Criminal Justice, 2004; Parent & Bannon, 2012; Parkinson, Oates, & Jayakody, 2010). The body of evidence about CSA of both girls and boys raises important questions about professional and broader societal awareness of boys' experience of CSA, notifications of suspected cases by professional and non-professional reporters, and changes in patterns of awareness and reporting over time. These phenomena are particularly important because the well-known challenges to disclosure of CSA are common in both girls and boys, but there are additional challenges for boys in their own self-disclosure and arguably in others' perceptions of boys' experiences of CSA.

#### 1.1. Nondisclosure by boys and girls

Children of both genders experience similar adverse physical and mental health sequelae of CSA (Maikovich-Fong & Jaffee, 2010; Paolucci, Genuis, & Violato, 2001; Rhodes et al., 2011). Both girls and boys are often inhibited from disclosing their experience of CSA, frequently for many years or decades, and many do not ever disclose (Kogan, 2004; Smith et al., 2000).

The multiple reasons for nondisclosure are well established (McElvaney, 2013). Barriers to disclosure have been conceptualized using a tripartite ecological model comprising factors related to the individual, to others, and to the social world (Collin-Vézina, De La Sablonniere-Griffin, Palmer, & Milne, 2015). Boys are known to be unlikely to disclose CSA for the same reasons as girls, including fear, embarrassment, and guilt (Fontes & Plummer, 2010; Ullman & Filipas, 2005). However, factors specific to males mean boys may be even less likely to disclose than girls, both proximate to the events and in later self-report studies (Ullman & Filipas, 2005). Male self-disclosure is inhibited by feelings of extreme anger, withdrawal, and suppression, often accompanied by later drug use (Dhaliwal, Gauzas, Antonowicz, & Ross, 1996; Spataro, Moss, & Wells, 2001), and fear of being perceived as a potential perpetrator (Fontes & Plummer, 2010).

Disclosure is further inhibited by cultural, religious, familial and institutional forces, and by societal taboos around sex and stigma attaching to victims (Collin-Vézina et al., 2015; Feiring, Simon, & Cleland, 2009; Fontes & Plummer, 2010). In particular, the power and durability of gender norms and social stereotypes of masculinity prevent men sharing their experiences, even with those closest to them. Admitting victimisation undermines images of masculine strength, heightening shame at inability to prevent the abuse. Revealing abuse by a male can cause fear of being perceived as homosexual, and revealing abuse by a female subverts an idealised construction of masculine power which is elevated by any sexual interaction with females (Alaggia, 2005, 2010; Dorahy & Clearwater, 2012; Easton, 2013, 2014; Fontes & Plummer, 2010; Gagnier & Collin-Vezina, 2016; Holmes & Slap, 1998; O'Leary & Barber, 2008; Romano & De Luca, 2001). Victimisation in religious and institutional contexts by perpetrators possessing additional power further inhibits males' disclosure (Parkinson et al., 2010). The weight of this evidence raises questions about public and professional response to boys' experiences of CSA.

1.1.1. Professional awareness and recognition of CSA – boys and girls. The nature of professional awareness, recognition and reporting of boys in CSA cases is not well understood (Dhaliwal et al., 1996; Gagnier & Collin-Vezina, 2016; Holmes & Slap, 1998). Reasons proposed for less frequent reporting of boys to child protection authorities include the lack of professional attention to boys as victims of CSA, and poorer cognisance of the aetiology and sequelae of CSA for boys (Easton, 2013; Holmes & Slap, 1998). For example, professionals working with men do not routinely ask about past history of CSA (Lab, Feigenbaum, & De Silva, 2000) leading to "silencing" (Easton, 2013, p. 350) for male victims that has, "rendered them almost invisible" (Gagnier & Collin-Vezina, 2016, p. 222).

The difficulty of recognizing signs of CSA is well-established, with even penetrative CSA rarely leaving physical evidence (Heger, Ticson, Velasquez, & Bernier, 2002). Members of the public and professional groups alike thus rely heavily on disclosure, behavioral indicators and other signs to form suspicions of CSA. The difficulty of detection is exacerbated in boys, given their reluctance to talk about their experiences. It may be further heightened due to different societal and professional attitudes towards boys' experiences of CSA affected by dispositions towards sex and masculinity, and lower public and professional awareness about victimisation of boys.

1.1.2. Scientific and societal awareness of CSA – boys. Professional and public awareness of CSA generally, and of boys in particular, has developed alongside increases in scientific knowledge and popular discourse. Different jurisdictions will have different levels of awareness and response depending on features including cognitive awareness, norms of behavior, and prevailing cultures of child protection. These features can change over time, influenced by social and political forces.

In general, new scientific awareness of CSA in the United States in the late 1970s and 1980s brought it to greater public prominence (Finkelhor, 1979; Kempe, 1978; Summit & Kryso, 1978). In other nations, including Australia, there was little

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