



An exploration of student perceptions of the risks and protective factors associated with child sexual abuse and incest in the Western Cape, South Africa

Chernelle Lambert¹

Violence, Injury and Peace Research Unit, South African Medical Research Council

Michelle Andjipatin

Department of Psychology, University of the Western Cape

ABSTRACT

Child sexual abuse (CSA) and incest have been identified as increasing social problems in South Africa. Despite thousands of children being affected annually, the majority of cases remain unreported. The aim of this study was to qualitatively explore the knowledge-based perceptions of senior university students from multiple disciplines, of the risk and protective factors associated with CSA and incest. The study utilised both focus groups and individual interviews to obtain the data. Two focus groups consisting of eight participants each were conducted. Five individual interviews elicited in-depth responses which could not be accessed via the focus group discussions. Data collection was guided by semi-structured questions, and thematic analysis was used to analyse data. The findings of the study revealed that perceived risk factors associated with CSA and incest included the influence of education from the child and family's perspective, poverty, overcrowding, the influence of power, and the deterioration of morals and values. The perceived protective factors that participants discussed centred on the impact that education has on children and society; the importance of good parenting; society's overall awareness and empowerment; laws and regulations, and rehabilitation programmes for perpetrators.

Keywords: *child sexual abuse; incest; risk factors; protective factors; power*

¹ Please direct all correspondence to: Ms Chernelle Lambert, 19 Winter Crescent, Glenhaven, Athlone, 7764, South Africa; Email: chernellelambert@gmail.com or chernelle.lambert@student.uantwerpen.be.

INTRODUCTION

In recent years there has been a considerable proliferation in the number of child sexual abuse (CSA) and incest cases reported in South Africa (Banwari, 2011; Higson-Smith, Lamprecht & Jacklin, 2004; Petersen, Bhana, McKay, 2005). These cases demonstrate the severity of a phenomenon which has plagued this developing nation and the world for decades (Banwari, 2011; Lalor, 2004; Madu, 2003). The South African Police Services 2012/13 analysis of the national crime statistics reveals a crime ratio of 127 per 100 000 in the population for reported sexual offences. These include rape, sexual assault, acts of consensual sexual penetration with certain children (12 > 16 years), and statutory sexual assault (South African Police Service, 2013). Although this ratio has decreased by 0.4% in the past four years (and perhaps needs to be cautiously interpreted), it is still alarmingly high.

A contextual analysis of the severity of CSA and incest was conducted by the Medical Research Council (MRC) on reported rape cases in South Africa, which verified that 40% of rape survivors were below the age of 18 (Jewkes & Abrahams, 2002). The study revealed that only one out of 10 child rape cases was reported to the police and resulted in a criminal conviction (Jewkes & Abrahams, 2002). More than a third of rape survivors were under the age of 17, while 6% were under the age of seven. Incest manifested itself in 24% of the reported cases of sexual abuse and rape for children under the age of 11 (Jewkes & Abrahams, 2002). There are considerable complexities regarding the identification of CSA, as many children do not report the abuse, and the physical evidence is not always visible (Modeli, Galvão & Pratesi, 2010). In order to maintain clarity, the definitions below were used for the current study.

DEFINITIONS

Finkelhor (1994), who has published extensively in the field of CSA, maintains that there is a considerable amount of confusion around the definition of CSA. This confusion may be related to the complexities surrounding the diagnosis of CSA and incest because physical examination alone is infrequently diagnostic without the history or specific laboratory findings (Sakellidis, Spiliopoulou & Papadodima, 2009). This confusion manifests across various research studies, disciplines and social service reporting agencies (Dawes, Borel-Saladin & Parker, 2004). In the current study the definition given by Finkelhor (1994) was used. According to Finkelhor (1994), CSA has two main elements: first, it is seen as any sexual activity that involves a child, and second, it contains abusive conditions such as coercion or the presence of a large age gap between participants which illustrates a lack of consent. The common law definition of incest is sexual intercourse between people who are

related and by law are prohibited to marry (Community Agency for Social Enquiry, CASE, 2005). Article 2 of the African Charter on the Rights and Welfare of the Child (ACRWC) states that a child is any person below the age of 18 years (Organization of African Unity, OAU, 1990).

RATIONALE

In a briefing paper on rape perpetration for the Sexual Violence Research Initiative, Jewkes (2012) describes rape as potentially preventable. The review also states that although genetic influences play an important role, there is considerable evidence that there are five groups of amenable risk factors which are important to rape perpetration. These groups of risk factors are: negative childhood exposures; attachment and personality disorders; social learning and delinquency; gender inequitable masculinities; and firearms and substance abuse (Jewkes, 2012). Jewkes (2012) concludes by making recommendations for future research to strengthen the field of rape prevention. These are: expanding the understanding of risk factors for perpetration of different types of rape including child rape and sexual abuse (Dodge, 2005; Jonzon & Lindblad, 2006); employing multi-disciplinary research that combines perspectives from multiple disciplines including psychology and gender studies among others (Jacobson, 2001); and understanding patterns of susceptibility (Malamuth, Sockloskie, Koss & Tanaka, 1991).

In response to the call for research in this area, the current study attempts to strengthen the understanding and knowledge base of risk factors for perpetration and for the protection of children. It aims to explore the perceptions of senior university students from multi-disciplines about the risks and protective factors that place children, families and society at an increased risk of CSA and incest, while simultaneously exploring the influence of gender inequalities in South Africa.

METHOD

RESEARCH METHODOLOGY

In order to gain an in-depth understanding of the issues in this study when viewing this social problem from an insider's perspective, a qualitative research approach was used. Qualitative research, because of its compatibility with feminist perspectives, aims to explore any issues concerning power and powerlessness in terms of gender inequity (DiCicco-Bloom & Crabtree, 2006; Ulin, Robinson & Tolley, 2005).

PARTICIPANTS

The sample for this study consisted of 21 senior university students ranging from ages 22–27 years, 18 women and three men, majoring in the academic disciplines of psychology, (n = 7); social work, (n = 5); women and gender studies; (n = 5); and economic and management sciences (EMS), (n = 4). Information forms were given to all participants in order to provide their demographic details. Students were selected from these academic disciplines based on the fact that psychology students at a senior level are accustomed to focusing on social problems affecting society, and CSA is often a core aspect to social work studies with senior students receiving extensive practical training with children who have been abused. Students from women and gender studies were chosen as this discipline often provides a feminist perspective on the complexities surrounding CSA and incest; students from EMS were selected based on an insight that was not of a social scientific nature. These students were therefore chosen for their depth of understanding, and for their general perceptions of sexual violence. Selecting students from multiple disciplines allowed for comparison of views and provided a multi-disciplinary aspect to the study. All students were given a brief outline in the information sheet of what the study was about, that they needed to be senior university students and that confidentiality needed to be maintained at all times. This information and criteria served as a guide for the students in their decision to take part in the study.

DATA COLLECTION

The information was obtained using focus group and individual interview methods. Two multiple-category focus groups were conducted. This design allows the researcher to explore opinions across groups/categories (Krueger, 2002). Participants were randomly placed into focus groups of eight participants each. The groups consisted of a combination of students across disciplines and were of mixed gender. The focus groups were guided by semi-structured questions, allowing room for additional insights. Five individual interviews were done to elicit in-depth responses which could not be accessed via the focus group discussions (FGDs). This information included any personal experiences that participants might not have wished to express in a group setting; however, no differences in responses were reported.

PROCEDURE

The procedure that was used to conduct the study was as follows: permission was obtained from the university's Higher Degrees and Ethics committees in order to obtain access to students; respective heads of departments received a summary of the proposal, together with the information letter containing the aims of the study, and requesting their co-operation

in recommending students from their respective academic departments. Students who were interested in taking part in the study were contacted. With the written consent of the participants, focus groups of one hour each were conducted, while individual interviews lasted for approximately 40 minutes each. Focus groups and individual interviews were conducted in English, audio-recorded, and then transcribed by the principal researcher. At all times, the information obtained was kept confidential in a secure location.

DATA ANALYSIS

The information obtained during the FGDs and individual interviews was analysed using thematic analysis, an analytic tool used to understand and to explore the research topic qualitatively by identifying common themes and further investigating the relationships between them (Thomas & Harden, 2008; Thorne, 2000). After reading and re-reading the transcripts, the data was coded into categories and eventually into themes. The interpretation of the data allowed themes to emerge and the meaning behind them to be identified, while providing a link between them (Thomas & Harden, 2008; Thorne, 2000; Willig, 2001).

FINDINGS AND DISCUSSION

The initial part of the analysis concerned the reasons why South Africa as a society has a high prevalence of CSA and incest. All participants agreed that it is of a serious nature, and many had gained knowledge of this through media reports and academic literature. Participants were of the opinion that CSA and incest are much more prevalent than what is being reported. For instance, one respondent stated, "I think it's very prevalent because I think there are more people being abused than we know. I think all of us know someone that has been abused you just don't know that they are" (FGD 1). Suggested possible reasons for the high incidence of CSA were as follows.

PERCEIVED RISK FACTORS

POVERTY

Poverty was cited as the major reason for increasing rates of CSA. Participants believed that if poverty decreases, there will be a significantly lower number of reported cases of CSA and incest. Participants from the social work discipline believed that poverty is one of the leading reasons for the high prevalence as many families are often left destitute and children become vulnerable to perpetrators who target homeless children.

"Most people that don't have jobs lives in poverty, so they lose their homes, so they tend to live on the streets. Especially if a girl or boy who becomes homeless,

anyone can come across them and feel that they can do whatever they want to them.” (FGD 1)

Child poverty remains high, with close to 67% of South African children living in poverty (Sanders, Reynolds & Lake, 2012). Six out of every 10 children in the year 2010 were living in households with a monthly income of less than R575 per person per month. Poverty or deprivation can result in a lack of access to quality health services, adequate housing, quality education, and safety and security, the vital essence of a child's well-being (Bower, 2014; Hall, Woolard, Lake & Smith, 2012; Seedat, van Niekerk, Jewkes, Suffla & Ratele, 2009; Wood, 2006).

OVERCROWDING

Poverty can produce numerous other risk factors that are perceived as direct contributors to the high prevalence of CSA and incest. Participants across all disciplines in the FGDs and individual interviews expressed the opinion that overcrowding due to the shared space of small rooms is an important risk factor to consider. A participant from the social work discipline stated that often younger siblings are forced to sleep next to older siblings. This could possibly result in older siblings crossing the boundaries of good moral judgement and wishing to experiment with their younger siblings.

“The overcrowding things can also play a role, I think. Like, you have different aged children sleeping in the same beds and things can happen. I mean, maybe the intent is not to harm, but children's relationships and boundaries are blurred and as a result, they may do stuff with each other.” (Individual interview)

“You see people, big families, are living together in the same small house and children don't have their privacy, and I read once that sexual abusers often say, like, the child provoked them so, like, the children being in the home with these people are dressing and washing in the same areas as these abusers which may have an influence on the situation.” (Individual interview)

Nearly two million (37%) of the children living in poverty in South Africa, live in overcrowded households with a ratio of more than two people per room excluding the bathroom, but including the kitchen (Hall et al., 2012). Overcrowding is considered an infringement of a child's privacy because they do not have the space to wash or dress themselves in private (Hall et al., 2012).

According to Higson-Smith et al. (2004), overcrowding does not allow essential separation between sexualised adults or older siblings. These conditions put children at increased risk

of CSA and incest owing to the close proximity in sleeping arrangements that overcrowding creates (Corwin & Olafson, 1993; Schechter, Brunelli, Cunningham, Brown & Baba, 2002).

Though issues of poverty and overcrowding were serious concerns to participants, overarching issues such as power and the deterioration of morals and values in society proved to be an even larger concern.

DECIPHERING THE INFLUENCE OF POWER

Participants from the psychology and women and gender studies believed that it is almost impossible to discuss risk factors without exploring the dynamics of power between the perpetrator and the child. They also stated that when men reach a certain age, they are no longer attractive, and therefore may feel the need to force themselves on younger children who are unable to fight back or refuse.

“I think it has more to do with power than we think. If they have a child just where they want them, and they can, like, almost see the fear in the child’s eyes then that gives them power.” (FGD 2)

According to participants, power is not only confined to the relationship between the perpetrator and the child. It is a construct that has penetrated society and is visible in many patriarchal households in South Africa, where male figures often exhibit dominant, aggressive, and abusive behaviours towards their spouses and children (Bower, 2014; Flemming, Mullen & Bammer, 1997). They stressed that male dominance in society helps sustain the immense gender inequalities which also contribute to increased risks of CSA and incest.

“Like, I would say power does play a role, whether it’s the mother or the father, where like, a person is not receiving respect at home or at work or in society, then they just take the most available weaker person ... to try and sort of gain that power, control and respect ... but in actual fact they not gaining respect, it’s just a way of asserting myself and then they just have to do as I say.” (FGD 1)

Power was also seen as a construct that spans age groups. The majority of the participants believed that there is a misconception that older men are the only ones who feel the need to exert power and aggression over those who are vulnerable to them.

“Like I would say it’s a whole range, because even though past literature shows its older men, I think it’s a whole spectrum, because when I worked in the schools you would hear of nine-year old boys, abusing five-year olds or six-year olds.” (Individual interview)

In a national school violence study conducted by Burton and Leoschut (2012), 4.7% of 5 939 learners surveyed had been sexually assaulted or raped. The study reported that violence was not a once-off encounter in schools, and the rate at which learners felt repeatedly victimised was more prevalent in threats of violence and sexual assault (Burton & Leoschut, 2012).

According to Higson-Smith et al. (2004), children are often socialised into a set of preconceived male ideologies that uphold the concepts of control, power and patriarchy. These views are reiterated by Bower (2014) who believes that the progress towards the full realisation of the rights of women and children is still undeniably slow, considering the recourses and commitment made in various pieces of legislation. She supports her argument by outlining the patriarchal nature of the South African society as it is reflected in the social constructions of masculinity and femininity, which have been and continue to be directly associated with gender-based violence (Bower, 2014).

Sociological feminist theory, according to Cossins (2000), sees the issue of power and powerlessness as the main cause of the perpetration of CSA and incest. She acknowledges theories (among them, radical feminist theory that suggests that patriarchy is the sole cause of CSA) that provide an intellectual foundation from which many perspectives may emerge.

Jewkes, Penn-Kekana and Rose-Junius (2005) conclude in a study that the status of women and girls in a community is the greatest source of vulnerability to CSA. While many authors attribute children's vulnerability to abuse of rules of "respect", Jewkes and colleagues (2005) suggest that the deep-rooted system of patriarchy is for the most part the cause of a girl child's vulnerability. Sexual entitlement has also been indicated as one of the most common motivations for all types of rape. This has come to the fore in a study by Jewkes, Sikweyiya, Morrell and Dunkle (2011) which concludes that 45% of men indicated that they felt no guilt regarding their perpetration of rape. The issue of power was mainly related to males, but it was not the only risk factor that had a destructive impact on society as a whole, according to some of the participants.

DETERIORATION OF MORALS AND VALUES

A prevailing theme among participants' responses in the FGDs and individual interviews was that there is an increased drop in morals and values in society. Participants suggested that because of the rapid decrease in good moral judgement, perpetrators find it easier to abuse because they have no moral judgement. The perpetrators choose not to distinguish between moral wrong and right, and choose to act on impulse and there is no remorse. Participants from the EMS discipline also mentioned their awareness of the lack of morals and values.

“I think that there has been a moral decay in society where people just don’t know what’s right anymore.” (Individual interview)

Participants across disciplines agreed that the absence of good morals and values leads to a significant lack of respect for their fellow human beings. This, they believe, influences people to cross the boundary of acceptable behaviour and engage in the exploitation and domination of someone younger, gentler, or of a different sex to them.

“I think it’s more just a breakdown of values ... where people are like I can do whatever I want to do to whoever because that is my right ... and like for me I would narrow it down to a breakdown of values and people not knowing where to draw the line and respect also.” (FGD 1)

These responses were confirmed in the literature as many researchers believe that in order for society to prevent the incidence of CSA and incest, it should target not only individuals, but society in its entirety. Society would need to re-evaluate or maintain good morals and values that encompass the protection of those around them, thus providing an overall cohesion surrounding the protection of children (CASE, 2005). Understanding the risk factors which contribute to the perpetration of CSA and incest is vital, and also provides a solid platform for discussing potential protective factors.

PERCEIVED PROTECTIVE FACTORS

The following themes emerged in the FGDs and individual interviews from the perspective of the child, families and society, and were offered as factors that may protect children from CSA and incest.

THE IMPACT OF EDUCATION

Participants across disciplines showed consensual understanding when discussing the importance of education. Most of the participants agreed that children need to be educated regarding what is considered acceptable or appropriate behaviour and what is not. It was believed that children need to be taught by their parents and educators about possible behaviour exhibited by an adult or older sibling that may be considered inappropriate. This would help the child to become more alert, thus making it easier for them to report the abuse to an adult.

“Well, at an individual level, children need to be taught from really early on how to protect themselves. They need to be taught what is appropriate for another person to do to them and what is not.” (Individual interview).

One participant from the EMS discipline felt that parents need to stop instilling fear into children about going to the police, and that they need to educate their children. This type of education, participants believed, is key to making children aware of ways to become more vigilant.

“If anything like this happens you need to go tell the police because most of the people make their children afraid of policeman instead of making their children feel more safe to go to the police. And then when things like this does happen and they feel bad, then they know that they can go to the police or they can go to someone that they trust.” (FGD 1)

The participants reiterated that it is not only the child’s responsibility to be educated, but it is the responsibility of the family as a unit to equip themselves with the necessary knowledge and skills. Within the educational setting, Phasha (2010) conducted a qualitative study on the functioning of sexually abused learners and the role of teachers in assisting the learners in overcoming their victimisation. Learners believed that building a trusting relationship with their teachers, having teachers take more interest in their learners’ lives by facilitating home visits, and training teachers to deal with CSA more effectively, were pivotal to helping them overcome the negative impact of CSA and could serve as preventative measures.

THE IMPORTANCE OF GOOD PARENTING

Good parenting was a theme widely agreed upon by participants within the social work discipline. The participants felt that good parenting skills need to be consistently practised in the home. They suggested that this type of behaviour involves being emotionally connected with their children on a level where the children would be able to talk to them about anything that is of concern. They also recommended that parents need to be

“present. They need to be able to know where their children are at all times. They must learn better parenting skills and, like, know that this guy, for example, shouldn’t be around my child.” (FGD 2)

They also noted that too often parents become so busy in their daily lives, dealing with their own personal dilemmas that they forget to be aware of their children’s whereabouts. In situations like this, the participants felt that perpetrators saw an opportunity to abuse. Participants also reported that children are often left with caregivers without knowing that the caregivers are mentally incapable of taking care of their children. In these instances, financial constraints may compel parents to do so, but this opens the door for abuse to take place.

“But also know who the people are that their children are going to, like, say if the child now goes to go play next door by Johnny, then the parents must know who Johnny is and who is his parents and, like, who is at home. Then maybe not so much abuse would take place.” (FGD 2)

Though the influence on perceived protective factors for the child as an individual and the family as a unit was of pronounced significance, participants felt that society too has a pivotal role to play in the prevention of CSA and incest.

SOCIETY’S AWARENESS AND EMPOWERMENT

An overall theme that emerged in participants’ responses was that communities, government and society at large need to find ways to raise more awareness about CSA and incest. They felt that by educating the nation, one might be able to establish lower rates of CSA and incest. A participant from the women and gender studies discipline specifically mentioned that the government needs to teach parents how to speak to their children openly about their body parts in a positive light. This should be done so that if anything does occur, children are aware of what is considered acceptable and unacceptable. Through making people in the community more aware of the risks involved, one can empower communities and families to be more vigilant in identifying these risk factors when they do occur.

“As far as society goes, there needs to be more education about child abuse and the extent of it. I don’t think people realise what going on.” (Individual interview)

A participant from the psychology discipline in the individual interviews stated that the influence and importance of cultural beliefs and practices within the South African context should not be overlooked. The participant felt that people’s beliefs and practices often vary within cultural and ethnic groupings, therefore to a large extent, a cultural practice is regarded as a guideline for behaviour that people inherit as members within a society. This could often serve as a sufficient basis for perpetrators and exploiters to justify their actions thereby disguising the abuse they inflict on innocent children.

“But in some cultures you sometimes can’t report it because you will get a punishment, things like that.” (FGD 1)

This participant therefore revealed that society needs to decipher and in turn empower themselves as to which cultural norms and practices are fundamentally causing the subordination of women and children.

These responses were confirmed as many researchers believe that in order for society to prevent the incidence of CSA and incest, it should not only begin within individuals, but within society (Mathews, Loots, Sikweyiya & Jewkes, 2012). Society also needs to adopt sufficient community infrastructures and leadership which contribute to a greater sense of hope among community members, thus increasing the awareness of safety (Ahmed, Seedat, van Niekerk & Bulbulia, 2004). Across all disciplines, participants felt that the most significant change in the reduction of CSA cases may be brought about by the enforcement of laws.

LAWS AND REGULATIONS

There was a considerable amount of response from participants regarding the laws in South Africa. All participants in the FGDs agreed that in terms of jail sentences, the government is not doing enough to stop perpetrators from abusing. A participant from the social work discipline explained how she recently discovered that if a perpetrator committed incest, as opposed to having sexual relations with a non-member of the family, they received a lower sentence. They said that this sends out the wrong signal to perpetrators who abuse children within their own family because it would be assumed that they would probably receive a minimum amount of jail time.

“I think harsher sentences for sexual offenders are needed. It creates a safe environment in which a child could disclose if they are being abused and the perpetrator could be in court before another child is harmed.” (Individual interview)

Participants also maintained that the government needs to re-implement the death penalty, as this might cause perpetrators to stop and reconsider their actions before sexually abusing a child. Overall, there seemed to be great concern among the participants regarding the punishment perpetrators receive after being convicted of CSA or incest.

“Stricter laws with abuse because I think that some laws are a bit lenient so they allow for certain things, because sometimes they require some evidence and I mean what girl wants to say look I’m being abused.” (FGD 1)

According to Gallinetti (2004), there are many problems with the South African criminal justice system. She suggests a multidisciplinary approach whereby the South African Police Services (SAPS), the National Prosecuting Authority, social welfare services and civil society need to coordinate strategies cohesively to bring about the rightful prosecution of child sexual offenders. These policy documents, protocols and guidelines are readily available, but are **not** being implemented. A common reason for this is that they have

not been made legally enforceable, and therefore there is no accountability (Gallinetti, 2004). Jamieson, Proudlock and Nhenga-Chakarisa (2012) blame the major backlog of applications that social workers and courts are faced with from families applying for foster care in order for them to access a higher child support grant (CSG) as one of the reasons for the delay and inadequate services and interventions for abused children.

REHABILITATION PROGRAMMES FOR PERPETRATORS

Participants also expressed their concern about what happens to convicted perpetrators once they enter jail and once they are released. As a possible solution to the rate of perpetrators re-offending, participants, especially within the psychology discipline in the FGDs, stressed that when perpetrators are convicted and sent to jail for crimes related to CSA and incest, additional programmes need to be put in place in order for rehabilitation to occur. Participants felt that not enough attention was being paid to perpetrators in jail as recidivism is high. They emphasised that whatever psychological issues the perpetrator had that led them to commit acts of abuse before entering prison would still be there when they were released. More time and effort should therefore be put into rehabilitation to prevent re-offending.

“Prisons don’t really rehabilitate. Like, our prison system does not really rehabilitate, they just put people there for 15 years or 25 years and then you come out and you still have the same problem you had when you went in. So if the person was struggling with whatever they were struggling with when they went in that led them to abuse children, just because they have been in prison doesn’t mean that they have changed ... um ... and I think that they should be open about it.” (FGD 1)

The John Howard Society (2002) did a study on sexual offending programmes which found that by providing long-term intensive treatment for offenders, the rate of re-offending may be reduced. These intensive treatments would have to involve behavioural conditioning and cognitive skills training. An emphasis should be placed on relapse prevention, and long-term follow-ups should be recommended. A meta-analysis done on re-offending found that across several studies, child sexual offenders who have been treated re-offend at a rate of 19%, while child sexual offenders who have not been treated re-offend at a rate of 27%. The treatment was able to reduce re-offending by a significant 8%, saving the innocence of numerous children (John Howard Society, 2002). These percentages reflect the rate of re-offending; the higher the percentage, the higher the rate of re-offending.

RECOMMENDATIONS

Participants' perceptions revealed that a multi-faceted society such as South Africa can benefit from the resources we have, such as good laws and regulations, social service agencies, local NGOs and schools to implement sufficient preventative strategies to reduce CSA and incest. These strategies and programmes need to be focused on limiting the negative experiences children have by educating them and providing families – especially those living in poverty – with sufficient parental skills training, provide rehabilitation programmes to convicted CSA offenders, and implement laws and regulations which strive to prevent such abuse from occurring. The influence of power was something that the participants felt extended beyond age groups, and materialised mainly in the behaviour of boys and men. This, they felt, was a direct contributor to CSA and incest, especially within the South African context. They believed that society at large needs to encourage the adoption of good morals and values as this provides a buffer against behaviours associated with the perpetration of CSA and incest.

CONCLUSION

The findings of this study revealed that perceived risk factors associated with CSA and incest are poverty and a lack of access to resources, overcrowding, the influence of power in a patriarchal society, and the deterioration of morals and values. The findings also revealed that the perceived protective factors associated with CSA and incest included the importance of education, good parenting skills, society's awareness and empowerment, the implementation and monitoring of laws and regulations, and the development and strengthening of rehabilitation programmes for perpetrators. As future professionals within South Africa, students' knowledge-based perceptions on this social issue are significant when determining ways to prevent the sexual abuse of children and identify factors that place children, families and communities at an increased risk. The purpose of this study was to increase the knowledge around this subject area, while providing awareness and offering a possible basis for future preventative strategies.

REFERENCES

- Ahmed, R., Seedat, M., van Niekerk, A. & Bulbulia, S. (2004). Discerning community resilience in disadvantaged communities in the context of violence and injury prevention. *South African Journal of Psychology*, 34(3), 386–408.
- Banwari, M. (2011). Poverty, child sexual abuse and HIV in the Transkei region, South Africa. *African Health Sciences*, 11(1), S117–S121.
- Bower, C. (2014). The plight of women and children: Advancing South Africa's least privileged. *The Annals of the American Academy of Political and Social Science*, 652(1), 106–126.

- Burton, P. & Leoschut, L. (2012). *School violence in South Africa: Results of the 2012 national school violence study*. Cape Town, South Africa: Centre for Justice and Crime Prevention.
- Community Agency for Social Enquiry (CASE) (2005). *Child sexual abuse and exploitation in Southern Africa*. Braamfontein, South Africa: Save the Children Sweden, CASE.
- Corwin, D.L. & Olafson, E. (1993). Overview: Clinically identification of sexually abused children. *International Journal of Child Abuse and Neglect*, 17(1), 3–5.
- Cossins, A. (2000). *Masculinities, sexualities and child sexual abuse*. The Hague, Netherlands: Kluwer Law International.
- Dawes, A., Borel-Saladin, J. & Parker, Z. (2004). Child sexual abuse: Measurement and monitoring. In L. Richter, A. Dawes & C. Higson-Smith (eds). *Sexual abuse of young children in southern Africa* (pp. 176–206). Cape Town: HSRC Press.
- DiCicco-Bloom, B. & Crabtree, B.F. (2006). The qualitative research interview. *Medical Education*, 40(4), 314–321.
- Dodge, K.A. (2005). Risk and protection in the perpetration of child abuse. *North Caroline Medical Journal*, 66(5), 364-366.
- Finkelhor, D. (1994). The international epidemiology of child sexual abuse. *Child Abuse and Neglect*, 18(5), 409–417.
- Flemming, J., Mullen, P.E. & Bammer, G. (1997). A study of potential risk factors for sexual abuse in childhood. *Child Abuse and Neglect*, 21(1), 49–58.
- Gallinetti, J. (2004). Legal definitions and practices in child sexual abuse: a review of recent literature. In L. Richter, A. Dawes & C. Higson-Smith (eds), *Sexual abuse of young children in southern Africa* (pp. 55–95). Cape Town: HSRC Press.
- Hall, K., Woolard, I., Lake, L. & Smith, C. (2012). *South African child gauge 2012*. Cape Town: Children's Institute, University of Cape Town.
- Higson-Smith, C., Lamprecht, L. & Jacklin, L. (2004). Access to specialist services and the criminal justice system: data from the Teddy Bear Clinic. In L. Richter, A. Dawes & C. Higson-Smith (Eds.), *Sexual abuse of young children in southern Africa* (pp. 335-355). Cape Town: HSRC Press.
- Jacobson, M. (2001). Child sexual abuse and the multidisciplinary team approach: Contradictions in practice. *Childhood*, 8(2), 231–250.
- Jamieson, L., Proudlock, P. & Nhenga-Chakarisa, T. (2012). *Legislative developments in 2010/2011*. South African Child Gauge 2012. Cape Town: Children's Institute, UCT.
- Jewkes, R. (2012). *Rape perpetration: A review*. Pretoria: Sexual Violence Research Initiative.
- Jewkes, R. & Abrahams, N. (2002). The epidemiology of rape and sexual coercion in South Africa: An overview. *Social Science Medicine*, 55(7), 1231–44.
- Jewkes, R., Penn-Kekana, L. & Rose-Junius, H. (2005). "If they rape me, I can't blame them": Reflections on gender in the social context of child rape in South Africa and Namibia. *Social Science & Medicine*, 61(8), 1809–1820.

- Jewkes, R., Sikweyiya, Y., Morrell, R. & Dunkle, K. (2011). Gender inequitable masculinity and sexual entitlement in rape perpetration in South Africa: Findings of a cross-sectional study. *PLoS ONE* 6 (12), e29590.
- John Howard Society of Alberta (2002). *Sex offender treatment program*. Canada: John Howard Society of Alberta.
- Jonzon, E. & Lindblad, F. (2006). Risk factors and protective factors in relation to subjective health among adult female victims of child sexual abuse. *Child Abuse & Neglect*, 30(2), 127–143.
- Krueger, R.A. (2002). *Designing and conducting focus groups interviews*. Paul, MN: University of Minnesota.
- Lalor, K. (2004). Child sexual abuse in sub-Saharan Africa: a literature review. *Journal of Child Abuse & Neglect*, 28(4), 439–460.
- Madu, S.N. (2003). The relationship between parental physical availability and child sexual, physical and emotional abuse: A study among a sample of university students in South Africa. *Scandinavian Journal of Psychology*, 44(4), 311–318.
- Malamuth, N.M., Sockloskie, R.J., Koss, M.P. & Tanaka, J. S. (2001). Characteristics of aggressors against women: Testing a model using a national sample of college students. *Journal of Consult Clinical Psychology*, 59(5), 670–81.
- Mathews, S., Loots, L., Sikweyiya, Y. & Jewkes, R. (2012). Sexual abuse. In A. van Niekerk, S. Suffla & M. Seedat (Eds.). *Crime, violence and injury in South Africa: 21st century solutions for child safety* (pp. 84–96). Houghton: Psychological Society of South Africa.
- Modelli, M.E.S., Galvão, M.F. & Pratesi, R. (2012). Child sexual abuse. *Forensic Science International*, 217(1–3), 1–4.
- Organization of African Unity (OAU). (1990). *African charter on the rights and welfare of the child CAB/LEG/24.9/49*. Retrieved January 13, 2014, from <http://www.refworld.org/docid/3ae6b38c18.html>.
- Petersen, I., Bhana, I. & McKay, M. (2005). Sexual violence and youth in South Africa: The need for community-based prevention interventions. *Journal of Child Abuse & Neglect*, 29(11), 1233–1248.
- Phasha, T.N. (2010). Educational resilience among African survivors of child sexual abuse in South Africa. *Journal of Black Studies*, 40(6), 1234–1253.
- Sakelliadis, E.I., Spiliopoulou, C.A. & Papadodima, S.A. (2009). *Forensic investigation of child victim with sexual abuse*. Greece: Department of Forensic Medicine and Toxicology, Medical Faculty, University of Athens.
- Sanders, D., Reynolds, L. & Lake, L. (2012). Addressing inequities in child health: Opportunities and challenges. In K. Hall, I. Woolward & C. Smith (eds). *South African Child Gauge 2012*. Cape Town: Children's Institute, UCT.
- Schechter, D.S., Brunelli, S.A., Cunningham, N., Brown, J. & Baca, P. (2002). Mother-daughter relationships and sexual abuse: A pilot study of 35 days. *Bulletin of the Menninger Clinic*, 66(1), 39–60.
- Seedat, M., van Niekerk, A., Jewkes, R., Suffla, S. & Ratele, K. (2009). Violence and injuries in South Africa: Prioritising an agenda for prevention. *Lancet*, 374(9694), 1011–1022.

South African Police Service. (2013). *Analysis of national crime statistics: Addendum to the annual report 2012/13*. Retrieved January 10, 2014, from http://www.saps.gov.za/statistics/reports/crimestats/2013/crime_stats.htm.

Thomas, J. & Harden, A. (2008). Methods for the thematic synthesis of qualitative research in systematic reviews. *BMC Medical Research Methodology*, 8(45), 1471–2288.

Thorne, S. (2000). Data analysis in qualitative research. *Evidence-Based Nursing*, 3(3), 68–70.

Ulin, P.R., Robinson, E.T. & Tolley, E.E. (2005). *Qualitative methods in public health: A field guide for applied research*. San Francisco: Josey-Bass.

Willig, C. (2001). *Introducing qualitative research in psychology: Adventures in theory and method*. Buckingham: Open University Press.

Wood, A. (2006). Correlating violence and socio-economic inequality: An empirical analysis. In T.E. McCarthy (ed.). *Attacking the root causes of torture, poverty, inequality and violence* (pp. 21–95). Geneva: World Organisation Against Torture.