

THE CONTRIBUTION OF COMMUNITY EDUCATION TOWARDS REDUCING CHILD ABUSE: A PARTICIPATORY ACTION RESEARCH APPROACH

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**THESIS SUBMITTED IN FULFILMENT OF THE REQUIREMENTS
FOR THE DEGREE OF
DOCTOR OF PHILOSOPHY IN ADULT EDUCATION (PhD)
AT THE
UNIVERSITY OF LIMPOPO**

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APRIL 2013

DECLARATION

I, the undersigned, hereby declare that the work contained in this thesis is my own original work and that I have not previously in its entirety or in part submitted it at any University for a degree.

Signature:

Date:

ACKNOWLEDGEMENTS

I would like to extend my sincere thanks to the following people for the role that each has played in the completion of this study:

- My supervisor, Dr M. A. Rampedi – you encouraged me to read as many books as possible to understand the participatory action approach. On the first day I met with you, your words of welcome made me feel very special. You guided, motivated and encouraged me with the utmost of patience. You took the time to check each chapter thoroughly before I attempted the next chapter and you did not hesitate to drive up the mountains to witness the focus group I had organised. I am very happy to have completed my thesis under your supervision.
- My wife, Sophy – you understand the significance of education in a family. Your soft voice comforted me when the going was tough. Today, due to this achievement, you can also "walk with your nose in the air with high-heeled shoes".
- Mamphago M – you are a sister to me today. Your compassionate assistance and support throughout my study kept me going. I know you are also happy now that the study has been completed.
- The respondents who took their time to participate in the discussions and interviews – your cooperation and interest greatly motivated me.
- My brother, V.R. Mabade – thank you for your encouragement and support.

ABSTRACT

The sexual abuse of children seems to be a worldwide community-based problem. In any attempts to address this problem, community participation is crucial. The study, which was conducted in the Vhembe district of the Limpopo province of South Africa, focused on the factors that contribute to child sexual abuse in this area. The aims of the study were to encourage community participation in the reduction of child sexual abuse and to educate the community on child sexual abuse in order to improve the quality of life of the community members.

The study adopted a participatory action research approach utilising a qualitative technique to collect the data. Interviews were conducted with educators, nurses, social workers, traditional leaders, church leaders, members of the civic organisation, policing staff and the Victim Empowerment Group. A data matrix was used to analyse the data. Community education was found to be the most successful way of addressing child sexual abuse. According to the responses of all target groups, community participation is imperative to reduce the incidence of child sexual abuse. All target groups seemed to be aware of the problem and ready to work together to reduce the prevalence of child sexual abuse.

It is recommended that community education programmes be organised by each particular community to address any community-based problems such as child sexual abuse. Some of the recommendations in this study could help the community to become involved in the fight against child sexual abuse. The research indicated that educational programmes bring about greater change in the behaviour and beliefs of a community if the programmes allow the participants to articulate and examine their personal values and beliefs concerning the sexual abuse of children.

In the study, participants themselves demonstrated strategies to encourage community members to become involved in the reduction of child sexual abuse. The participants developed a positive attitude towards the reduction of child sexual abuse. They appeared to believe in community education programmes and were committed and willing to support such initiatives. By the end of the project, participants were empowered to fight against child sexual abuse.

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CHAPTER ONE

ORIENTATION AND BACKGROUND TO THE PROBLEM

1.1 INTRODUCTION AND BACKGROUND TO THE PROBLEM

Child abuse is a world-wide social problem although approaches to this problem differ from one country to another. It was first seriously addressed as a social problem in the USA in the 1970s. In Europe, people still believe that sexual intercourse with children helps to cure diseases (Lalor, 2004). Intercourse with a young girl is reported to be regarded as a common cure for sexually transmitted diseases, including Aids, and young girls are desirable as sexual partners as men could be less likely to be infected with HIV. Their actions are motivated by the belief that virgins have cleansing or curative powers. Such individuals are likely to engage in sexual acts with very young girls as there is a greater probability that they would be virgins (Lalor, 2004).

An study by Korbin (2003) reported on the serious problem of child abuse in New York. Educators were unable to help the sexually abused children because some of the perpetrators were themselves educators. Child sexual abuse in New York was also confirmed by Chafouleas and Whitcomb (2004) and Gordon (2005). A placement prevention programme was established in New York in order to empower families in which children are at risk. It was a voluntary programme that worked with

students and families on goals primarily identified by the community (Chafouleas and Whitcomb, 2004).

According to Kolk (2003), a 32-year-old mother left her child alone in Toronto in Canada. The child was raped several times by her mother's boy friend. Her mother did not want to bring her boy friend to the court of law. It is seemingly not uncommon for girls to be sexually abused by their male educators in Canada. Chege (2006) claims that children are treated like non-human beings without rights.

A Chinese study by Catherine (2004) reported that child sexual abuse is a serious social problem in Hong Kong. A total of 1 606 Chinese adults who were interviewed indicated that they were unhappy about children who were at risk of sexual abuse.

The sexual abuse of children in sub-Saharan Africa is attributed to the disintegration of clan authority and exposure to rapid social changes. Here also, sexual intercourse with a young girl is reported to be seen as a common cure for sexually transmitted diseases (Jones, 2005). Child abuse is not recognised as a serious social problem in sub-Saharan Africa where this issue does not receive serious attention simply because of the abundance of other social problems such as war, poverty and hunger, all of which compete for attention (Lalor, 2006). Girls are sexually abused by their educators in Kenya. They are treated as if there are no human rights (Chege, 2006).

According to Lalor (2004), this problem was tackled in earnest in South Africa 15 to 20 years later than in the USA. Other African countries such as Zimbabwe and Malawi started to focus on child abuse in 1998 and 1977 respectively.

1.2 CONDITIONS RELATED TO CHILD ABUSE IN SOUTH AFRICA

Although child abuse seems to be a worldwide social problem, it was not addressed

as earnestly during the apartheid dispensation as it is being done in the new democratic South Africa. By and large, human rights were ignored before the advent of the new democratic South Africa in 1994. A brief historical background to the problem of child abuse in South Africa is provided below.

1.2.1 Child abuse prior to the new democratic South Africa

Human rights were largely ignored before the advent of the new democratic South Africa. The issue of gender equality was also taken for granted. The Children's Bill, which defines the rights and responsibilities as well as the parental responsibilities, was also neglected. Sexual abuse was typically not a site of political concern, unless the perpetrator was black and the victim white. Sexual malignancy was seen lurking within the body of the white nation (Posel, 2001).

In many cases, child abuse occurred in a home where there were step-parents. A child who happened to be left with her step-father was likely to be sexually abused (September, 2000). This problem also occurred where the relationship between parents had turned sour. There were parents who believed that they could make money by having girls at home. Most of the children from poor homes were encouraged by their parents to have a relationship with their teachers in order to get food to eat (Mannah, 2002; Lister, 2005).

According to Kaufman (2002) the low level of education contributed to child abuse. The low level of education was directly related to the high level of unemployment. In a community with a low level of education, the moral education level was also limited. If people live without morals, they ignore the norms and values of society. Girls who were involved in community organisations were less likely to be abused than girls who did not participate in community organisations. The educational attainment of

household members was significant and negatively related to the likelihood that girls had had sex.

Human rights were generally ignored and there was no Bill of Rights before the arrival of the new dispensation in South Africa; the National Centre for Human Rights Education and Training was only established in South Africa in 2000. The aim of the centre was to provide training and build capacity regarding human rights and to address other related challenges in South Africa and on the African continent.

1.2.2 The new democratic South Africa

The South African Constitution (1996, sections 10 and 11) make reference to human rights, and the South African Bill of Rights (1996) refers specifically to the right to live. However, the incidence of assault and murder in South Africa indicates that this right is not always protected or respected. According to the Constitution of South Africa, everybody has the right to life, as stated in the Bill of Rights. Every South African should be protected by the South African Constitution, irrespective of gender, race and nationality. The Children's Act (Government Gazette, 2003) defines the rights and responsibilities of children, as well as the parental responsibilities and rights. This Act also provides the principles and guidelines for the protection of children and the promotion of their well-being (Department of Communication and Information, 2005/6). All South Africans have free access to the Constitution and other legislative documents. The youth gain access to the Constitution through schools.

Although both the South African Constitution and the Bill of Rights are accepted documents at state level, the Victim Empowerment Report (2006) still reports widespread incidence of child abuse, including assault and rape. According to the People Opposing Women and Child Abuse (POWA) organisation's report (2008), the

statistics in South Africa showed the following:

- A child was abused every 8 minutes in South Africa.
- A child was raped every 24 minutes in South Africa.
- A child was assaulted every 14 minutes in South Africa.
- More than 80% of perpetrators were known to the child.
- One in four girls and one in five boys under 16 years have been sexually abused.
- Half of the 26 000 Johannesburg high school students interviewed believed that forced sex is not sexual abuse.
- In one South African township, some girls under 16 had already had sexual intercourse.
- The rape graph rose sharply from 3- to 25-year-old girls and peaked at girls aged 8 to 11 years.

The question arises how communities can be empowered to deal with child sexual abuse.

In November 1997, a 17-year-old girl was raped by a gang at a school in Cape Town, South Africa. Four classmates raped her at a gunpoint, dragged her into an empty classroom and barricaded the door. The Department of Education then started to focus attention on the gender and power dynamics underlying the violence and sexual harassment prevalent in schools (Mc Gill, 2000).

According to Mc Gill (2000), one in every three girls living in Johannesburg is sexually abused in schools by their educators. One thousand five hundred learners from Grades 8 to 12 in Soweto, Eldorado Park, Orange Farm and Lenasia indicated

that they are sexually abused in schools. On November 1997, the department of education reported the gang rape of a 17-year-old girl at a South African school.

In October 2001, an 18-month-old baby was raped in the Elsies River area. Following the ensuing public outcry, a community meeting was called and the director of Rapcan (Resources Aimed at the Prevention of Child Abuse and Neglect) was one of the speakers invited to address the community on the issue of child sexual abuse. As a result of the meeting, a group of volunteers came together to form an organisation called Community against Rape and Abuse (Mwite, 2003).

Young girls are sexually abused in South Africa on the pretext that having sex with a virgin will cure HIV/AIDS. Young girls are made vulnerable, victimised and are constructed as defenceless (Bhana, 2007). They therefore become the innocent victims of adult men who have AIDS rather than active participants in their age group. Another subtle form of abuse is that children are told they "should not have sex"; instead they should be told that they should not sleep with adults (Bhana, 2007).

Infant sexual abuse in South Africa is a serious problem. Cases of sexual abuse of children younger than five years are reported through the media almost every month. In Cape Town, in the past nine years, ten rapes of children aged one year were reported on a monthly basis. It appears as if these acts have generally been committed by normal individuals who do not have a history of mental illness. Infant rape is a brutal act which appears to be increasing in frequency in South Africa (Erickson, Mc Evoy and Nicolas, 1984).

In 2003, a 48-year-old man was arrested after raping his daughter in Limpopo. The incident was disclosed by the neighbours. In 2002, a nine-year-old child was raped in Natal by a family member. The child was raped by a man of 32 years old during a

traditional ceremony at the child's home. In 2003, a 60-year-old man was arrested after raping his granddaughters aged nine and eleven years respectively. A 32-year-old man was arrested after raping a four-year-old child in Natal (Daily Sun, 2 003).

According to the David (2003) report, there were 171 children who attended a specialist child sexual abuse unit in a paediatric hospital in Durban and who were referred to statutory law enforcement or social service agencies.

In Tshwane, research was done on 13 schools through action research. In the research, 30% of learners reported that they had been abused, 8% reported being raped, 21% had had multiple sexual partners and 31% reported not to have used condoms in their sexual intercourse, and 5% of learners were reported to be sexually abused (David, 2003).

Children are sexually abused under the pretext that it is normal and proper to have sex with children. Children do not know that they have the right to refuse. Children do not have sufficient knowledge to resist sexual abuse and any information they receive is often too late, inaccurate, misleading and even frightening. They need training in social skills to change their perception with regard to sexual body language; children's training is possible through community education. Children have to learn how to protect themselves (Porter, 1989).

According to Mendel (2000) a boy was sexually abused by his mother who usually invited him into the bathroom. The mother would show all her body parts to the boy. The mother even touched his genitals and tried to engage in sexual acts with the boy. She would go with him to her drinking partners where she would be kissed in front of him. The boy was sexually abused until he was 12 years old.

A number of studies have shown that the perpetrators and the victims are often close relatives. Studies have indicated that 37% of the perpetrators were adult females, 19% were adolescent females, 33% adult males and 12% adolescent males. The most frequent perpetrators were biological mothers and fathers (Mendel, 2000).

In South Africa, the myth of virgin cleansing has contributed to the sexual abuse of the children. Even in Europe and North America sexual intercourse with a virgin has been accepted in the indigenous healing system. The African healing system has three ideas: (1) illness is a state of bodily dirtiness and healing involves a process of cleansing through ritual, (2) after the death of a wife or husband the widow or widower must be cleansed through ritual sexual intercourse and (3) the sympathy associations in processes of healing. The extent to which the myth of virgin cure is the cause of child rape has been debated in many countries (Richter, 2005).

According to Richter (2005), a nine-month-old child was sexually abused at home in Louisvaleweg in South Africa. It was alleged that the child was sexually abused by a gang. Another incident of child abuse took place in 2002 when a two-year-old child was raped in the Vhembe district of Limpopo. The child died on the way to Tshilidzini Hospital. A man was jailed after raping his stepdaughter in Natal in 2002. By then the real biological father was also in jail after raping the same child.

In addition to the belief regarding ritual cleansing, commercial sexual exploitation of children provides a range of highly challenging statistics from around the world. According to the study conducted by the United Nations Children's Fund, there are between 400 000 and 500 000 child sex workers in India. A recent study of high school learners in Atlantis near Cape Town has revealed the extent of child sex work

in that area (Richter, 2005). According to the press (2009) a sangoma was arrested after keeping 12 children for commercial sexual purposes in Mpumalanga, a South African province, in 2007.

The literature indicates that child sexual abuse is as prominent in rural areas as it is in urban areas. Twenty-five per cent of girls in the rural areas of South Africa are reported to have had sex against their will (Slovak and Singer, 2002).

Maree and Ebersohn (2004) state that one in every three girls and one in every five boys is abused during childhood. A recent study in Gauteng showed that 80% of abused children at one hospital were girls, 7% were under three years old, and 55% under ten. Thirty-eight percent of perpetrators were biological family members while 66% were not family members. Traumatization through child abuse is one precursor that should be central to the investigations of child's needs (Tami, 2005).

According to Kevin (2003) and Lalor (2004), between 229 and 240 cases of child sexual abuse in a children's hospital in Cape Town were attended to in 2003. Most of the abused children in this hospital were under 15 years of age. A large percentage of those children had contracted a sexually transmitted disease.

According to Lalor (2004), 54% of secondary school girls are sexually abused by people who are older than they. According to the survey done in 414 secondary schools in Limpopo, a province in South Africa, girls younger than 14 years are sexually abused. Sixty-five per cent of the 414 respondents had experienced oral, anal or vaginal intercourse or had fingers or objects placed in their anus or vagina.

In November 2000, after a 4-year-old child was raped in the school premises in Uganda, a community meeting was called. The school principal was one of the

speakers invited to address the community on the issue of child sexual abuse. As a result of the meeting, a group of volunteers came together to form an organisation called Community against Rape and Abuse. Educators agreed to help in establishing this organisation that formed the beginnings of the community education programmes (Arbeiter, 2002).

The South African Medical Research Council reported in 2000 that half of all school girls were forced to have sex against their will by their educators. Educators appear to be the major perpetrators of child sexual abuse. The minister of education in the Western Cape Province reported that many cases involving sexual abuse by educators had been reported (Coombe, 2000).

The media reported that a child was raped and killed in Cape Town by her mother's boyfriend and the body of the child was found in the ceiling of the house. Incidences of the disappearance of children in Cape Town were reported in 2006 and 2007 by both the SABC and the press. The South African Medical Research Council reported in 2000 that many schoolgirls are forced to have sex against their will by one third of their educators (Coombe, 2000).

According to a report in Daily Sun (2009), children were sexually abused by their educators in the province of KwaZulu-Natal. The four educators were brought to the court of law. It was also reported (2008), that an 11-year-old-girl was raped several times at gunpoint by her educator. This incident took place in Mpumalanga.

Police and media reports indicate that child abuse is a common occurrence. In addition to the media reports, organisations such as the Victim Empowerment Group collaborate with police in cases of child abuse, more especially in Limpopo Province (Victim Empowerment Report, 2006).

1.2.3 The Limpopo province of South Africa

Limpopo is one of the nine provinces of South Africa. This province, which is comprised of the Capricorn, Greater Sekhukhune, Waterberg, Mopani and Vhembe districts, is situated in the far north of South Africa. Incidents of child abuse are reported now and then by both the police and the media. In Limpopo, victim empowerment groups are represented in all police stations. Such organisations provide trauma support and counselling services to the victims of violence and crime. These organisations focus on the empowerment of victims.

The media reported (Daily Sun in 2008) that eight children were raped and killed on Modimolle Mountain in Limpopo. The perpetrator was apprehended in 2010 after killing more than 10 children; their bodies have still not been found. It was also reported that on 27 August 2008 a four-year-old child was found dead in Seshego Zone 3 after she had been raped. In Tzaneen a child was sexually abused by one of her educators in 2007.

Child abuse as a global social problem is causing increasing concern in South Africa, and more especially in Limpopo. Although all levels of government are strongly concerned about child abuse, it continues unabated. The question is: How can the communities be empowered to reduce child abuse?

1.2.4 The Vhembe district of Limpopo

The Vhembe district is made up of four municipalities: the Mutale, Mussina, Makhado and Thulamela municipalities. In this district, which is situated in the far north of Limpopo, child abuse is still a serious social problem. Between 2005 and 2006, three children were raped and killed in Tshivhiludulu Village, two in Madala Village, and

two in Tshedza Village. Two children were also raped and killed in Makonde Village in 2007. According to the reports from some of the victim empowerment organisations in Vhembe District (Victim Empowerment Report, 2006-2011), child abuse is a serious problem in this area. The numbers presented in Table 1.1 below indicate the occurrence in this particular district.

Table 1.1: Statistical report for child sexual abuse in the Vhembe District of Limpopo

Month	Number of child abuse cases	Case
March 2006	10	Rape and assault
April 2006	16	Rape and assault
May 2006	12	Rape and assault
June 2006	8	Rape and assault
July 2006	9	Rape and assault
Feb 2008	8	Rape and assault
April 2008	6	Rape
July 2008	10	Rape and assault
Sep 2008	9	Rape and assault
Jan 2009	19	Rape
Feb 2009	5	Rape and assault
Mar 2009	20	Rape

Apr 2009	23	Rape
Sep 2009	6	Rape
Mar 2010	6	Rape and assault
Jun 2010	18	Rape and assault
Jul 2010	20	Rape
Nov 2010	21	Rape and assault
Mar 2011	10	Rape
Apr 2011	5	Rape and assault
May 2011	12	Rape and assault
Aug 2011	14	Rape and assault
Sep 2011	13	Rape and assault
TOTAL	225	Rape and assault

(Source: Victim Empowerment Report 2006-2011)

The data provided in Table 1.1 above are reported cases, but there are many unreported cases that make child sexual abuse a major problem in the Vhembe District of Limpopo. This study focused on child sexual abuse and the role of community education in promoting community participation in the reduction of the problem.

1.3 PROBLEM STATEMENT

Child sexual abuse is a community-based problem which could be addressed by the

entire community if community education were to play a role in motivating community participation in the reduction of child sexual abuse. The question is: In what way could community education motivate the community to participate in the reduction of child sexual abuse?

1.4 THE AIMS AND OBJECTIVES OF THE STUDY

The following aims of the study were identified:

- To encourage community participation in the reduction of the problem
- To educate the community about child sexual abuse

The objectives of the study were the following:

- To document the participants' experiences of child sexual abuse
- To generally improve the quality of life of the community members

1.5 RESEARCH QUESTIONS

The research questions related to this study are:

- What strategies can be employed to get communities involved in the reduction of child sexual abuse?

Sub-questions that guided the study are:

- What programmes can promote community participation?
- Which strategies are the community familiar with?

1.6 SIGNIFICANCE OF THE STUDY

The ultimate result of the study will be the improvement of the situation in which child abuse takes place. The study will also enhance the understanding of the practice of child abuse by the practitioners of child sexual abuse and help to improve the situation. It is obvious that this study can stimulate and guide change.

It is believed that this study will effect change or transformation that will be part of the solution. It will make change a self-generating and self-maintaining process that will continue after the research has been completed. As participatory research, it will motivate those directly involved.

1.7 LIMITATION AND DELIMITATION OF THE STUDY

Some of the community members responded negatively to the abuse screening questions: they did not want to cooperate with the researcher; they discouraged each other from participating and documents about participation of the community in the reduction of child sexual abuse was inadequate. The study was limited to South Africa, with special attention being given to Limpopo, specifically the Vhembe District of this province, with special focus on the Khakhu area and the surrounding areas such as Dzamba, Nzhelele, Sheshe, Thononda, Tshiavha, Tshiendeulu and Tshixwadza. The study focused on the participation of the community in reducing child abuse; more especially sexual abuse.

1.8 SYNTHESIS

This chapter describes the background to the problem. The background to the problem includes the conditions related to child sexual abuse; both before and after

the new democratic South Africa was established. This chapter also highlights the significance of the study and presents the aims and objectives of the study.

CHAPTER TWO

THEORETICAL FRAMEWORK

2.1 INTRODUCTION

In studying the theories related to this research, books, encyclopaedias, dictionaries, articles, conference proceedings, government publications and dissertations were consulted. Although the study focused on theories from 1989, the 1999-2007 theories are predominant as they are more relevant to the contemporary situation. The focus is on the role of community education in promoting community participation in reducing child sexual abuse. The theories that were reviewed allude to child sexual abuse as being a community-based problem. According to these theories, there are many ways of encouraging the community to participate in reducing child abuse.

2.2 CONCEPT CLARIFICATION

The concepts that are used in this dissertation are clarified below. It was deemed necessary to clarify the concepts because child abuse is a broad concept of which child sexual abuse, which formed the focus of the study, is one aspect.

2.2.1 Child abuse

According to Chamber (1990), child abuse refers to the maltreatment of the child by any person, irrespective of their relationship. The child is physically, emotionally, sexually, psychologically or economically maltreated. The abuser is more likely to be an adult person.

Child abuse is a broad concept, but in this study the focus was on the sexual abuse of children and related forms of abuse.

2.2.2 Child sexual abuse

According to Wattam, Hughes and Blagg (1997), child sexual abuse refers to the involvement of dependent, developmentally immature children and adolescents in sexual activities they do not truly comprehend and to which they therefore cannot give informed consent. The sexual abuse of children is not a series of isolated acts but is found within the complex community.

Child sexual abuse is defined as the use of excessive physical force in involving children in explicit sexual acts. The area of sexual abuse has expanded to include all cases where children are used to satisfy adult desires, including child pornography (Lauer, 1989).

Child sexual abuse is as prominent in rural areas as it is in urban (Slovak and Singer, 2002) the levels of child sexual abuse in rural areas are not different from those in urban areas. Child sexual abuse as a global social problem is causing increasing concern in South Africa and more especially in Limpopo.

The literature that was reviewed alludes to child sexual abuse as being a community-based problem. The Vhembe District of Limpopo reports that incidents of child sexual abuse occur regularly. The community has recommended that for the problem to be addressed, they have to become a partner in the initiative to seek solutions. It has been suggested that community education programmes could help the Vhembe District community in dealing with child sexual abuse. In this research the researcher investigated, through a participatory action research process, how the problem of

child sexual abuse can be tackled by means of a community education programme.

In this study, child sexual abuse refers to the use of a dependent, immature and unanswerable child to satisfy the sexual desires of an independent, mature and answerable adult person. This occurs without the consent of the child concerned.

2.2.3 Community

According to Jarvis (1995), a community is a group of people who live in the same settlement and share a common interest, the same culture and the same tradition. Collins (1999), defines a community as a group of people sharing the same culture, religious, ethnic or other characteristics, and has the same political boundary. According to Harris and Willis (1993), a community is a form of a neighbourhood interest group that consists of people within the same political boundary, municipality or social unity; implied within such a group is a degree of common interest among its members. Johnson (2000) defines community as a collection of people who have something in common. It can be a collection of people who do related kinds of work.

Hemingway (2000) and Haralambos (1998) point out that a community can be formed by different people from different areas on the basis of ethnicity, racial origin, religion, political beliefs, occupation or friendship, or who share a common interest.

The concept of community implies an element of togetherness, common interest and political boundary, which separates one community from another. Their choice of locality has been influenced by the same motives, their behaviour is determined by the same norms and values, and certain emotional bonds link the members of a community. For this study, the term 'community' refers to a group of people who live in the same political boundary and share common interests, the same culture,

traditions and beliefs.

2.2.4 Lifelong learning

The term 'lifelong learning' refers to the form of learning that improves the quality of life through classroom or outside classroom activities (Alan, 1996). Chamber (1990) defines lifelong learning as learning that lasts throughout life.

Walter and Manicon (1996) see lifelong learning as another way of describing educational endeavours and opportunities that are offered after the end of formal schooling. It is thus interchangeable with the terms 'adult education', 'careers education' or 'recurrent education'. These authors state that lifelong learning is an extension of the deliberate and planned intervention characteristics of education.

This learning is indicated by different activities, which ultimately result in an improvement in the quality of life; therefore, lifelong learning and community education cannot be separated but can only be distinguished. They both support the beliefs that people of all ages can learn and change. They are all similar in definition.

2.3 CONCLUSION

The above-mentioned concepts form the core of this study. Child sexual abuse – the problem that was explored in this study – is a community-based problem. Child sexual abuse occurs in both rural and urban areas, in wealthy as well as poor families. As mentioned earlier, child sexual abuse is the use of an innocent, dependent child to satisfy the sexual desire of an irresponsible, independent adult. A collective effort is needed to address this problem since it occurs in all communities.

There are previous researchers who conducted research on child sexual abuse and

community education in other countries. The researcher used the previous studies as sources of reference.

2.4 THEORETICAL VIEWS ON CHILD SEXUAL ABUSE AND COMMUNITY EDUCATION

Some of the theories related to child sexual abuse and community education are explained below.

2.4.1 Introduction

In the literature, there are many theories on child sexual abuse and community education. Some of the theories on child sexual abuse and community education are briefly discussed below and the concept 'community education' is explained. The concept 'child sexual abuse' has already been clarified (see 2.3.1).

2.4.2 Community education

According to Jarvis (1995) community education refers to any planned series of incidents, having a humanistic basis, directed towards the people in a specific locality, as they learn and understand how to enrich the quality of human relationships and the quality of life of the citizens of that area.

Community education involves a way of viewing education in the community; a systematic way of looking at people and their problems. It is a type of education that should be relevant to people's needs and as such, those affected by education should be involved in decisions about the programme (Sharon and Phyllis, 1987).

According to Merriam and Brockett (1997), community education refers to any formal or informal action-oriented or problem solving education that takes place in the

community. The seeds of the solution to a community's problems are contained within that community (Poster and Kruger, 1990).

Community education is the process that achieves a balance in the use of all the institutional forces in the education of all people in a community (Seay, 1991). Fellenz and Coke (1979) define community education as the process of identification of community needs and the marshalling of resources to meet those needs so that the community and all its members can grow through social and educational programmes.

Community education refers to the developing of self-guiding, self-directed communities which are able to identify and satisfy the needs of all their community members through coordination, cooperation and collaboration of all community resources (Boucouvalas, 1979). According to Zitha (1991), community education is the educational process in which the provisions of all the educational agencies in a community are utilised in a cooperative and coordinated manner to provide for all the people of a community in order to develop the community and to solve the problems of the community.

Community education refers to any activity – planned or unplanned – that can improve the quality of life of the members of the community. This activity will enable community members to contribute towards the solution of any social problem.

For this study, community education was seen as any educational activity or programme which is aimed towards the improvement of the quality of life of the community members through community participation. In the process of community education, the community can identify a problem and contribute to solving the problem.

Community education is a theoretical construct of viewing education in the community, a systematic way of looking at people and their problems. The people affected by education should be involved in decisions making about the programmes. This type of education should have an impact on the community it serves. Community education serves the entire community by providing for all the educational needs of all its community members. Local schools together with community resources can be used for community education to improve community life. Those who are worthy community educators facilitate the process (Sharan and Phyllis, 1987).

It is the responsibility off the entire community to establish community education. The community alone cannot sustain such education; therefore the Government should support community education. Non-profit organisations and local schools should support community education in a particular community (Sharan and Phyllis, 1987).

2.4.2.1 *The framework for community education*

Community educators should design their own learning environments according to the needs of the community with the assistance of information technology and multi-media systems. They should adopt a flexible approach to content options. Community education should provide for the recognition of prior learning, experience and the upgrading of knowledge. The training programmes must accommodate the working conditions of potential community members. The conceptual framework for community education provides for the accommodation of many views (Aulich, 1992).

Community education should be dominated by intervention. This implies that every community member is part of the process; therefore each community member can change the process or stop it if the situation demands. This should provide new

alternatives or answers to the problem. Community education should empower community members (Aulich, 1992).

2.4.2.2 *The content of community education*

The content of community education should include main themes such as the following (Aulich, 1992):

- Adult learning and development – This refers to Lifelong Learning, adult learning styles and practices of adult learning and adults with special needs.
- Curriculum studies – This refers to the training methods and techniques, needs analysis, assessment and evaluation techniques.
- Social context – This refers to social challenges facing organisations, such as unemployment and attitude towards unemployment.
- Organisational behaviour – This refers to understanding participants such as their role in community education; organisation and group processes; and working within one's role in an organisation and its direction.
- Administration and management related studies – this refers to total quality management, quality assurance, human resource management, principles and practices and project management.
- Current issues – This refers to educating people in rural and remote areas, and the implications of the national policy reform agenda.
- Communication and information technology – This refers to open learning techniques.

According to Aulich (1992), content alone is not enough without responsibility.

Therefore community educators, government departments, tertiary institutions, industry and professional organisations are responsible for community education.

2.4.2.3 *The aims and purposes of community education*

The aims and purposes of community education are usually determined by a particular context and culture. Aulich (1995) contends that the aims of community education are based on two premises: (1) the community has its own needs and common causes and is the creator of its own culture; and (2) educational resources are to be dedicated to the articulation of needs and common causes.

According to a Scottish approach to community education, the following two aims are identified (Scottish Education Department, 1997):

1. The involvement of people as individuals and as members of groups and communities, irrespective of age, gender and circumstances in the ascertainment and assessment of people's needs opportunities to:
 - discover and pursue interest;
 - acquire and improve knowledge and skills;
 - recognise their personal identities and aspirations;
 - develop satisfactory interpersonal relationships;
 - achieve competence in their roles within the family, the community and society as a whole; and
 - participate in the shaping of their physical and social environment and in the conduct of local and national affairs.

2. To seek to meet ascertained needs in the most appropriate settings with the cooperation of individuals and groups and by identifying and deploying educational resources.

Seay (1991) highlights the following aims of community education:

- generating a learning society;
- developing communities;
- solving problems;
- improving the quality of life;
- effecting the self-actualisation of the individuals;
- fulfilling human needs including learning needs; and
- providing for lifelong learning.

According to Sharan and Phyllis (1987) the following are the objectives of community education:

- to develop community programmes;
- to promote interaction between school and community;
- to survey community resources and to coordinate their interaction;
- to bring better relationship between social and Government agencies;
- to identify community problems;
- to encourage community developments and
- to provide training in community education.

Community education differs from community to community as well as from aim to aim of community education. The community decides on the type of community education that should be established.

2.4.2.4 Types of community education

The type of problem in a particular community dictates the type of community education to employ. The various types are briefly outlined below.

A participatory programme: This type of programme is one that has an impact at the individual, community and societal level. At a community level it results in the creation of new leaders. This type of programme is also known as a self-empowerment community education programme (Young and Padilla, 1990).

Community education that caters for training, information and entertainment: This type involves activities and projects that enrich the lives of the participants and provide avenues for others to exercise initiative and enterprise. The community-centred cultural education for blacks, which was started by the University of Natal (Van Graan, 1991), is one example.

Community education that focuses on attempts to educate the community on AIDs: This type refers to community-based AIDs programmes (Bersani, Chen, Pendleton and Denton, 1992).

Community education focusing on environmental education: This type of programme aims to make a positive contribution through educating the community education in environmental matters. It can enhance conservation at a much broader level (Todd, Dale and Johnson, 1994).

Community education focusing on museums and zoos: This refers to education that empowers the community to serve museums and zoos. The museum can address the cognitive needs of the community (Van der Stoep, 1990).

For this study, a participatory programme of education was employed together with community education that focuses on the attempts to educate the community on child sexual abuse. The type of education can also be influenced by the factors that are related to the problem.

2.4.3 Factors related to child sexual abuse

In order to be successful in the study, the researcher needed to determine the factors that contribute to child sexual abuse.

In some places, the raping of infants is related to the belief or myth that if someone with a sexually transmitted disease or infection, such as HIV/AIDS, has sexual intercourse with a virgin, the individual will rid himself of the disease or infection. A study done by Seuten (2002), at the Red Cross Children's Hospital in Cape Town confirmed this belief. Some adults believe that deaf children cannot become infected and such children are likely to be targeted for cleansing purposes (Cloete and Wissink, 2000).

The cleansing theory exists throughout Africa. Older men are strongly convinced that having sex with a child will cleanse them from HIV/AIDS. This is a theory that has not been researched or proved, it is just a belief of which most Africans are totally convinced.

The researcher agrees with Cloete and Wissink (2000) and Seuten (2002) that children are often sexually abused by people who believe that this is another way of

getting rid of HIV/AIDS. This is a belief which an individual alone cannot fight against but the entire community can help in combating this belief which is predominant in many rural communities.

The belief that intercourse with children cleanses one from HIV/AIDS is strongly predominant in African community. Most of the victims are stepchildren whose mothers remain silent about their abuse in order to sustain their marriages (Geoff, 2002). They speak to neither the members of their community nor the police. Most of the incidents occur in the families of parents who consume alcohol ('drinking parents'). The problem of HIV/AIDS has caused frustration and confusion in both families and the community at large. Level of education has an influence on the belief in the cleansing of HIV/AIDS through intercourse with children (Boehm and Itzhaky, 2004).

Although children are abused even in their homes, mothers do not want to break the silence in order to protect their marriages. This suggests that outside their homes the abuse of children is worse.

Lalor (2004) claims that child sexual abuse is due to the ignorance of individuals and families from sense of community, the result of increased mobility and the disintegration of neighbourhood, communities and kin networks. Shepard and Pence (1999) indicate that child sexual abuse occurs where the relationship between parents has turned sour. Children suffer from the consequences of the ensuing domestic violence. In Duluth in the USA the Domestic Abuse Intervention Project (DAIP) was initiated in 1980 to deal with child sexual abuse. Communities in the USA, Scotland, New Zealand and Germany adopted Duluth's community intervention model.

Child sexual abuse often occurs in a family where the man feels sexually frustrated by his partner but cannot break away because of his own emotional immaturity. In addition to the frustration, deviant sexual attitudes and behaviour may be generated in the children of sexually abused parents (Porter, 1989). According to Posel (2001), there are educational programmes that legitimise and glorify violence in the society and family; those that do not promote social norms, values and expectations.

In families without peace and harmony, children are likely to be abused. The child hardly knows who to turn to for help in such a situation. Even if neighbours notice the abuse they may attribute it to the disintegration of the family and prefer to remain uninvolved. Therefore the disintegration in the community is promoting child sexual abuse.

Mannah (2002) indicates that there are parents who believe that they could make money by having girls at home. Most of the children from poor homes are encouraged to have a relationship with their teachers by their parents in order to get food to eat. This puts most of the girls at risk of HIV/AIDS. Many teachers feel it is in order to have a relationship with learners. Children who are engaged in sex are seen as coming from bad homes with bad parents who do not care and who are irresponsible.

Child sexual abuse is also related to the family's responsibilities or support. According to Seedat, Dunces and Lazarus (2003), child sexual abuse usually occurs where the parents fail to support their children. A recent investigation of sexual abuse of children in Durban indicated that sexual abuse cases are reported more in rural clinics than in urban clinics.

The researcher agrees with Mannah (2002) and Seedat, Dunces and Lazarus (2003)

that there are parents who do not fully support their children. Some even encourage them to bring back money or food gained through sexual abuse. That is one of the reasons for high child sexual abuse in rural rather than in urban areas.

According to the theoretical framework, there are a few factors that are related to child sexual abuse. There are a few community education programmes used to reduce child sexual abuse. Some of the related factors are the community's lack of proper social norms and values which contributed to child sexual abuse. The theoretical framework indicated that the problem under study occurs in both rural and urban areas.

2.4.4 Some damaging norms that contribute to child sexual abuse

Each community has values and norms that influence the philosophy of life of community members. Some of these norms and values endanger the life of children. A few of the norms that contribute to child sexual abuse are indicated below:

- *Traditional male roles*: This refers to a situation where society promotes domination by man and the exploitation, control and depression of girls.
- *Limited female roles*: This includes the sexualisation of childhood, where people are sexualised through the media and marketing setting at an early age.
- *Power*: Traditional power expectations promote the notion that children should be seen and not heard, making them an especially vulnerable community.
- *Violence*: This refers to situations where aggression is tolerated and accepted as normal behaviour and can be used as a way to solve problems and get what one wants.
- *Privacy*: This refers to the privacy of norms associated with individuals and family.

Sexual violence against children is stigmatised and anybody who wants to witness will be discouraged (Brown, Cohen and Lyles, 2009).

All sexually abused children have the same perceived level of self-concept, social support or traumatic symptoms. It has been found that sexually abused children who had a positive self-concept had higher perceived levels of social support (Reyes, 1996).

It is clear that these damaging norms prevail in the community under study. The traditional male domination, power domination and limited female influence are evident.

The damaging norms which are mentioned in the theoretical framework are among the factors contributing to child sexual abuse in the community under study. It appears that earlier researchers did not give much indication of how damaging norms and values can be addressed in order to reduce child sexual abuse. It is believed that the current research can offer possible strategies to address the problem.

Some of the theories related to child sexual abuse and community education are explained below.

2.4.5 Some theories on child sexual abuse and community education

Educational programmes that reduce child sexual abuse and neglect include those programmes aimed at eliminating norms that legitimise and glorify violence in society and the family. Those that promote anti-sexist norms, values and expectations break the cycle of violence in the family by teaching alternatives to violence as a way of controlling children and managing conflict (Campbell, 2002).

In Boehm and Itzhaky's study of the Jewish community in Israel (2004), it was found that the community was reluctant to support the abused child and even to report the incidents to the police. A multidisciplinary team of professionals was established in the community and it started its activities by developing the community's attitude to the sexual abuse of children. The victims and other members of the community then began to expose child abuse which would be dealt with by the court of law (Erik, 2005).

According to Boehm and Itzhaky (2004), community-based programmes were initiated in Israel. The programmes focused on developments in the community's attitude to sexual abuse, especially with regard to reporting child assault and rape and seeking and accepting recruitment. Through the introduction of an alternative community dialogue that advocated reporting and treatment, a change was brought about among the community leaders and some community members. This resulted in a rise in the number of reports of people in treatment.

The researcher agrees with Boehm and Itzhaky (2004) and Erik (2005) that if the community is reluctant to report child sexual abuse, an open community dialogue could be very useful. These authors argue that the attitude of the community towards child sexual abuse should be changed through the establishment of community education programmes.

Informal support networks are improved by child sexual abuse programmes at all levels of prevention. Families are empowered to overcome this social problem. Knowledge and information can be sufficient to bring about behavioural change in both parents and children. Community education could develop programmes that promote attitudes that challenge violence and sexism and also those that develop

pro-social interpersonal skills (Macdonald, 2001).

Child sexual abuse programmes at all levels of prevention improve informal support networks through which families are empowered to overcome this social problem. However, knowledge and information can be sufficient to bring about behavioural change in both the parents and the children. Community education should develop programmes which will promote attitudes that challenge violence and sexism, as well as pro-social interpersonal skills (Macdonald, 2001).

Comprehensive child development programmes support children through a number of core services for families. Some examples of such programmes are early childhood education and development services for preschool children, early intervention for development delays or disabilities in children, nutritional services for children's families, child care that meets state licensing standards, child health services, prenatal care for pregnant women, mental health services for children and adults and parental education in child development (Smith and Lopez, 1998)

According to Sebastian (1998) community family partnership programmes in Northern Utah have provided comprehensive services to families living with sexually abused children. The programme provides family support to lower the level of child sexual abuse and neglect. A community-oriented response to sexual abuse is required if one of the largest social problems facing people today is to be effectively challenged (Canadian Centre for Justice Statistics, 2005).

According to Matthew (2003), the Triple P (positive parenting programme) is described as a universal parenting initiative of the community as a whole. Interventions range from the organisation of community education to intensive family interventions for parents where parenting problems such as child sexual abuse are

predominant. Several issues concerning the role of training and organisational factors that reduce child sexual abuse and implementation of the programme are discussed.

According to Platt and Shemmings (1997), the participation of parents in child protection conferences is considered to be significant in the process of dealing with child sexual abuse. Such conferences should be organised by professionals who will also involve parents in the programme, and parents should be involved in all the planning so that they participate fully in the conference. Parents will not feel that they have had full participation in a conference if they have not been involved from the start. Furthermore, children should also be involved in the conference. In the conference parents will learn how to protect their children and why they should do so.

It is important to change the attitude of the parents towards child sexual abuse because the home is the place where the child is expected to get full protection. However, children are often no longer comfortable in their homes since parents are often the perpetrators. Therefore parents should be involved in any community education programmes, including positive parenting programme. If parents can be involved in the planning of the programmes, it is possible for families to change.

In the USA, it was proved that strategies involving spirituality, community support, activism, creativity, confrontation, introspection, humour and safety precautions are very important in order to deal with child abuse. Child improvement in abuse-related outcomes was associated with post-traumatic stress disorder and adjustment at intake (Bryant, 2005)

Most of the sexually abused children in the USA and Canada have been helped by the churches. The contact between the churches and abused victims is mediated

through the informal network of women's groups that operate at the parish level. It was clear that church women understood these ongoing acts under the umbrella of Christian Social Action (Clark, Cary, Diemert, Ceballos, Sifuentes, Atteberry, Vue and Trieu, 2000).

The researcher agrees with both Bryant (2005) and Clark et al (2000) that spiritual involvement is of paramount importance in the reduction of child sexual abuse. Churches should have programmes which include matters pertaining to child sexual abuse, and such programmes should be open to any community members. The introduction of Sunday school programmes should be promoted by both churches and community members.

Richter (2005) contends that community intervention is essential in dealing with child sexual abuse. However, the community needs participatory education workshops that include information about child sexual abuse and neglect. The programme for the workshop should also include ways through which women and the youth can be offered psychological support. Such programmes also contribute to creating an atmosphere of trust, openness and empathy between community members and therapists. Strong networks among various organisations in the community need to be established in order to deal with child abuse. In addition, the principle of community development lies at the heart of effective intervention since community education could minimise the occurrence of child sexual abuse. In community education, the community needs to own a problem and must be determined to be involved in addressing it.

After the rape of a child in Louisvalebweg in South Africa, the community wanted to find a way to educate community members so that they could respect the rights of

children. The myth about virgin rape being a cure for HIV was discussed. Most of the community members were interested in community education and showed that they were ready to report any sexual abuse to the police (Richter, 2005).

The researcher supports Richter's (2005) view that the community should be educated on child sexual abuse. Any community education programmes should address the question of the virgin rape myth which is putting children in danger. This problem can be addressed successfully through community education (Richter, 2005).

According to Richter (2005) and Barsk (1999), community education is required in dealing effectively with child abuse. For this purpose, the community needs participatory education workshops that include information about child abuse and neglect. The programme for the workshop should include ways through which children can be offered support. Strong networking between various organisations within the community needs to be implemented in order to deal with child abuse. In community education, the community will have to own a problem and be determined to address the problem.

The researcher agrees with both Richter (2005) and Barsk (1999) that community education is an important strategy in reducing child sexual abuse. If the community owns the problem, the community itself will be successful in reducing the problem. The fact that the community needed participatory discussions or workshops motivated the researcher to have discussions and interviews with the community stakeholders; hence participatory action research was chosen because the researcher is also from the community under study and is familiar with the community.

According to a study of Chinese adults in China by Catherine (2004), child sexual abuse prevention programmes were initiated with an intention to encourage community participation in the reduction of the problem in Shenzhen. Participants who showed a definite intention to participate in the programmes endorsed fewer myths in relation to child sexual abuse and showed more worry about children being at risk of sexual abuse.

It was realised that there should be a coordinating child sexual abuse service in rural communities since this would enable the community to tackle the difficult issue of integrating a systematic way of treating victims of child sexual abuse and their families in rural areas. Consequently, the Rural Child Sexual Abuse project was established with the aim of providing training to local community service agents to respond in all phases of intervention and treatment (Terri, 2004).

A community partnership team was created to address the problem of child sexual abuse victimisation in the rural, northeast corner of Connecticut more effectively. A multidisciplinary team was formed to improve collaboration between agencies serving victims of sexual abuse. Most of the participants felt quite positively about the process (Loris, 2004).

The researcher believes that there should be community education programmes for supporting the victims of abuse. In such programmes strategies to treat abused children should be discussed.

Community education also provides family services in a non-traditional setting. Non-traditional settings often have the benefit of allowing the practitioner to sidestep cumbersome intake procedures commonly used in clinical settings. Through community education, families are easily reached before a significant problem

develops (Ragg, 2006).

Culjpers (2005) argues that community education should develop programmes that would lead to the prevention of child sexual abuse, especially in the case of children who have been abused by problem drinkers. In the programmes, common aspects such as the following issues should be discussed:

- *Social support*: This refers to the group interventions in which mutual support and an exchange of experiences are basic elements.
- *Information*: This refers to the information about alcohol use, problem drinking and the consequences of parental problem drinking for their children.
- *Skills training*: This refers to the teaching of skills to participants and helping them to deal with the problem they are facing. It includes how to react when parents are drunk, how to deal with conflict and fights at home and how to use problem solving skills.
- *Coping with emotional problems*: This refers to the discussion of the emotional and psychological problems caused by parents.

The parent and child programmes should be conducted concurrently where the groups merge and put into practice what they have learned.

According to the study on social capital by Putman and Kawachi (2003), social capital has positive outcomes with regard to child sexual abuse. It is reported that communities that score high on social capital tend to have fewer children at risk. Social support involves social networks, norms and social trust that facilitate coordination and cooperation among community members. This includes community activities which bring a community together to reduce child abuse. It also refers to the

extent to which people volunteer, involve themselves in civic activities and are willing to help one another, thus enabling the community to reduce child abuse. Civic engagement was measured by involvement in community groups and organisations. Both social capital and social support play a prominent role in reducing child abuse (Saluja and Kotch, 2003).

According to the Human Sciences Research Council, educators, parents, learners and community members should be aware of the child abuse problem and they should have knowledge of preventing child abuse in schools and in community. In order to be successful in fighting against child abuse, community members should also have an understanding of child abuse and beliefs. Everybody is encouraged to report child abuse incidents. The community needs to draw up policies and procedures to deal with the problem. As part of community education, the implementation of policies and procedures need to be discussed. In these discussions, guidelines should be set for identifying different kinds of child abuse; step-by-step procedures for dealing with all cases of child abuse should be put in place; and structures including committees, reporting lines and community member and educators' responsibilities should be established (Edleson, 2004).

Obviously, all community stakeholders such as parents, educators, learners and other community members should be involved in the fight against child sexual abuse (Edleson, 2004). That is the reason why the researcher collected data from educators, nurses, social workers, church leaders, the civic group, the police, traditional leaders and the Victim Empowerment Group (see Chapters 3 and 4).

A multidisciplinary team approach to child sexual abuse is preferred as one of the ways that could reduce child sexual abuse through participatory action by the

community members. There is a shift of the meanings of childhood and constructions of sexually abused children, and the structuring of team practice poses problems for multidisciplinary team members. In order for any programme of this nature to be successful, understanding child sexual abuse and developing community-based practice approaches must be informed by broader perspectives (Maxine, 2001).

According to a case study in a Midwestern USA community, the community approach to case management of child sexual abuse was adopted. Both case process and outcome variables were examined by the community. Community education was based on the outcomes of the criminal court files. It was concluded that communities can achieve successful outcomes when criminal prosecution of sexual abuse is sought. However, a child's testimony is not necessarily the centrepiece of a successful case (Coulborn and James, 2000).

According to Platt and Shemmings (1997), a programme in which children will be actively involved should be organised in the community in order to protect children. Listening to children and hearing what they have to say is at the root of developing effective human rights for children. It challenges the protectionist view that it is not fair to involve children in difficult decision making, particularly because they may be involved in considering some painful or upsetting outcomes. Children who are more informed are likely to be less vulnerable. They should have information about the child protection system and the possible outcomes and options to increase choice.

Community education was organised by Colleen in Dublin in 2002. The education programme was organised to benefit parents of infants and toddlers by alleviating parental stress and improving parent-child interaction. The effects of the programme were evaluated in terms of improvement in reducing child sexual abuse through

community participation (Colleen, 2002).

According to David (2003) it is better to prevent unwanted outcomes than to repair physically and emotionally harmed children and relationships. He describes the Triple P (positive parenting programme) as an example of a community-based approach. This programme is based upon a range of social learning, information processing and ecological perspectives. Although there are cultural differences between children and families in communities, many aspects of child sexual abuse seem to be very similar. Therefore, the community should organise educational programmes to address the child sexual abuse problem. Several issues concerning the role of training and organisational factors need to be taken into account.

The effectiveness of programmes in promoting family wellness and preventing child sexual abuse depends on factors such as meta-analysis, employing a 3-step model testing procedure. Battams and Roche (2000) found that effect sizes for proactive interventions were larger at follow-up than at post-assessment, while effect sizes for reactive interventions were higher at post-assessment than at follow-up. Intensive family preservation programmes with high levels of participant involvement, an empowerment and a component of social support, had higher effect sizes than programmes without those elements.

In Athens-Clarke county and Georgia a formative evaluation of a child sexual abuse response team (CSART) was used. The purpose of the formative evaluation was to determine the congruence between the conceptualised collaborative objective of the CSART and its actual implementation during the first year of programme activity. The implementation of the community-based collaborative objective was found to have been achieved in a non-disruptive manner and to have been highly congruent with its

conceptualisation. A greater congruence between conceptualisation and implementation of the collaborative objective resulted from the CSART members participating in the evaluation process (Michelle, 2000).

A project was launched in Canada through the collaboration of various agencies in health, social services and law enforcement sectors focusing on preventing child sexual abuse and neglect through family support and programming. The community-based approaches, the multidisciplinary composition of the team, the ability to seek services when needed, the immediate of response times and the availability of support during stressful times were all aspects of the project that clients found beneficial. The most beneficial aspect of the project was the informal support received from team members who were accepting, not threatening, and nonjudgmental. Team members found that the collaborative approach made access to services easier for clients, particularly for those who were more socially isolated (Judee and Harrison, 2005).

The researcher agrees with Judee and Harrison (2005) that teamwork in which nurses, law enforcement agencies, social workers and other community stakeholders participate is important in establishing a project in which community members can be trained on good parental approaches.

Arnold and Cloke (1998) contend that child friendly communities should be created in which children and young people feel loved, valued and listened to, and their needs are to be effectively met. It is indicated that such communities are important for the prevention of child sexual abuse and all related forms of abuse. It is only in such environments where children and young people will feel free to take action regarding their concerns, including child abuse. Consideration is given to ways in which

communities are currently hostile or unfriendly towards children and how these factors can be overcome.

Preventative activities and services for teenagers are concentrated in three after-school centres that maintain afternoon, evening and weekend hours in New York. Young employment services are also offered in the summer time and counselling services for the youth – more especially for the victims of rape – and families are available from the centre. Children and parents are equipped with skills to reduce the isolation of parents and children. The centre also works toward improving the lives of families and children through community-building activities (Burt and Resnick, 2005).

Child abuse prevention programmes are to present different strategies for preventing child sexual abuse. Such strategies include the development of parental capacities through training in child-rearing and child care, and the elimination of possible social isolation of families through community intervention services (Cabanillas and Morales, 1996). Although the literature suggests that some programmes to prevent sexual abuse and bullying are at least to some degree effective, their impact has been reduced by a failure to encompass adequately the various influences that operate across different domains of the child's life at different stages of their development (Cox, 1999).

McFarland (2005) describes community education programmes in Colorado that used a variety of methods to promote healthy parent-child relationships and raise the community's awareness of its responsibilities to children. The outcomes of the community programmes in Boulder county and programmes in other communities that seek to prevent child sexual abuse and improve parenting were also discussed. It was concluded that such community programmes play a fundamental role in

reducing child sexual abuse.

A collaboration of non-profit health and human services organisations was formed in Boston to develop a community-based model to prevent and reduce child sexual abuse. The cooperation among different services agencies developed new programmes that met more community strategies to deal with child sexual abuse (Saunders, 2005). Chadwick (1999) points out that each unique community needs its own plan and process, including a community education plan to involve all community members.

In the UK, a Council of Europe fellowship was established to manage and deal with child sexual abuse in a community setting. Aspects discussed included organising community education training of staff, assessment of abusers, methods of treatment and resources, and facilities to use (Schofield, 1995). A comprehensive community-based prevention model of child sexual abuse includes primary, secondary and tertiary approaches. A primary approach targets those who have not been abused yet in order to reduce the probability of their abuse (Huntington, 1997). It is agreed that community-wide strategies aimed at reducing child sexual abuse are more likely to succeed in preventing child sexual abuse than those based on the identification of high-risk groups. Common elements of successful community-wide strategies are presented in community education (Baldwin and Spencer, 2000).

According to Macdonald (2001), inadequate income influences the quality of life of parents who are unable to provide their children with their needs. Some parents are poor as a result of their limited educational achievement, which also indicates the ability to deal with everyday problems. Therefore, the community education programme should target the root causes of poverty, poor education, teen

parenthood, unwanted pregnancies, unemployment and substance abuse.

Community education also provides family services in a non-traditional setting. Non-traditional settings often have the benefit of allowing the practitioner to sidestep cumbersome intake procedures commonly used in clinical settings. Through community education, families are easily reached before a significant problem develops (Ragg, 2006).

Community response to child sexual abuse in day care centres is not satisfactory because the victim witnesses are very young and there are more perpetrators reported than the staff of the centre. It is recommended that community education should be established to help the centre and to educate children on sexual abuse and to support the victims of the abuse (Deborah, 2004).

A community-based programme for the prevention and treatment of child abuse was proposed by Blackman and Collins (2009). The programme was to use life skills and psychodrama to address intra-psychic, inter-personal and behavioural skill deficits. The programme was evaluated and it was found that the 25 pre-school children and 16 mothers experienced a warm exchange of feelings with their teachers and peers and became less dependent on adults by learning self-help skills and following routines. In the programme, the mothers' needs met nurturing, socialisation and community support. Gary (1991) describes another programme where the approach to community-based child abuse prevention was based on a consideration of factors that place a child at risk for abuse and an integration of successful approaches to child abuse prevention and intervention.

In the USA, the East Harlem community established a multidisciplinary model which included nurses, social workers, physical therapists, pastoral ministers and grandmothers. The focus was on working with families and developing good relationships with their children (Gail, 1998). A home-based, family-centred community programme integrating community members was proposed to reduce child sexual abuse. The areas that were focused on were child management, life skills and systems advocacy (Jamieson, Shelemey and Dimotoff, 2005).

According to Shirley and Randy (1998), a pilot programme emphasising parental involvement in the prevention of child sexual abuse was effective in increasing parents' confidence in their own and their children's ability to prevent sexual abuse. Family Outreach is a programme that focuses on preventing child abuse and neglect by offering one-to-one counselling services and parenting classes to parents experiencing child-related problems. The programme has the following objectives:

- to inform the public about child abuse and neglect;
- to create an awareness of community responsibilities;
- to create a corps of paraprofessionals trained to establish one-to-one relationships with families;
- to offer parents' education classes to a variety of parent groups; and
- to assist the state agency with foster home recruitment.

The Welcome Baby programme in Canada is a community-based volunteer primary prevention programme that offers caring, sharing and support to parents of newborns, is said to be helpful in the reduction of child sexual abuse. The programme goals include personal support for the new mothers, prevention of child

abuse and neglect by providing support and information for all parents, reinforcement of strengths and support for quality parenting, improving emotional preparation for parenthood and early identification of families abusing children (Marion, 1999).

A programme that was proposed by Gary (1991) has an approach to community-based child abuse prevention that was based on a consideration of factors that place a child at risk for abuse and an integration of successful approaches to child abuse prevention and intervention. The programme integrates professional, university and community resources for the prevention of child abuse.

Brian (1989) claims that child welfare and child care programmes would be improved by a policy that places work with children at the core of communities being served. According to Brian (1989), the policy could easily be implemented through community education. The policy would require three components: (1) a community work approach to practice; (2) a pattern of services that connects child welfare and childcare with other human services and (3) decentralised service structures that allow community input into children services. The components could reinforce each other if community education is also encouraged.

Systematic community action plays a significant role in identifying and assisting sexually abused children in Philippines. It is concluded that in an area where most cases may not call for sophisticated clinical services, organised community efforts can provide a vital role in establishing a network of programmes to promote the welfare of children (Del-Castillo, 1999).

The Rural Alaska programme was designed to change social customs and traditional intervention regarding child sexual abuse. The programme involved the application of an old church custom of constructive gossip by volunteers to change community

attitudes about children and the use of an innovative federal government health care delivery programme to establish the community's first obstetric and paediatric services. A community members' service called Friends of Families helped to relieve the strain of the Alaskan child protection services department to maintain contact with families and monitor abuse (Brown and Janski, 1997).

Human service professionals in Warren county in USA established a programme to address child sexual abuse. Agency representatives were instrumental in identifying problems and resources, educating the public and organising a new agency. The goal of child abuse prevention was addressed by determining policies to meet the needs of families and children. Community members monitored and evaluated the programmes (Duane and Linden, 1989).

An attitude shaping campaign was launched at a conference on child sexual abuse and neglect which was held in Paris in September 1982. One of the aims was to show people that if child abuse problem cannot be handled within the family or by relatives, assistance is available in community organisations (Kalle, 1989).

Phillip (1998) contends that child sexual abuse can be reduced by community intervention through natural support systems and community development activities. The consultation and education programmes of the Community Mental Health Centre in Britain are cited as one such approach to this problem.

A multidisciplinary programme in Japan was designed for the secondary prevention of child sexual abuse and neglect (Mc Curdy, 2000). The model programme consists of medical, psychological, social and developmental services on an inpatient, outpatient and in-home basis. Problem lists for each were subjected to factor analysis. Five factor constructs that made clinical sense emerged from the analysis:

- abusive family;
- neglect or antisocial family;
- family with an emotionally unstable parent;
- family with cultural or intellectual limitation; and
- family with child-rearing difficulties.

The programme played a fundamental role in the reduction of child abuse and improving the parenting system (Marion and Ayoub, 1990).

Frank (1989) describes a community organisation experience of the Family Life Development Centre at Cornell University in the USA in connection with child sexual abuse and neglect. The centre concentrated on organising local task forces on child abuse and neglect that would work at the community level to improve services for families and children afflicted with the problem. New services such as parents' aides, multidisciplinary teams and parenting education projects were created.

In this programme, community education focused on the prevention, identification and reporting of child sexual abuse. There were different community education programmes which enabled the community to participate in the prevention, identification and reporting of sexual child abuse. These community education programmes included 'Plain talk: personal safety education for kids', 'Taking action against dating violence', 'Community education and training' and the 'Sexual Assault Awareness Month poster contest', which as briefly discussed below.

Plain talk: personal safety education for kids

This programme was designed to enable children to voice their problems. 'Plain talk'

is a comprehensive programme that involves school personnel, parents and children in lessening a child's vulnerability to abuse. Classroom presentation highlights a child's right to be safe, confident and to make choice. The role play addresses safety strategies to use in a bullying situation when the child will be in an unsafe condition. The final role play shows how a child seeks help from adults. After the presentation a review is done to allow children to speak individually with the presenters and to ask additional questions.

At the end of the plain talk the child would have learnt how to disclose abuse to school staff who will work together to provide the Department of Human Services or Law Enforcement with information to keep the child safe. The workshops for parents include information on how to build children's safety skills, how to respond to a child's disclosure and to report abuse.

Taking action against dating violence

This programme was designed for high school children, and takes three days to cover the curriculum. The programme encourages teenagers to re-examine the cultural attitudes which foster violence. On the first day, they examine how rigid gender roles lead to unhealthy relationships and dating violence. The second day provides comprehensive information on non-stranger sexual abuse and dispels myths and misconceptions surrounding rape. The third day of the programme provides information on building and maintaining healthy relationships, bystander intervention, and ideas on how to support a survivor of sexual assault or dating violence.

Community education and training

Community members, including professionals, employers and parents, are trained to obtain information on how to identify sexually abused child and how to support a survivor.

Sexual Assault Awareness Month poster contest

It was suggested that a sexual assault awareness month should be held yearly. Learners will be encouraged to draw posters on child sexual abuse, and the best poster will win to encourage them to participate in the fight against child sexual abuse. Each winning poster will be distributed for display in local high schools in order to raise awareness about the dynamics and prevalence of sexual assault in the community as well as to provide learners with a 24 hours hotline (Davidson, 2008).

Community child advocacy provides public forums to educate the community on child sexual abuse. This enables the community to participate in organising a child advocacy organisation. Community education encourages the community to report suspected child sexual abuse to local authorities. Community professionals, clergy and law enforcement should be listed to donate their time and services (Faulkner, 2006).

According to Brown, Cohen and Lyles (2009), a primary prevention approach prevents abuse before it happens by addressing the environmental factors and societal norms that contribute to its occurrence. The strategy promotes a safe, healthy environment, reducing the likelihood of abuse in the first place. Primary prevention moves to change the environmental factors such as economic inequalities, sexism, media and marketing practices that shape norms of an entire

community. The environmental factors are relevant to all communities and one can focus on them via comprehensive prevention initiatives (Sithole, 1996). The community is involved on the ground that a single individual or sector cannot address the problem in isolation. In fighting against child sexual abuse, the community should shift the norms and environments that contribute to child sexual abuse. The whole community should be engaged in a process of changing attitudes, behaviours, beliefs and institutional practices.

In India, an educational tool known as Bitter Earth was established to train community members on how to prevent child sexual abuse. Many tribal communities had multidisciplinary teams called CPTs (Child protection teams) and SCAN (Suspected child abuse and neglect). The team would be more effective if they had the backing and active support of tribal leaders and the community at large. Tribal leaders played a vital role in education, prevention and intervention services for the communities. Community education in this area was especially useful in assisting community members in identifying a sexually abused child. Community education used videos to show the community the occurrence of child sexual abuse (Department of Justice, 1999).

It is obvious that without the involvement of traditional leaders, community education cannot be organised and there will be no successful preventive strategy for the prevention of child abuse. Therefore, traditional leaders have an important role to play if the community wishes to be successful in combating any community-based problem, including child sexual abuse. Any community member may approach the traditional leaders; that is one of the reasons for including traditional leaders in this study.

According to the National Indian Justice Centre, community education should use a child sexual abuse training manual. The training manual offers comprehensive presentation to effectively handle child sexual abuse cases in India. The manual includes the following chapters (Department of Justice, 1999):

- Overview of child sexual abuse
- Reporting policies and procedures
- Law enforcement investigation of child sexual abuse
- Child protection services and victim services
- Interviewing child sexual abuse victims
- Tribal coordination of child sexual abuse cases
- Child sexual abuse cases in tribal court
- Witness and evidentiary considerations in child sexual abuse cases
- Roles in child sexual abuse cases
- Sentencing, treatment and resource development
- Problem areas in child sexual abuse

In Ireland, a structure and operation of community-based youth counselling service was established. The structure was established with a view to prevent child sexual abuse and the trends in sexual behaviour and child sexual abuse were examined. Although the structure was focused on youth counselling, community members were encouraged to send their children to the workshops. The role of the community was highlighted in the workshop (Lalor, 2006).

Comprehensive strategies were designed in Central Massachusetts to enhance

systematic access to care and to promote a healthier lifestyle. The collaborative structure of community members was established to create an infrastructure for providing care for the victims of child sexual abuse and to foster effective community-based prevention (Barry and Pamela, 2004).

A child who has been abused needs to be counselled by community members who are trained to provide counselling, such as social workers. Therefore it is essential for each community to have adequate infrastructure for the counselling of the youth. Community-based youth counselling should therefore be established in this community as one of the community education programmes.

Deborah (2004) points out that the National Centre on Child Sexual Abuse and Neglect was established to investigate cases of child sexual abuse. The sexual abuse of children by mothers was also dominant and it was dealt with by the community members in the Centre of community Education. The impact on the sexually abused children and the available treatments for the perpetrators were debated by the community in this centre.

Seeing that child sexual abuse is a social problem in the USA, a call for an ecological preventative response was made that encompasses the varied sources of influence on children and families. Schools serve as strong protective factors through a modern school health programme that purposefully integrates the efforts and resources of health, education and social services. Family and community involvement is integral to the effectiveness of schools and school health programmes. Communities and schools work together to promote and protect the well-being of their children. Families, schools and communities can successfully collaborate to address awareness and prevention of child sexual abuse at various

levels (Stokes and Lanning, 2003).

The researcher agrees with Stokes and Lanning (2003) that community and school cannot be separated because they have to support each other. Schools should support the establishment of community education programmes. If community and school are separated, the community cannot succeed in reducing child sexual abuse. That is one of the reasons for including educators in the development of the study.

Community-based organisations dealing with domestic violence use innovative strategies to address child sexual abuse. The agencies expand community outreach efforts and attempt to educate the public and professionals about child sexual abuse. Organisations build collaborative relationships with other agencies concerned with children's welfare, such as child protective services, law enforcement, schools and health care facilities (Amy, 2002).

Findlater and Kelly (2005) argue that child protective services and domestic violence programmes should integrate to form programmes for community education. Community education provides training for children so that any child sexual abuse which occurs in the community can be exposed. New forums such as child protective services, citizen review panels and community-based child services partnerships hold promise for further collaboration.

A community-based parent education programme which comprised three hours for three days per week was established to improve the identification of risk factors associated with child sexual abuse. Parents who participated made the strongest gains in the more intensive programmes (Whipple, 1999).

According to Parton, Thorpe and Wattam (1997), child protection depends on the

community in which it is occurring. Community members are the participant agents of child sexual abuse protection. The community should establish programmes to train community members to deal with child sexual abuse. The culture in which child abuse is practised determines the programmes for community education.

Comprehensive sexual health education can serve as a protective factor by providing the community and particularly the youth with the knowledge and skills necessary to deal with child sexual abuse. A sexual health programme should form part of community education. Community health centres were established in cities such as Colorado, New York and North Dakota to train the community to act against child sexual abuse. A number of programmes appear to have been effective in preventing child sexual abuse by improving parents' skills and supporting and reducing child sexual abuse (Jenson, 2006).

Dingwall, Eekelaar and Marry (1983) contend that communities should establish committees which would help them to manage child sexual abuse. The committee will approve written instructions defining the duties of all personnel concerned with any aspect of child abuse cases. The committee will have to consider ways to find health staff, teachers, social workers and policemen. The committee provides education and training programmes to heighten awareness of the sexual abuse of children. The information about child sexual abuse will be collected by the committee. The need for an effective and uniform reporting system for suspected cases is discussed during training process. The safety of the child must in all circumstances be of paramount importance and must override all other considerations.

Hansen (2000) describes a programme known as the NEWPIN programme that was established in London Borough to deal with child sexual abuse. The original aims of

NEWPIN were to improve the mental health and self-esteem of mothers and to reduce child sexual abuse. After 13 years the lives of community members appeared to have improved with the reduction of child sexual abuse.

In Alaska and Vermont, child sexual abuse prevention programmes were introduced in the community. The participants of the programmes were volunteers from the community who provided services and supported parents and the abused children (Brown and Janski, 1997). According to Haugaard and Emery (1989), an inter-organisational collaboration of seven non-profit health and human services organisations developed community-based education to reduce child sexual abuse in Boston. Such collaboration helped to develop new programmes that met more of the community's needs than one agency could do alone.

Haugaard and Emery (1989) discusses a community-based child sexual abuse treatment programme that was established in the UK to reduce child sexual abuse. The Institute for Child Prevention programme conducted it for the community as extended family and the programme integrated traditional approaches in office therapy and the peer support services of the clients who bolstered each other emotionally and in practical matters. The community was trained to work collaboratively towards family reconstruction and the reduction of child sexual abuse

A three-year project was established to design and implement a coordinated programme for the treatment of child sexual abuse in rural Manitoba. The evaluation of the project indicated that in all community problems, including child sexual abuse, the community plays a vital role in the reduction of the problem (Barry, 1994). It has been concluded that community education strategies aimed at supporting sexually abused child are more likely to succeed in preventing child sexual abuse than those

based on the identification of high-risk groups (Norman, 2005).

Lawrence (1992) contends that the problem of child sexual abuse should be dealt with by means of youth prevention programmes involving the education of volunteers, parents and children. The programme should establish policies that create barriers to child sexual abuse. It should encourage children to report sexual abuse. Most importantly, it stresses that perpetrators should be swiftly reported and removed from the community.

Davidson (2008), emphasises that the community must be taught that a child wants love and to be loved by parents. Child sexual abuse is never an individual problem but a community problem which needs to be dealt with by the community in which it occurs because children become attached to the perpetrators. If the community does not regard child sexual abuse as a community problem, children must solve the problem of attachment to the perpetrators by reporting their abusers.

Protecting children against sexual abuse is a priority for community builders. Free live community care events, where community members are trained in good parenting skills, are often presented. For community education to start, the community needs a social entrepreneur. A social entrepreneur is someone who recognises a social problem and uses entrepreneurial principles to organise, create and manage a venture to make social change. In 2002 seven projects were established in the UK to fight against child sexual abuse. The projects provide the community with practical support that includes coaching and training. Youth social entrepreneurship was seen as a common approach to engage the youth in solving the problem of child sexual abuse. Youth organisations and programmes promote these efforts through a variety of incentives to young people (Bornstein, 2006).

Community programmes such as an early infancy project, the Scope Perry preschool project and interpersonal cognitive problem-solving projects help to prevent social problems such as child sexual abuse and other behavioural problems. These projects provide training in parenting and coping skills to mothers of sexually abused children. The programmes involve home visits by trained nurses and health care screenings. The programmes were first implemented in Elmira, New York with American mothers (Dalton, 2001).

According to Chris (2004), child protection teams were developed in each community in order to reduce child sexual abuse. Each team consisted of six to eight community members who were under the supervision of the team leader. The team leader trained the child protection team. The child protection teams were established in the state of Victoria in USA in 1998 to fight against child sexual abuse. The child protection work was about protecting children from sexual abuse by the community members themselves.

Community education is organised in Durban to such an extent that sex education is one of the programmes. Children learn about problems related to sexual matters and they are informed about reasons why parents become involved with sexual activities with children. Through community education sexually abused children are frequently held responsible for their own situation. Child protection teams help to reduce child sexual abuse in the community. The teams involve the professionals who have experience of child sexual abuse, as well as the mothers and fathers of the abused children. The team empowers the community to understand and share how to work with sexual abuse at large (Bersani et al., 1993).

Each week the team has a meeting to discuss the business and team processes.

Each meeting gives space for individuals to discuss how they can prevent child sexual abuse. Team meetings also provide peer evaluation and feedback, the key to maintaining the team's practice of value and standards. Programmes such as group treatment and individual treatment are used to reduce the parents' abusive behaviour. All the programmes were first discussed by the community members in the community in which sexual abuse occurred (Wattam, Hughes and Blagg, 1997).

According to Freeman and Cleaver (1995), community participation in the process of fighting against child sexual abuse can even reduce the high level of child abuse. Parents' attitude could change in view of the stress of the moment through professionals and other parents bringing preconceptions to bear on each case. In community education, it is necessary to explore the child protection system in more detail in order to determine if procedures at the outset of investigation can be more humane and conducive to working with families and children.

The child protection system was discussed with parents in various areas in the USA and the UK. The fact that children would not be taken away from them but that they should remain responsible was discussed with parents. The professionals trained community members with good parenting skills. The training of community members resulted in three improvements in the community: more information to help smooth the interaction of professionals and parents; more encouragement to social workers to reflect upon the nature of their task and greater effort to safeguard the rights of individual children. The aim of parents' training was to reduce child sexual abuse. Parents developed strategies to protect their children from sexual abuse (Freeman and Cleaver, 1995).

Community education helps to reduce the isolation, alienation, secrecy, shame and

stigma of sexually abused children by helping them to share their experiences with other children or their parents. They are given some relief from their experience. This encourages the abused children not to think of themselves as abnormal, deviant or freaks and to feel less responsible about what happened to them. Community education fosters feedback of the sexually abused children's experiences. The participants offer a wide variety of positive role models. Although the participants differ in age, they share their experiences and encourage one another on how to disclose child sexual abuse to the community members and how to report incidents to the police. This also provides hope and optimism that it is possible to heal, change behavioural patterns and cognitions and to resolve the trauma of child sexual abuse (Sanderson, 1991).

According to Campbell (1998) the organisers of community education need to be patient, understanding, empathic, gentle, reliable and responsive to each individual group member's needs, but also to be firm in ensuring safety and preventing the infringement of the individual's rights.

In the USA, family day care centres which were established in the time of the Depression changed into community day care centres to provide community education to community members. Workshops are held to train parents and children on how to promote good interpersonal relationships in order to fight against child sexual abuse. Parents are also trained in good parenting skills in the centres (Alston, 1992).

Cicchetti (1993) claims that the relationship between the child and the parent is a critical factor in the healthy development of the child. Community education encourages parents to execute their parental roles to prevent the sexual abuse of

children. The programme promotes all the activities that can contribute towards minimising child sexual abuse in American communities.

A summary of the programmes employed in other countries is provided below.

2.4.6 Summary of programmes employed in other countries

From the above theories, it appears that there are many ways of involving communities in community issues. Examples of community involvement in various countries are provided below:

- In Hong Kong, child sexual abuse prevention programmes were initiated to encourage community participation.
- In Israel, a multidisciplinary team of professionals was established to encourage community participation in reducing child sexual abuse.
- In the USA and Canada, it was proved that churches can encourage community participation in reducing child sexual abuse.
- In the USA, a community partnership team was created to promote community participation in reducing child sexual abuse.
- In the Western Cape in South Africa, communities formed an organisation called Community Against Rape and Abuse to fight against child sexual abuse.
- In Athens-Clarke county and Georgia in USA child sexual abuse response team was established to reduce child sexual abuse.
- In Ireland, a community-based youth council was established to fight against child sexual abuse.
- Teams of parents and children were established and succeeded in reducing child

sexual abuse in Australia.

- In Canada, a child sexual abuse prevention project was established to reduce child sexual abuse and it was successful.
- A community family partnership programme was established to encourage the community to fight against child sexual abuse in Northern Utah in the USA.
- In the UK, a fellowship programme was developed to organise community education, training of staff and assessment of the abused and to find ways of treating sexually abused children.
- In Colorado, USA, a community-based child sexual abuse prevention programme was established. Universities and community resources were used for the prevention of child sexual abuse.
- The Alaska programme was organised to fight against child sexual abuse through changing social customs and traditional intervention regarding child sexual abuse.
- In India, the Bitter Earth programme was established to reduce child sexual abuse.

Community education programmes established in other countries seem to have been successful in getting the community involved in the reduction of child sexual abuse in the communities studied. Therefore it was believed that some of these education programmes could be tried out in the community under study.

The researcher chose to review the literature pertaining to the problem of child sexual abuse in Asian countries, the USA, Australia as well as African countries, including South Africa. The researcher sought to determine whether child sexual abuse is a world-wide problem or just a problem encountered in Vhembe district. The

choice of countries helped the researcher to gather more knowledge about the problem under study.

Although communities differ from one another, the researcher was of the opinion that some of the programmes used in other communities could be used in community under study. From the theories studied, it appears that without the participation of the community itself, no community-based problem can be dealt with successfully. There are a number of programmes that seemed to be applicable to the community under study, such as the Child Friendly Community programme, the Community-based Child Abuse Prevention programme, the Child Abuse and Neglect Conference programme, the Child Sexual Abuse Prevention programme, the Multidisciplinary Model programme, and many more which could be proposed by the community members themselves. The programme that was employed in Alaska seemed to be applicable to a community that can change social customs and traditional intervention regarding child sexual abuse. The Child Sexual Abuse and Neglect conference helped to shape the attitude of the community towards child sexual abuse.

It appears as if a community should use a variety of programmes in order to succeed in reducing child sexual abuse. However, participatory action provides the community with an opportunity to employ one programme after another till there would be an indication of the reduction of child sexual abuse. The evaluation of the programme will suggest the next programme to employ. The programmes should be employed in a cyclical process.

Undeniably, child abuse problem should not be tackled as an individual problem, but as a community-based problem. Equally important, there must be a strong collective

effort in the community in order to succeed in fighting with child sexual abuse problem. As a community of responsible citizen, they need to develop strategies that directly encourage community participation in reducing child sexual abuse.

2.4.7 Conclusion

In South Africa, the Constitution (1996 sections 10 and 11) makes reference to human rights. Every South African is protected by South African Constitution irrespective of gender, race and age. Children are no longer protected as stated in the Children's Act (2003). Children are sexually abuse time and again, but the Government wants each community to be responsible for the protection of children. The community is reluctant to respond to such responsibilities for the protection of its children. In addition, an individual alone can not reduce community-based problems such as child sexual abuse.

Child abuse is neither district nor provincial problem. This is a world wide problem. It appears that HIV/AIDS especially in African countries is contributing towards the abuse of children. People think that by having sex with young girls, they can get rid of HIV/AIDS. Again, there are a few contributing factors related to child sexual abuse. Although the problem was in existence before the new dispensation, there seem to be an increase in this problem all over South Africa.

The community can succeed in reducing child sexual abuse if it could participate fully in the fight against this community-based problem. The community should establish community education programme in order to encourage its members to participate in the reduction of the problem. Children must be included the community education programmes because they know and trust their friends better. This would help children to report any suspect of child abuse.

It is also advisable for the community to understand the Children's Act in order to know what the Government expects of the community. Members of the community should be familiar with the Constitution of South Africa sections 10 and 11, for if they become acquainted with these sections, they would be certainly be more willing to participate in the reduction of child sexual abuse to the better life of children. The relationship amongst community stakeholders should be promoted.

Child abuse education is important in the community under study. The community should know the abuse types as well as their effects. If possible the community should be educated on the effects of child abuse to encourage community participation. Child abuse is not an individual problem but a community one.

There are a few contributing factors related to child sexual abuse which should never be ignored when fighting against this problem. It is obvious that while this problem is exacerbated by a number of factors, it is prevalent in this community under study from all families. It is a problem that needs to be addressed by the community as a whole.

The research design and methodology used in order to collect and analyse the data is provided in Chapter Three.

CHAPTER THREE

RESEARCH DESIGN AND METHODOLOGY

3.1 INTRODUCTION

The previous chapter outlined various conceptualisations and theories on how community education could encourage community participation in the reduction of child sexual abuse. The purpose of this study was to improve the quality of life of community members and develop a satisfactory interpersonal relationship with children. It is generally agreed that research is not a neutral term. There are different concepts of research depending on the nature and purpose of the research.

According to De Vos (2002), scientific research is a systematic, controlled, empirical and critical investigation of natural phenomena, guided by theory and hypotheses about the presumed relations among such phenomena. According to Mouton and Marais (1990), social science research is a collaborative human activity in which social reality is studied objectively with the aim of gaining a valid understanding of social problems. Therefore, research is a carefully prescribed process of collecting and analysing data in a way that is systematic, purposeful and accountable.

For this study, the researcher opted for a participatory action research approach to the problem. This chapter explains the research methodology: research design, data collection techniques and how the collected data was analysed. The data was

collected in four different phases. The first was a preparatory phase, the second phase consisted of focus group interviews and discussions, the third phase consisted of individual interviews while the fourth phase consisted of further focus group interviews and discussions. The fifth phase consisted of learners who were victims, parents and the perpetrators' interviews and discussions. The research approach opted for falls within a research paradigm. The particular research paradigm that was deemed suitable for this study is discussed in the sections that follow.

3.2 RESEARCH PARADIGMS

3.2.1 Introduction

There are different views on different research paradigms. In each paradigm there are a variety of approaches. According to Du Plooy (2001), a paradigm is a set of shared basic beliefs about how researchers can view that which they study. Every research tradition is characterised by assumptions that guide researchers in the way in which they approach the phenomenon under investigation, their theoretical viewpoints and their selection of methods and techniques.

According to De Vos, Deport, Fouche and Strydom (2011), researchers must decide within what paradigm they are working, know the nature of their selected paradigm very well and spell this out in their research reporting in order to keep the topic clear and unambiguous to the readers. In the social sciences here are three paradigms under which research can be done: positivist, interpretive and critical theoretical paradigms. In this study the researcher worked qualitatively within the critical paradigm theory by means of participatory action research (PAR). Since knowledge of critical theory was important in this research, a brief description of critical theory is

provided below.

3.2.2 Critical theory

The critical theory approach is one of the three methodological approaches regarded as important in social science (De Vos, Delpont, Fouche and Strydom, 2011). Versions of this approach are called dialectical materialism, class analysis and structuralism. De Vos (2002) agrees with many of the criticisms of the interpretive approach levelled at positivism, but it adds some of its own and disagrees with interpretive social science on some points.

According to Cohen, Manion and Morris (2007), critical theory is prescriptive and normative, entailing a view of what behaviour in social democracy should entail. The agenda of critical theory is highly particularistic and prescriptive, and has been seen as being problematic.

Critical scientists see in social research the goals of removing false beliefs and ideas about society and social reality, and are critical of the power systems and inequality structures that dominate and oppress people in societies. People are perceived as creators of their own destiny, while engagement and action are encouraged for the purpose of changing the conditions of people's lives (De Vos, 2002).

Critical theory aims at promoting critical consciousness and breaking down the institutional structures and arrangements that reproduce oppressive ideologies and social inequalities (Du Plooy, 2001). In a critical theory paradigm, participatory action research, action research and case study approaches can be used.

Although action research was not used in this study, it was important for the researcher to have knowledge about this approach and to discuss it in order to clarify

the difference between Participatory Action Research and Action Research for the sake of the reader.

3.2.2.1 Action research

Action research aims at contributing to both the practical concerns of people in an immediate problematic situation and to the goals of social science by joint collaboration within a mutually acceptable ethical framework. It makes a contribution towards solving problems confronting society and widely accepted criteria of the larger social science community for acceptable empirical research. Action research was seen as more than simply a method for applying social science to real-world problems (Kasil, 2000).

According to Coughlan and Coughlan (2002), action research is research in action rather than research about action. Action research works through a cyclical four-step process of consciously and deliberately planning, taking action, evaluating the action and leading to further planning. Action research is participative. Members of the community which is under study participate actively. Action research is a research concurrent with action. The goal is to make the action more effective. It is both a sequence of events and an approach to problem solving. The desired outcomes of action research are not just solutions to the problems but important learning from outcomes, both intended and unintended, and a contribution to scientific knowledge and theory.

According to Creswell, Ebersohn and Eloff (2010), action research is a collaborative or participative research approach that focuses on a practical problem experienced by participants for getting a practical solution to the problem. In action research, the researcher acts as a mediator to help participants to plan and implement an

intervention that ought to alleviate the problem experienced.

Action research as narrative has principles for validation. The principles proposed are the following (Heikkinen, 2007):

- the principle of historical continuity, which refers to the analysis of the history of action and employment;
- the principle of reflectivity, which refers to the researcher's relationship with his/her object of research;
- the principle of dialectics, which refers to dialogue, polyphony and authenticity;
- the principle of workability, which refers to pragmatic quality, criticality, ethics and empowerment; and
- the principle of evocativeness, which refers to how well the research narrative evokes mental images, memories or emotions related to the theme.

In community-based action research, all stakeholders whose lives are affected by the problem under study should be involved in the process of investigation. The stakeholders should participate in collecting and analysing data to transform their understanding about the nature of the problem (Stringer, 2005).

Major characteristics of action research, according to Gummesson (2006), are that

- action researchers take action;
- action research always involves two goals;
- action research is interactive;
- action research aims at developing holistic understanding;

- action research is fundamentally about change;
- action research requires an understanding of the ethical framework;
- action research can include all types of data gathering methods;
- action research requires a breadth of pre-understanding;
- action research should be conducted in real time;
- the action research paradigm requires its own quality criteria;
- action research involves participation; and
- action research is a cyclical process.

In action research the researcher is an external helper to the client system. This differs from participatory action research where the researcher is from the client system. In participatory action research, the people who participate in the research process become full partners or co-researchers in running the research process (Elden and Chisholm, 1993).

Minimal requirements for both action research and participatory action research are the following: A project should take as its subject matter a social practice or practices, regarding them as strategic action susceptible to improvement. The project proceeds through a spiral of cycles of planning, acting, observing and reflecting, with each of these activities being systematically and self-critically implemented and interrelated. Furthermore, the project involves those responsible for the practice in each of the moments of the activity, widening participation in the project gradually to include others affected by the practice and maintaining collaborative control of the process (Grundy and Kemmis, 1981).

In order to distinguish action research from participatory action research, a thorough explanation of participatory action research is provided below.

3.2.2.2 Participatory action research

Participatory action research is a research approach that focuses on the participation and involvement of all role players in the research. The researcher and participants are equally important in the process. In participatory action research, the researcher is from the community under research. In participatory action research, the researcher and participants become actively involved in collective efforts to address and solve their social problems so that their knowledge and skills are increased. The community should therefore be able to define their problems. It helps the community create informal social support networks in cooperation with professional helpers to prevent or cure a problem. Participatory action research endeavours to empower deprived and disenfranchised people with research capabilities to enable them to identify and transform their situation for themselves (De Vos, Strydom, Fouche and Delport, 2011)

Participatory action research needs to be a cyclical process. The cyclical process should take place until there is a positive change within the community. The aim of the participatory action research is to empower community members to take collective responsibility for the planning and implementation of the action plan and for the evaluation of educational programmes of community education within the community (Du Plooy, 2001). Community members help to develop a research framework that incorporates the community's concerns and priorities. Community-based participatory action research is a means to negotiate a mutual agenda between the community and the researcher (Mosavel, 2005).

McIntyre, Chatzpoulo, Politi and Roz (2007) explain that participatory action research has a collective commitment to investigate a problem in a particular community, a desire by people themselves to engage in their own as well as collective reflection in order to gain clarity in the investigation, a joint decision to engage in individual or collective action that leads to a useful solution, which benefits the people involved, and a recognition that the term 'researcher' refers to both local participants and those people who contribute specialised skills to problem solving.

According to Stringer (2005), community-based participatory action research does not solve all problems but it provides a means for people to get involved in their situation and formulate effective solutions to problems they face in their public and professional lives. Community-based participatory action research builds positive working relationships and productive interactional and communicative styles. It also provides a climate that enables disparate groups of people to work harmoniously and productively to achieve their various goals. People are engaged directly in formulating solutions to problems they confront in their community lives. The purpose of community participatory action research is to assist people in extending their understanding of their situation and resolving problems that confront them. Participatory action research is democratic, equitable, liberating and life-enhancing.

The role of the researcher is to facilitate the process of defining the group's problems and to support them in working towards effective solutions to their problems. The researcher works as a catalyst that stimulates people to change. Another key role of the researcher is to encourage people to develop their own analysis of the problem. The researcher also stimulates people to change; helps people to analyse their situation, consider findings, and plan how to keep what they want. The researcher

should not focus only on solutions to problems but on human development (Stringer, 2005).

Some characteristics of participatory action research

Bray (2000) highlights the following characteristics of participatory action research:

- Participatory action research is committed to the development of knowledge as any research endeavour should be.
- It can be considered as applied research that is directed at practical problem solving.
- It is based on the principle of self-development where people should organise themselves.
- It needs a more holistic understanding of better ways of achieving change in the culture and tradition of a community.
- It functions on a multidisciplinary and shared conceptual framework where all disciplines concerned should be involved.
- It uses all the conventional tools of social research.
- A good relationship between the researcher and participants is dominant.
- It is equitable, acknowledging people's equality of worth.
- It is democratic, enabling participation of all people.
- It is liberating, providing freedom from oppressive elements. It is life-enhancing, enabling the expression of people's full human potential.

Advantages of participatory action research

Stringer (2005) states that although participatory action research is not the best or only research approach, it has a number of advantages for both the researcher and the participants:

- It motivates those directly involved.
- It is most relevant and flexible for working with people.
- It can have greater impact than the conventional expect role of the researcher in stimulating and guiding change.
- It is a hands-on procedure and is practice-oriented.
- It makes change a self-generating and self-maintaining process that continues after the research process.
- It provides full participatory involvement.
- It refuses to treat the individual as the subject or object of study. It is consensual, informed, sophisticated joint construction.

McTaggart (1996) contends that participatory action research solves a practical problem systematically and collaboratively. Furthermore, it improves the practice of learning, teaching, training, management and professional development as well as the social context and conditions in which this practice takes place. This type of research enhances the participants' own learning, insights and professional development and advances knowledge in management and higher education by generating grounded theory, research and publications. Finally, it documents excellence in teaching or management.

In participatory action research, sound relationships, effective communication and effective participation are predominant.

Relationships in participatory action research should promote feelings of equality for all people involved; maintain harmony; avoid conflict, where possible; resolve conflict that arises, openly and dialogically; accept people as they are, not as some people think they ought to be; encourage personal, cooperative relationships, rather than impersonal, competitive or authoritarian relationships. In participatory action research the researcher must be sensitive to people's feelings (Bray and Lee, 2000).

Communication in participatory action research is effective if researcher listens attentively to people; accepts and acts on what they say; ensures that he or she is understood by everyone; is truthful and sincere; acts in socially and culturally appropriate ways; and regularly advises others about what is happening.

Participation is effective in participatory action research when the researcher allows for significant levels of active involvement; enables people to perform significant tasks; provides support for people so that they learn to act for themselves; encourages plans and activities that people are able to accomplish; and deals personally with people rather than with their representatives or agents.

In conclusion, participatory action research involves maximisation of the involvement of all relevant individuals and all groups affected. It includes all relevant issues such as social, economic, cultural, and political rather than focusing on narrow political agendas. Participatory action research ensures cooperation with other groups, agencies and organisations. It also ensures that all relevant groups benefit from all activities.

The differences between participatory action research and traditional research approaches are briefly discussed below.

In participatory action research there is a desire by people themselves to engage in self- and collective reflection in order to gain clarity and awareness about the issue under investigation. It entails a collective commitment to investigate a problem in a particular community and it involves a joint decision to engage in individual and or collective action that leads to a useful solution which benefits the people involved. Finally, it is the recognition of the term that the researcher applies to both local actors and those people who contribute specialised skills, knowledge or resources to the process (Bray and Lee, 2000).

In this dissertation the terms 'action learning' and 'action research' are clarified to avoid confusion.

3.2.2.3 Action learning and action research

There is no clear separation between action learning and action research. It is the integration of practice and theory, development and research. Action learning means learning from action and concrete experience as well as taking action as a result of this learning.

The main difference between action learning and action research is the same as that between learning and research generally. Both include learning, searching, problem solving and systematic inquiry (Zuber-Skerritt, 2007).

Action research means critical, collaborative research into complex practical problems, involving people at the coal face and being accountable to stakeholders through continuous reflection on action, evaluation and critical self-evaluation. The

aim of action research is to improve practice in a systematic way and, if warranted, to suggest and make changes to the environment, context or conditions in which that practice takes place and which impede desirable improvement and effective future development (Zuber-Skerritt, 2007).

Action learning should be supplemented by questioning insight. Learning takes place at two levels: what you think about yourself and what you think people think about you. Action learning adds to traditional learning.

3.2.3 Conclusion

The research paradigms help the researcher to think deeply about what is to be studied before the research starts. This enables the researcher to think about the research methodology and the participants that are targeted. The researcher can draw up the research design. Therefore it is important to identify a research paradigm before attempting any research. In this study on child sexual abuse in the community the researcher took advantage of using the participatory action research approach because of its advantages.

3.3 THE RESEARCH DESIGN

The research design that was deemed to be appropriate for this study is discussed in this section.

3.3.1 The nature of the study

The researcher worked qualitatively within the critical paradigm theory by means of participatory action research. In the preparatory phase, the researcher worked with 16 participants. The participants included two nurses, two educators, two church

leaders, two social workers, two members of the civic organisation, two traditional leaders, two policing staff, two Victim Empowerment members, two learners and two parents. The participants were selected purposively in view of their experience of the problem under study. The first phase of interviews and discussions occurred at the Madala clinic in the Khakhu area of the Vhembe district of Limpopo. In the second phase, the interviews and discussions with the focus group were also conducted at the Madala clinic in the Khakhu area of the Vhembe district. There were 16 participants in the focus group; the same participants and the same number as in the preparatory phase. In the third phase, 16 participants were interviewed individually at their homes. In the fourth phase, 30 focus group participants were interviewed in the hall. In the fifth phase, victims and parents were interviewed individually.

3.3.2 The participants

The researcher brought together the participants in order to collect the data. There were four phases in this process, each with its own purpose but the same participants: in the first phase, the preparatory phase, the participants got to know one another. Each phase is described below.

3.3.2.1 Preparatory phase

The purpose of the preparatory phase was to get focus groups organised, by giving the participants information with regard to the time and date of the next meeting. Another purpose was to clarify the aim of the focus group. The focus groups consisted of two educators, two nurses, two social workers, two church leaders, two traditional leaders, two members of the civic organisation, two policing staff and two from the Victim Empowerment Group. There were 16 participants altogether. All the participants had been invited telephonically, except two policing staff who had been

invited in writing (see Appendix 1). The participants used different means of transport to the venue. The Madala clinic in the Khakhu area of the Vhembe district of Limpopo was the venue for the preparatory phase because it is a community centre. The preparatory phase started at 14:00 on 22 February 2011.

3.3.2.2 *Second phase*

The purpose of the second phase was to conduct interviews and discussions with focus groups. The aim was to gather information on collective community experiences of child sexual abuse. The focus groups consisted of two educators, two nurses, two social workers, two church leaders, two traditional leaders, two members of the civic organisation, two policing staff and two from the Victim Empowerment Group. There were 16 participants in total. As mentioned above, all the participants had been invited telephonically except two policing staff who had been invited in writing (see Appendix 2). The interviews and discussions centred on recent cases of child sexual abuse, contributing factors related to child sexual abuse, victims related to child sexual abuse, perpetrators related to child sexual abuse and what could be done to reduce child sexual abuse. The participants used different means of transport to the venue. The second phase also took place at the Madala clinic in the Khakhu area of the Vhembe district of Limpopo. The interviews and discussions started at 14:00 on 15 March 2011 (see Appendix 5).

3.3.2.3 *Third phase*

The purpose of the third phase was to conduct individual interviews and discussions. The aim was to add to the focus group interviews and discussions and to confirm the focus group interviews. The respondents were two educators, two nurses, two social workers, two church leaders, two traditional leaders, two members of the civic

organisation, two policing staff and two from the Victim Empowerment Group. The total number of participants was sixteen. The interviews and discussions were aimed at identifying a sexually abused child, victims of child sexual abuse, perpetrators of child sexual abuse and what to do to reduce child sexual abuse. The individuals' interviews and discussions were conducted at their respective homes and schools. The interviews and discussions were conducted from 1 to 30 May 2011 (see Appendix 5).

3.3.2.4 Fourth phase

The purpose of this phase was to conduct interviews and discussions with a bigger focus group to gain more involvement from the participants. Another purpose was to give feedback of the focus group interviews and individual interviews and discussions. The participants included two educators, two nurses, two social workers, two church leaders, two traditional leaders, two members of the civic organisation, two policing staff and two from the Victim Empowerment Group who were interviewed individually, plus 14 other community members selected randomly. The total number of participants was 30, including those who were interviewed individually. The participants had been invited telephonically except the policing staff who had been invited in writing (see Appendix 3). The participants used different means of transport to the venue. The interviews and discussions were conducted at the Madala clinic in the Khakhu area of the Vhembe district of Limpopo. The interviews and discussions started at 14:00 on 20 July 2011.

3.3.2.5 Fifth phase

The purpose of this phase was to conduct interviews and discussions with learners as victims of abuse and their parents. The aim was to confirm the occurrence of the

problem from the children themselves. The respondents were from primary and secondary schools. Two learners were interviewed; one from a primary school and the other from a secondary school, and the interviews took place at their respective schools. The parents of these learners were interviewed in their homes. The interviews and discussions with parents started at 17:00 on 10 to 20 November 2012. The interviews and discussions with learners started at 14:00 on 12 November 2012.

3.3.2.6 Selection of respondents

Educators of schools in the district were selected randomly from the selected villages to form target groups. Nurses of the selected clinics were also selected randomly to form target groups. Social workers from selected villages and members of policing staff from the police stations in the selected municipalities were included in the target groups. Church leaders and traditional leaders from the selected villages participated in the target groups. The first focus group was made up of 16 persons.

3.4 METHOD OF DATA COLLECTION

The data was collected through interviews and discussions. The discussions were used as a means of intervention in the planning, implementation and evaluation of the outcomes. The interviews took place in two ways: through focus group interviews and individual interviews. The individual interviews were conducted with members of the focus group to confirm the data collected from the focus group. The focus group interviews and discussions were conducted in two phases. In the first phase of focus group interviews the group consisted of 16 participants while 30 participants were involved in the fourth phase of interviews.

3.4.1 Interviews as data generating technique

The interviews as data generating technique were conducted in two stages. The first stage included the focus group interviews and the second stage included individual interviews. The qualitative approach was used for the data collection. The descriptions of the interviews and discussions of the focus groups and individuals are provided below.

3.4.1.1 Interviews and focus group discussions

The interviews and discussions were conducted at the Madala clinic in the Khakhu area of the Vhembe district of the Limpopo province of South Africa. The interviews and discussions of the focus group were based on the recent cases of child sexual abuse, the past cases of child sexual abuse, the reasons for child sexual abuse, the perpetrators, what it means to the community, strategies to fight child sexual abuse and the evaluation of the project.

The discussions were used as a means of collecting data from the participants. The focus group discussions were conducted in the language preferred by the participants (Tshivenda). The participants were introduced by the facilitator and the guidelines to facilitate participatory action research were taken into consideration. A reflective diary was kept and a tape recorder was used to record the data. The reflective diary was used to record information during the whole process of discussion and interviewing. The reflective diary was also used to record plans for investigation, insights, assumptions, ideas and the researcher's questions, views and feelings about the process of research. Members of the focus groups used their knowledge, experience and expertise to participate in the discussions of the problem of child sexual abuse.

The groups focused on child sexual abuse in the Vhembe district only. The focus group consisted of two educators, two nurses, and two social workers, two members of policing staff, two traditional leaders, two church leaders, two members of the civic organisation and two members of the Victim Empowerment Group. The fourth phase of the discussions and interviews was conducted after individual interviews at the Madala clinic in the Khakhu area of the Vhembe district of Limpopo.

3.4.1.2 *Individual interviews as data generating technique*

Individual interviews were conducted with 16 participants who participated in the second phase of interviews and discussions. The individual interviews included structured, semi-structured and unstructured questions (see Appendix 4). The interviewer, who kept a reflective diary, also used audio recording.

In the reflective diary the researcher kept a record of the appointments, issues discussed, the data generated from the interviews and the plan of action. There was a weekly review of the reflection diary, but the reflection diary was also reviewed monthly and the recorded information in the reflective diary was sorted into relevant and non-relevant data. Only relevant data was carried over to the next meeting. The non-relevant data was filed.

The individual respondents were also interviewed in their respective homes and schools. Every respondent answered all the questions. The same questions were used for the interviews of all respondents for confirmation. The interviews were structured as indicated in Appendices 4 and 5.

3.5 DATA ANALYSIS AND INTERPRETATION

The purpose of data analysis is to reduce data to an intelligible and interpretable form

so that the relations of research problem can be studied, tested and conclusions drawn. The Atlas.ti programme was used to code, categorise and identify the themes. The data recorded was transcribed. The collected data was transcribed (typed) so that it could be read and edited for accuracy. The researcher decided on the questions. The research question was based on the assumptions, reviews of the literature and insights of the participants. The data collected was analysed by using the data matrix (see Appendix 6). The data matrix was based on the questions and the responses to the questions.

On the basis of the assumptions, categories were derived based on the following questions: Who are the victims of child sexual abuse? Who are the perpetrators of child sexual abuse? How does a sexually abused child behave? (See appendix 4.)

The analysis of data was done according to the interviewed groups. The interviewees' responses were coded at different levels. The interviewees explored their perceptions of the strategies to encourage community participation in reducing the child sexual abuse problem. The analysis of data led to the construction of guidelines along which child sexual abuse can be reduced. The unit of analysis was the Vhembe community: educators, nurses, social workers, church leaders, policing staff, traditional leaders and members of the civic organisation.

3.6 DATA PRESENTATION

The final report is presented in this PhD dissertation. This report provides guidelines to encourage the community to become involved in the reduction of child sexual abuse. Recommendations for implementation and further research are also made. The dissertation will be used as a source of information for encouraging the

community to participate in the fight against community-based problems; more especially child sexual abuse.

3.7 CONCLUSION

This chapter discussed interview techniques as methods to collect data. The participatory action research approach as adopted to collect data was also explained. The chapter indicated the sample of the focus group interviewed. A broad framework of data generation, data analysis and data presentation was also provided. The research findings are presented in Chapter Four. This is followed in greater detail by an analysis and discussion of the results and the interpretation of the findings.

CHAPTER FOUR

PRESENTATION OF THE FINDINGS

4.1 INTRODUCTION

This chapter reports the responses of all the different target groups to the interview questions. These include the responses of educators, nurses, social workers, church leaders, traditional leaders, members of the civic organisation, policing staff and the Victim Empowerment Group as well as the focus group's responses and individual responses to the questions. This chapter is comprised of four sections. The first section (4.2) reports the responses of the focus groups, the second section (4.3) reports the responses of the individuals, the third section (4.4) provides the responses of the Life Orientation educators, while the fourth section (4.5) presents portraits of both victims and perpetrators.

4.2 FOCUS GROUP'S RESPONSES TO INTERVIEW QUESTIONS

The focus group's responses were recorded on audio-tape and then transcribed. The interview questions were based on the different themes. Below are the responses to questions based on the following themes:

4.2.1 Question 1: Recent cases of child sexual abuse

The focus group indicated that two children were repeatedly sexually abused by their father until 2010 when both became pregnant. The elder sister had two children by her father while a younger sister had one child by her father. The mother of the two

children was aware of such sexual abuse but she remained silent in order to sustain her marriage. The problem was disclosed after the younger sister's womb was damaged and she was forced to go to a clinic for consultation. The younger sister's baby died and was buried in secret by the father and his daughter. The case was taken to the social workers by the community and the police intervened. The man was arrested immediately. The incident occurred in the Khakhu area. The focus group member's words:

Havha munna vho vha vha tshi dzulela u fhelekedza vhana vhavho u reda khuni dakani. Duvha line vha tuwa na munwe vha ita zwa vhudzekani na onoyo wa lelo duvha. Mme a vhana vhone vho swika he vha zwi divha fhedzi vha si ri tshithu ngazwo. Zwo vho divhea musi munwe a tshi vho lwala o ya kiliniki hea vho amba zwothe.

When translated into English it means:

This man usually accompanies his daughters to fetch wood from the forest. Whoever will be accompanied on that particular day, he would have sex with her. Their mother knew about the abuse, but she kept silent about it. The incident was disclosed when one of the daughters visited the clinic.

Again some members of the focus group indicated that such cases of child sexual abuse are reported almost daily to police stations. Most of the incidents of sexual abuse occur between step-fathers and step-children. It appeared that the sexually

abused child does not easily forget the days of the incident because she can easily narrate the whole story. Some of the abused children do not want to go back to their parents. They do not have confidence or trust in their fathers. The children lose friendships and as subsequently become isolated.

In addition, some members of the focus group indicated that educators sexually abuse children at school. For instance, on 10 March 2011 it was discovered that a teacher was repeatedly sexually abusing an 11-year-old child. The incident occurred in one of the secondary schools in the Thohoyandou area. At the time of the interviews, the educator was suspended from his duties at school.

In 2009 an educator (a school principal) from a secondary school in the Khakhu area was suspended and finally dismissed after sexually abusing a child of 14 years old. This child reported that she had been sexually abused many times by her educator. She was promised that she would be passed if she could keep the secret. During the subsequent hearing, many other children gave evidence that they too had been given the same promise. At the time of the interviews, records were still available. Children were angry because some children were proceeding to the next grade not because of hard work but as a result of sexual favours (abuse).

Some of the members of the focus group indicated that another recent case involved a boy and his sister. The two children were left alone without any responsible adult person. The boy usually came back home drunk and would then sexually abuse his sister. The incident was disclosed by the sexually abused child who reported it to the community. The community reported the case to the police who intervened immediately. Such cases of abuse are frequently reported to the police by the community. Some of these cases occur where boys and girls share the same room.

A recent case of sexual abuse occurred on December 2010 between two boys: one of them was the uncle of the younger one. The two boys shared a room and every night when the uncle returned home, he abused his nephew. Finally, the little boy reported the abuse to his parents. After a long time, the case was revealed to the community following a child sexual abuse awareness campaign which was organised by the Community Policing Forum, social workers and police. The campaign was organised because child sexual abuse cases in the community under study showed no signs of abating.

A strange incident involved a well-known elderly man in the community who was said to have promoted child sexual abuse. He instructed children to have sex in his presence. The boys were taught how to engage in sexual activities and the children abused each other before him. He even congratulated them for their performance. The children themselves revealed the incidents to the community who subsequently held meetings to discuss the problem until it was reported to the police.

In another case, a boy was sexually abused by a man who pretended to be his guardian in the Khakhu community since 2010. The man stayed with the boy as if he cared for him, but he was abusing him sexually. The boy became extremely troublesome at school. The incident was disclosed to educators by the boy's relative who knew what was happening at the time of the research.

In a most unusual case a mother encouraged her children to have sex with different men in order to get money. The children started their business as instructed by their mother and ultimately the whole family became involved in the business together with the mother. The incident was disclosed by the children who indicated to the

community that they were getting more clients than expected a day. The community discussed the problem with the mother concerned.

Since most such incidents are not documented, one of the objectives of the study was to record them (see Chapter One).

The above cases of child sexual abuse were the recent cases disclosed by the focus group. Some of these cases were reported to the police while others were not reported but only discussed at community level. The focus group indicated some of the factors that appear to contribute to child sexual abuse.

4.2.2 Question 2: Factors that contribute to child sexual abuse

The focus group highlighted a number of factors that contribute to child sexual abuse. These factors are discussed in the sub-sections below.

4.2.2.1 Alcohol-related factors

The focus group indicated that most of the children were sexually abused during the night after they had been sent to tuck shops and taverns by their parents. On the way they encountered drunken boys and men. Some of the tuck shops are next to places where alcohol is sold. There were cases of children who were sexually abused next to such places.

4.2.2.2 Pornography

The focus group also pointed out that there are children who are drawn into sexual activities after being exposed to pornography. After children have been exposed to phonographic material they are easily tempted to have sex with anybody they encounter. Such cases are also reported to the Victim Empowerment Centre. The

Victim Empowerment Group takes the case back to the community before the police staff can intervene.

4.2.2.3 *Overcrowding*

The focus group indicated that poverty is one of the factors that contribute towards child sexual abuse. Parents share the same room with their children who happen to see all their parents' sexual activities. Children find it easy to practise what they see from their parents. If brothers and sisters share the same room, this will also have an impact on the behaviour of the children. Children abuse each other sexually without being aware of the consequences.

4.2.2.4 *Hunger or basic food requirements*

When children do not have pocket money they are tempted to keep sexual abuse secret. Children are easily sexually abused by their educators who promise to provide them with lunch; most of the cases of child sexual abuse by educators fall within this category. A child will hardly speak out if she or he is given money.

4.2.2.5 *Myths or beliefs around HIV/AIDS*

Since some people still believe that by having sex with a child they can get rid of HIV/AIDS, this is another way of promoting child sexual abuse. They think that having sex with young girls will help in the cleansing of HIV/AIDS. Because most of the people in this community believe this myth, child sexual abuse is still a common occurrence in this area.

4.2.2.6 *Lack of parental guidance*

Lack of parental guidance is one of the factors that contribute to child sexual abuse.

Parents do not want to be open with their children and do not inform them of the effects of having sex at an early age. Parents do not want to teach their children the facts and therefore neglect their duty as parents. Most of the community members have shifted their responsibilities to educators.

4.2.2.7 Families without parents

Child sexual abuse occurs extensively in child-headed families. Parents leave their children alone without somebody to take care of them. Seeing that there is no responsible adult, they abuse each other sexually. Children come back home late at night, knowing that nobody will question them. Children alone cannot manage their families; instead they experiment with dangerous practices.

4.2.2.8 Human trafficking

The recruitment of children by adults who pretend to provide them with employment is increasing in this community. Some of the children are recruited with promises of being sent to tertiary institutions to further their studies or to work. This strategy of recruiting children is prevalent in the community. People from neighbouring countries are also recruiting children in order to abuse them sexually.

4.2.2.9 Basic needs

There are parents who are only interested in money and they think that to have girls at home means to have more money. These parents ask their children to marry at an early age. The children are often forced to marry old people they do not love as long as the parents receive bride-money (*lobola*). The children do not want to show disrespect towards their parents and consequently marry men they do not love. Most of these children who are married to old men return home after realising that they are

being abused. Such cases are usually not reported to the police, but the community is aware of this problem.

4.2.2.10 *Decaying morality*

The behaviour of parents, and more especially mothers who do not respect their husbands, also contribute to the sexual abuse of children. Children copy what their mothers do every day and as such they become the victims of sexual abuse. Children who are under age are frequently found drinking in the taverns, more often than not they pay for their drinks by selling their bodies.

To conclude this section: in view of the responses of the focus group, it is clear that there are a number of factors contributing towards child sexual abuse, such as those discussed above. The community needs to address these issues. According to the focus group, there are still more undisclosed contributing factors. In the discussions and interviews, the focus group indicated the target group of this sexual abuse as well as the perpetrators.

4.2.3 Question 3: The victims of child sexual abuse

The focus group indicated that both boys and girls are the victims of child sexual abuse although the sexual abuse of boys is not as prevalent as the sexual abuse of girls. Although there was no substantiating documentation, members of the focus group claimed that most of the abused girls were younger than thirteen years of age, while most of the abused boys were under fifteen years. Boys are mostly abused by women who force them to have sex with them, more especially after drinking. Some of the boys are abused by women who are single parents. In the words of one of the focus group members:

Vhatukana vha tambudziwaho lwa vhudzekani ndi vhane vha nwa halwa na vhathu vhahulwane. Vhasadzi vha tou vha kunga hezwi vho no kambiwa vhothe. Milandu heyi minzhi yayo a i potivi i pfala nga u fhilahela ha mubebi wa mutukana vho no zwi pfa. Vhanwe vhana vha tambudwa lwa vhudzekani nge mubebi a vha eethe sa mme. Milandu yo raliho i hone yo ripotiwaho nga vhadzulatsinit.

When translated into English it means:

Boys who happened to be abused sexually are those boys who drink liquor with adult people. Women usually invite them to have sex after drinking. Most of these cases are unreported but this happens to be disclosed after the boy's parents would have known or by the neighbours. Such cases are registered at police stations.

4.2.4 Question 4: The perpetrators of child sexual abuse

The focus group indicated that educators and parents are often the perpetrators of child sexual abuse. They indicated that businessmen, some foreigners and some children are also perpetrators.

The responses of the focus group indicated that child sexual abuse continues to be a community-based problem. The interviewees pointed out that there some child sexual abuse cases were still unreported. Their responses helped the researcher to arrive at the conclusions and recommendations of the study. The focus group's responses are confirmed by the individuals' responses to the questions.

4.3 INDIVIDUALS' RESPONSES TO THE INTERVIEW QUESTIONS

This section provides the responses of educators, nurses, church leaders, social workers, traditional leaders, members of the civic organisation, policing staff and the Victim Empowerment Group to the interview questions.

The individual interviews were conducted. The interview questions were the same for everyone. Their responses to the interview questions were grouped according to their experiences regarding child sexual abuse. Their responses were audio-recorded and then transcribed by the researcher. Their responses are provided below in tables.

Their responses to each interview question are in each table.

4.3.1 Question 1: Knowledge of child sexual abuse

Educators	Nurses	Social workers	Church Leaders	Police	Traditional	Victim Empowerment Group	Civic Organisation
Educators indicated that they knew of a number of child sexual abuse cases, both reported and unreported. They further indicated that some of the cases were committed by educators; others	The nurses pointed out that there are children who visit clinics after having been sexually abused. These children are usually referred to the clinic by their educators after discovering that the child is	The social workers disclosed that cases of child sexual abuse had been brought to their attention. They further indicated that they referred the cases to the Victim Empowerment	The church leaders indicated that they knew about many cases of child sexual abuse. Some of the incidents occurred with children who go to church. They further commented that	The policing staff indicated that many cases of child sexual abuse are reported to the police station. They indicated that such cases are usually reported after a long time because the	The traditional leaders indicated that a number of child sexual abuse cases had been reported to them. Some of the cases were reported to the social workers who in turn informed them about such	The Victim Empowerment Group also indicated that a number of cases of child sexual abuse had been reported to this organisation. They stated that they work hand in hand with the police and social	The members of the civic organisation disclosed that a number of child abuse cases had been reported to them. They indicated that some of the known cases had not been reported to them.

Educators	Nurses	Social workers	Church Leaders	Police	Traditional	Victim Empowerment Group	Civic Organisation
by parents. One educator commented:	behaving strangely.	Group and the police. Base on their experience, they felt that the victim should not be interviewed before many people. One of the social workers remarked:	some of the cases occur during the night of a church service. In the words of one church leader:	community do not report the cases promptly.	cases. They further pointed out that some cases are never reported.	workers. In the words of the Victim Empowerment Group's representative:	One of the members of the civic organisation stated:
<i>Vhana vho da vhari, vha khou toda u phasiswa ngauri hu na</i>		<i>Munwe nwana o vha a tshi khou tambudzwa Iwa vhudzekani. Musi</i>	<i>Munwe mutukana o do kombetshedza munwe nwana</i>			<i>Munwe munna wa minwaha i padaho mahumi mararu o</i>	<i>Murathu na mukomana vhana vha mme muthihi vho ri u</i>

Educators	Nurses	Social workers	Church Leaders	Police	Traditional	Victim Empowerment Group	Civic Organisation
<p><i>munwe nwana o phasiswaho nge a lala na mudededzi. Nwana o phasiswaho o ri a tshi vhudziswa a mbotenda uri o tenda u lala na mudededzi uri a phase. Hambo di takuwa kheisi henefho. Munwe nwana o sumbedza uri mubebi wawe u</i></p>		<p><i>zwi tshi swika kha tshitshavha tsha henefho, tsha ri nwana u tea u da a vhudziseswa phanda ha vhathu. Nwana o ri u swika phanda ha gogo a si tsha kona u fhindula dzi mbudziso. Nga murahu ndi hone ri tshi mu vhidza rine a kona u ri vhudza</i></p>	<p><i>vhusiku ha musi hu na mulindelo a mu isa mudini wa hawe. Mutukana a lala na nwana wa vhathu vha tshi khoumu toda kerekeni. Lo ri lit shi tsha nga matsheloni nwana a vha u ya hayani. O ri u swika vhabebi vha tshi mu vhudzisa a amba</i></p>			<p><i>tambudza nwana wa minwaha ya fumi na mivhili nga 2010. Hoyu munna o ri u vhona u ri vigenza nwana ndi thukhu a vhuya a tou shumisa na lufhanga u i ngedzedza. Munna hoyu o ri u fhedza a fhisa vigenza ya nwana uri hu pfi nwana o tou swa nga</i></p>	<p><i>lwa vha nga vha sa vhulahana. Nndwa yo do thoma nga murahu ha musi vhanwe musadzi vho fha mukomana nwana wavho wa minwaha ya fumi na miraru. Musi vha tshi vhona mukomana a sa vhafhi tshelede vha mu fha murathu. Ha mbo</i></p>

Educators	Nurses	Social workers	Church Leaders	Police	Traditional	Victim Empowerment Group	Civic Organisation
<i>mu kombetshedza u ita zwa vhudzekani na vhathu vhahulwane uri vha wane tshelede. Nwana onoyo o do fhedzisela o litsha na tshikolo.</i>		<i>uri zwo itea hani. Mulandu hoyu wo i tea nga 2010.</i>	<i>uri o vha o kokodziwa nga munwe mutukana. Ndi hedzwi vha tshi disa mafhungo kerekeni vhafunzi vha a dzulela. Zwithu hezwi zwo itea nga Lara 2010.</i>			<i>mulilo. Mulandu wonoyu wo ri swika r ambo divhadza mapholisa.</i>	<i>vha u lutanya murathu na mukomana ngeno munwe na munwe tshi toda u lala na nwana hoyu. Mafhungo haya o itea nga luhuhi 2011.</i>
When translated into English it means:		When translated into English it means:	When translated into English it means:			When translated into English it means:	When translated into English it means:

Educators	Nurses	Social workers	Church Leaders	Police	Traditional	Victim Empowerment Group	Civic Organisation
<p>One day children approached the principal and demanded to pass because there was a child who had passed because she had an affair with an educator. The child who was passed admitted that an educator had had sex with her in order to</p>		<p>A certain child was sexually abused and the incident came to the community's attention. The child was asked to come to explain before the community how such abuse had occurred. The child could not explain before the</p>	<p>A certain boy forced a girl to his home during the night of the church prayer meeting. The boy had sex with the girl while her parents were looking for her the whole night. In the morning, the girl went back home. On her arrival her</p>			<p>'A certain man of thirty years old sexually abused a child of twelve years old in 2010. After realising that the child's vagina was small, he widened it by cutting it with a knife. After having sex with the child, he tried to burn the girl's</p>	<p>The two brothers nearly killed each other after a mother of thirteen years old had given her elder brother her child. After realising that the elder brother had no money, she asked the younger brother to have sex with her child so that</p>

Educators	Nurses	Social workers	Church Leaders	Police	Traditional	Victim Empowerment Group	Civic Organisation
pass. The case was reported to the office of education but unfortunately the child left school because the educator concerned threatened her.		gathering of people or answer the questions put to her. Later the child was called by the social workers where she narrated the whole story. The incident occurred in 2010.	parents questioned her and the girl told them that a boy had forced her to his home where he had sex with her. The incident occurred in 2010.			vagina so that people could not see that he had used a knife. The case was reported to the Victim Empowerment Group who referred the case to the police'.	she could get money. Suddenly a fight started between the brothers. The incident occurred on February 2011 in the Khakhu area.

The responses of all individuals to the interview question indicated that child sexual abuse is a community-based problem. They reported that there are many cases of which some are unreported. The individuals narrated different stories of sexually abused children.

4.3.2 Question 2: The identification of sexually abused children

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators pointed that a sexually abused child can be identified by her or his passiveness in the classroom and lack of concentration. The child displays withdrawal symptoms and is</p>	<p>One of the nurses indicated that a sexually abused child is identified by aggressiveness and depression. Such a sexually abused child is very reluctant to share with other children. Another nurse indicated that a sexually</p>	<p>The social workers pointed out that a sexually abused child often cries. They further indicated that such a child is always shy of speaking with other people – adults or children. Such an abused child</p>	<p>The church leaders mentioned that a sexually abused child is identified by poor performance in class. They further indicated that an abused child can also be identified by passivity in group work. Such a</p>	<p>The policing staff mentioned that a sexually abused child does not play with other children. They also commented that such a child is always shy of other people. They pointed out that a sexually abused child is always alone.</p>	<p>Traditional leaders mentioned that sexually abused children suffer from loneliness. Such abused children do not have friends. They further indicated that these children are very shy to talk to people.</p>	<p>The Victim Empowerment Group indicated that sometimes the child's clothes will be covered in blood and torn. A sexually abused child can suffer from sexually transmitted diseases and finds it painful to</p>	<p>The members of the civic organisation pointed out that a sexually abused child does not walk properly. They further mentioned that a sexually abused child can have abnormal discharges. They indicated that</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
always shy.	abused child cannot walk properly and often uses gestures to express herself. She further indicated that such an abused child is identified by her damaged and bloodied vagina. Such an abused child is always afraid of any man. They	appears to be frustrated. They also mentioned that a child who has been sexually abused for the first time can hardly explain how the abuse occurred but just responds by crying. A child who has been abused several times can explain how such abuse	child will often cry for no apparent reason or just leave the classroom without a word. Another church leader commented that a sexually abused child can usually be identified by her or his physical appearance. The child does not	She appears to be thinking of what had happened in her life. Such a child does not walk properly like other children.	These children can also be identified by the deterioration of their performance at school when they start to score lower marks than before.	urinate. Sometimes a sexually abused child becomes pregnant. The whole group indicated that the child's performance at school deteriorates.	such a child is always afraid of any adult. The health of a sexually abused child deteriorates slowly. If such child happens to talk, she talks at the top of her voice. They also indicated that a sexually abused child can suffer from sexually transmitted

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The group indicated that a sexually abused child does not play with other children. She or he does not work with other classmates. The child isolates herself from other children.</p>	<p>The nurses mentioned that a sexually abused child does not cooperate at school. The child is always alone and does not want to speak to anybody. Such a child is always aggressive in class. Another nurse indicated that this child</p>	<p>The social workers pointed out that a sexually abused child is not free, wherever she happens to be. Such an abused child is always afraid of adults. They further indicated that an abused child does not want to be married even</p>	<p>The church leaders pointed out that a sexually abused child appears to be suffering from an inferiority complex. The child seems to be frustrated. An abused child seems to prefer being alone. They also said that such a child</p>	<p>The policing staff pointed out that a sexually abused child is never free, wherever she or he is. They further indicated that the child seems to be thinking of what had happened in her life. The Victim Empowerment Group indicated</p>	<p>The traditional leaders indicated that sexually abused children are always unclean. They further indicated that such children are too ignorant to follow the instructions of their seniors.</p>	<p>The victim empowerment group indicated that sexually abused child is shy to talk to adult people. The group further pointed out that such a child is always alone.</p>	<p>The members of the civic organisation indicated that a sexually abused child does not take care of her personal hygiene. They observed that such a child appears to be incompetent at whatever she does. They also</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
	needs sex with any man.	though her parents ask her to marry someone. Again they indicated that such an abused child does not cooperate in class.	is always quiet.	that a sexually abused child is very afraid of people. The group also mentioned that such a child is always upset when she makes mistakes. The Victim Empowerment Group further indicated that such an abused child cannot be			mentioned that such a child is not free, wherever she happens to be.

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
				stable, wherever she is.			

The respondents indicated that a sexually abused child is never free, does not cooperate in class and suffers from feelings of inferiority. They further mentioned that such a child does not want to be married and is always frustrated. Their responses indicated that a sexually abused child can easily be identified in the community through his or her behaviour.

4.3.4 Question 4: Victims and perpetrators of child sexual abuse

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators mentioned that, from what they see in the community, girls are mostly victims of child sexual abuse – more especially those younger than 13 years of age. Educators indicated that	The nurses indicated that although boys are also victims of sexual abuse, girls are the victims in most cases. The nurses indicated that most of the perpetrators are HIV positive people. They	The social workers mentioned that primary school girls are the most often the victims of child sexual abuse. In addition, they indicated that secondary school girls are sexually abused as a	Church leaders indicated that young girls are mostly the victims of child sexual abuse and those adults, more especially men, are the perpetrators of child sexual abuse. Another church leader	The policing staff indicated that girls are most frequently the victims of child sexual abuse. Boys may sometimes be sexually abused. They indicated that child sexual abuse is generally	The traditional leaders mentioned that young girls are more often the victims of sexual abuse than boys. They further indicated that boys are also abused sexually by older women, more especially	The Victim Empowerment Group mentioned that most victims of child sexual abuse are young girls and that very few boys are abused sexually. The group further indicated that most of the girls	The members of the civic organisation mentioned that young girls are mostly the victims of child sexual abuse, especially those whose parents work far from their homes. Children whose

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>parents are often the perpetrators of child sexual abuse; more especially step-fathers. Another educator indicated that educators and children themselves are also most often the perpetrators of child sexual abuse. They pointed out that</p>	<p>further indicated that step-parents, more especially step-fathers, are the most frequent perpetrators of child sexual abuse, but that educators and other relatives are also perpetrators of child sexual abuse. One nurse commented that</p>	<p>result of peer pressure. They indicated that boys are abused sexually but comparatively less so than girls. They indicated that men and women who are HIV positive are the perpetrators of child sexual abuse. Women who are always at odds with their</p>	<p>indicated that parents and relatives also sexually abuse their children or relatives.</p>	<p>committed by step-fathers and educators but that even ordinary community members are sometimes the perpetrators of child sexual abuse.</p>	<p>those who drink a great deal. Parents are also indicated to be one of the perpetrators of child sexual abuse.</p>	<p>abused are disabled ones. This also includes mentally disturbed children. The Victim Empowerment Group pointed out that parents, more especially fathers, are the perpetrators of child sexual abuse. They had found that very</p>	<p>parents are heavy drinkers and drug abusers and young girls from poor families are also the victims of sexual abuse. They indicated that step-children are very often the victims of sexual abuse; step-fathers are mostly the perpetrators.</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
children happen to report such cases to them.	strangers also abuse children sexually.	husbands are also often the perpetrators of child sexual abuse. Such women abuse boys and even their children sexually. They indicated that strangers are also the perpetrators of child sexual abuse.				few mothers abuse their children sexually. The Victim Empowerment Group further indicated that children themselves sometimes abuse each other sexually.	Such abuse is rarely disclosed. Comparatively speaking, girls are more often sexually abused than boys.

The responses of all individuals to the interview question indicated that educators, step-parents, and women who are always at odds with their husbands are mostly the perpetrators of child sexual abuse. They pointed out that young girls are sexually abused more often than boys.

4.3.5 Question 5: The relationship between child sexual abuse and substance abuse and poverty

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators indicated that people who happen to commit child sexual abuse are mostly found to have been under the influence of	Nurses indicated that there is a relationship between substance abuse and child sexual abuse. They further indicated that the	The social workers indicated that there is a relationship between substance abuse and child sexual abuse. They indicated that	The church leaders mentioned that there is a relationship between substance abuse and child sexual abuse. Drinkers	Policing staff mentioned that there is a relationship between substance abuse and child sexual abuse because most of the	The traditional leaders indicated that there is a strong relationship between child sexual abuse, substance abuse and poverty.	The Victim Empowerment Group indicated that there is strong relationship between substance abuse and child sexual	The members of the civic organisation pointed out that a high percentage of sexually abused children drink alcohol and take drugs. The

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>drugs or alcohol. They further indicated that at school, children who happen to sexually abuse each other often take drugs; even during breaks. Educators indicated that there is relationship between child sexual abuse and poverty. In</p>	<p>perpetrators are always under the influence of alcohol or drugs when they commit the abuse.. One nurse pointed out that there is a relationship between child sexual abuse and poverty. She further indicated</p>	<p>most of the perpetrators are drinkers and some of perpetrators are drug abusers. They further indicated that since drinking mothers leave their children alone, the children are vulnerable to being sexually abused. They</p>	<p>and drug abusers are both the perpetrators and the victims of child sexual abuse. They further indicated that after drinking, adults need sexual intercourse with whoever is available. They also indicated that children who do not get</p>	<p>perpetrators are heavy drinkers and drug abusers. They further pointed that drinkers trap children by buying them liquor or drugs. They indicated that some of the sexually abused children drink liquor and also take drugs. Drinking parents</p>	<p>They pointed out that most of the victims and perpetrators are drinkers and drug abusers. There are children who are sexually abused because they would be in need of food or money. Due to poverty, some of the children are encouraged to marry old men</p>	<p>abuse and that drug abuse and child sexual abuse go hand in hand. The Victim Empowerment Group further showed that drinking children are mostly abused by drinking adults. The group also indicated that, in most of the cases, the</p>	<p>perpetrators are also drug abusers and heavy drinkers. According to them, therefore, there is a strong correlation between substance abuse and child sexual abuse. They showed that there is a strong relationship between child</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>most cases, children who do not get full support from their parents are the victims of sexual abuse. These children can hardly disclose such abuse because they want money. Due to poverty, some of the parents force their children to</p>	<p>that most of children allow themselves to be abused sexually because they are hungry. Some of the children are left alone by their parents who are forced by poverty to work far away from their homes. Those children who are left alone are usually the victims of</p>	<p>showed that there is a relationship between child sexual abuse and poverty. They further indicated that most of children are sexually abused after being promised money. Parents who do not give full support to their children</p>	<p>enough support from their parents are the victims because children need money and some have to share the same bedroom because they are poor.</p>	<p>also promote child sexual abuse. They indicated that there is relationship between child sexual abuse and poverty. Most of the abused children were found to be after money. They further indicated that perpetrators use</p>	<p>they do not love. Perpetrators are more aggressive after drinking alcohol while victims are less defensive after drinking alcohol or taking drugs.</p>	<p>perpetrators happen to be drinkers and drug abusers. The Victim Empowerment Group also mentioned that there is a strong relationship between child sexual abuse and poverty. The group indicated that parents who do not give full</p>	<p>sexual abuse and poverty. Children from poor families need money and food like other children, so they agree to have sex with whoever can approach them, irrespective of age gap. Children from poor families cannot resist</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
marry at an early age.	child sexual abuse. Another nurse indicated that there is no relationship between child sexual abuse and poverty; even children from rich families are abused sexually.	prompt them to have sexual intercourse with old men because these men give them money. Again they indicated that there are parents who force their children to marry at an early age. They also indicated that children abuse each other		money to trap them.		support to their children promote child sexual abuse. Their children are always at risk. Some of the children are sexually abused because they are promised money and food. A poor family background promotes child sexual abuse; for	peer pressure, so they have sex to be accepted by peers.

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
		because they share a bedroom.				example, a child might leave home in the evening to watch television elsewhere and be abused on her way back home.	

The responses of all individuals to the interview question indicated that there is a strong relationship between child sexual abuse and substance abuse. They further pointed that most of the incidences of child sexual abuse occur after drinking or taking drugs. Poverty also played a role since most of the children who do not disclose the abuse are from poor families and they are given money after being abused sexually.

4.3.6 Question 6: Responsibility for handling child sexual abuse cases

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators mentioned that child sexual abuse cases are handled by the civic structures, social workers, police and local councils. They further indicated that civic structures refer the case to the traditional</p>	<p>Nurses indicated that child sexual abuse cases are handled by civic structures, the Victim Empowerment Group, nurses, community rehabilitation groups, social workers and the police. They further stated</p>		<p>The church leaders indicated that child sexual abuse cases are handled by the police via social workers. They further indicated that traditional leaders also contribute to the handling of child sexual abuse cases. The social</p>	<p>The policing staff claimed that cases of child sexual abuse are handled by the Victim Empowerment Group first. Thereafter the Victim Empowerment Group refers the case to the</p>	<p>According to the traditional leaders, educators are also responsible for the handling of such cases because they can easily discover if the child is abused sexually if the child's schoolwork</p>	<p>The Victim Empowerment Group pointed out that child sexual abuse cases are handled by social workers, nurses, home-based care groups and Childline groups. The Victim Empowerment Group also</p>	<p>The members of the civic organisation suggested that the civic structure is responsible for handling child sexual abuse cases together with the community policing forum. They further indicated that the</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>leaders who call a local council meeting. The traditional leaders refer the case to social workers who thereafter refer the case to the police. They said that records were not taken into consideration as long as the case could be dealt</p>	<p>that traditional leaders also contribute in the handling of child sexual abuse cases.</p>		<p>workers mentioned that child sexual abuse cases are usually handled by the families affected, because family members are afraid of each other. They further indicated that some cases are handled by the tribal council which usually</p>	<p>police.</p>	<p>shows signs of deteriorating. They mentioned that parents and social workers are responsible for the handling of child sexual abuse together with the police, civic structures, tribal councils and the community policing forum.</p>	<p>handles child sexual abuse cases together with the police. The Victim Empowerment Group indicated that all the parties mentioned play important roles in the settling of cases.</p>	<p>two structures refer the case to the tribal council which will refer the case to the police. They contended that these structures are not effective.</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
with.			fails because most of the children do not want to speak out in front of many people. They indicated that very few cases are referred to social workers.				

The responses of the individuals to the interview question indicated that educators, nurses, social workers, church leaders, traditional leaders, the Victim Empowerment Group, the police and the civic group are all responsible for child sexual abuse. Therefore the entire community is responsible.

4.3.7 Question 7: Solutions to protect children

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators indicated that a child can be protected by reporting abuse to civic structures and/or social workers. Children should be advised always to remain part of a group and to be frank with their educators.</p>	<p>The nurses suggested that children can be protected by not allowing them to play away from their homes. Children should be advised to remain in groups and they should be warned against following strangers. The</p>	<p>The social workers suggested that a child should never be left alone and that a child should not be sent to a tuck shop late at night. They further indicated that a parent should always know where their</p>	<p>The church leaders suggested that the child can be protected by always being in the care of parents or some other responsible adult person. They argued that if the perpetrator were to be given heavy</p>	<p>The policing staff indicated that children can be protected through keeping them engaged in sporting activities such as soccer and netball. The awareness campaigns can also play a role protecting children. They</p>	<p>The traditional leaders suggested that awareness campaigns should be organised through community education programmes and that child sexual abuse should be discussed at all</p>	<p>The victim empowerment group indicated that awareness campaigns can help in the protection of children.</p>	<p>The members of the civic organisation suggested that community education programmes can help in the protection of children by empowering them. Community education</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>Another educator indicated that awareness campaigns can help to protect the children. The educators held different views on what must be done to reduce child sexual abuse in this community. One educator indicated that this</p>	<p>nurses also suggested that sex education and community education programmes can help to protect them from sexual abuse. The nurses indicated that community must understand the seriousness of child sexual abuse and they recommended</p>	<p>child is. Their view was that a child should be taught who she/he is and what is expected of her/him. Furthermore, a child should be advised not to follow a stranger. They also maintained that parents should be taught about</p>	<p>punishment this would act as a deterrent and thus help to protect the child. They indicated that policing staff should always be visible in the community. Traditional leaders can also play an important part in the protection of the child by</p>	<p>further recommended that a community policing forum be established in order to reduce child sexual abuse. Church leaders should organise conferences for the youth, women and men to guide them along an acceptable way</p>	<p>community meetings. They recommended that the relationship between the tribal council and civic structures be promoted to create awareness of child sexual abuse among the community.</p>		<p>programmes could empower the whole community by offering them training in parenting skills. They felt it was essential for restrictions on alcohol abuse be put in place. A neighbourhood watch organisation could help to</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>goal can be achieved by organising sporting activities, while another educator indicated that children should be involved in the awareness campaigns against child sexual abuse.</p>	<p>that educational programmes for all ages be established to reduce child sexual abuse. They maintained that the available community education programmes must be improved in order to include child sexual abuse on their agendas.</p>	<p>children's rights. They indicated that campaigns against child sexual abuse could help reduce such crimes against children. They were adamant that the penalty for the abuse of a child should be heavy. Their recommendation</p>	<p>regarding child sexual abuse as a community-based problem and discussing this issue at all community meetings. They recommended that all stakeholders must work as a team in order to fight against child sexual abuse and that</p>	<p>of life or to empower them. At school the Life Orientation educators should emphasise ways and means of fighting child sexual abuse. They further pointed out that campaigns on child protection should be organised and that victims and</p>			<p>protect the children. They suggested that community education should include a justice outreach programme in order to protect children. They indicated that Life Orientation educators can contribute to the protection of children by</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
	<p>They also indicated that campaigns directed at tavern and all places of interest, such as schools, churches and local councils, must be organised and that such campaigns should be led by a public figure whose</p>	<p>was that community education programmes should be established to target the abusers.</p>	<p>awareness campaigns must be organised from time to time.</p>	<p>perpetrators have to be involved in the campaigns.</p>			<p>empowering children at school. They discouraged the sharing of bedrooms by boys and girls. They felt strongly that the community must be encouraged to speak out.</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators mentioned that the tribal leadership's role is to organise council meetings to discuss social problems in the community. One educator commented that if the tribal leadership spoke out against the sexual abuse of</p>	<p>The nurses suggested that social workers can identify sexually abused children and they indicated that social workers can provide counselling as well as food and shelter to these children. The nurses recommended</p>	<p>The social workers mentioned that the role of the tribal leadership is to emphasise the protection of a child before abuse can take place. After child sexual abuse, the tribal leadership's role is to refer the case to the social</p>	<p>Church leaders mentioned that tribal leadership's role is to call the perpetrators and victims of sexual abuse together and settle the issue in a kangaroo court. They further indicated that the tribal leadership's role is also to call meetings of the</p>	<p>The policing staff claimed that the tribal leadership's role is to give information on child sexual abuse to social workers and policing staff. They further commented that the tribal leadership should update all stakeholders on</p>	<p>Traditional leaders pointed out that their role is to counsel the victim. They further indicated that they report such cases to police and social workers.</p>	<p>The Victim Empowerment Group indicated that the role of professionals is to make donations to the organisations of sport activities. They further indicated that the professionals' role is to facilitate sporting activities as means of</p>	<p>The members of the civic organisation indicated that the tribal leadership's role is also to call community meetings at which child sexual abuse can be on the agenda. The tribal leadership's role is to confirm the case before it</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>children and identified it as a community problem, the whole community would see the seriousness of the problem. He further indicated that the tribal leadership's role is to involve all stakeholders such as police, nurses and social workers in</p>	<p>that professionals such as educators, social workers and others should organise teamwork among professionals or stakeholders. Professionals should also identify the expertise of each group in order to help a sexually</p>	<p>workers. They acknowledged that the tribal leadership has no skills to treat child abuse cases other than to ask for forgiveness. The social workers pointed out that their role is to organise campaigns against child</p>	<p>youth to warn them against drug and alcohol abuse. Church leaders suggested that social workers should counsel victims and refer victims to the appropriate professionals for assistance. Furthermore, the church leaders</p>	<p>matters regarding child sexual abuse, more especially at tribal councils. They indicated that the role of social workers is to visit schools to establish which community-based problems, such as child sexual abuse, are prevalent. They further</p>		<p>protecting children from sexual abuse. The Victim Empowerment Group suggested that the tribal leadership's role is to organise council meetings. The tribal leadership should also keep statistics of sexually abused</p>	<p>is referred to the police. They further recommended that tribal leadership should to organise traditional schools such as musevhetho, domba and murundu since these schools help to regenerate</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>reducing child sexual abuse. The educators indicated that the role of the social workers is to give counselling to the victims of child sexual abuse. They pointed out that social workers have the necessary knowledge of social problems</p>	<p>abused child. They emphasised that professionals ought to advise the community on how a case can be reported to police. The professionals should make sure that a sexually abused child gets treatment immediately.</p>	<p>sexual abuse and to give support to the abused child and parents. They further indicated that social workers advise the community on the procedures of reporting child sexual abuse. They give counselling to the victim and the</p>	<p>suggested that the role of professionals such as nurses, social workers, educators and others is to organise campaigns against child sexual abuse. They contended that professionals can organise community</p>	<p>indicated that social workers have to organise campaigns against child sexual abuse. They indicated that the social workers' role is to visit homes to support the families of the abused child.</p>		<p>children. The group further pointed out that traditional leaders need create a greater awareness of child protection in the whole community and they should share strategies for protecting children from sexual abuse.</p>	<p>morals. They pointed out that the social workers' role is to support the victim and the family of the victim. They further indicated that social workers have to give counselling to the victim. They mentioned that the role of</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>to identify other kinds of assistance for victims of child abuse. They suggested that sexually abused children should be counselled by professionals such as social workers, nurses and educators. Professionals as well as social workers must try</p>	<p>Such an abused child should be counselled by professionals.</p>	<p>whole family. They indicated that they can call on different victims to share their experiences in order to comfort them and they can help the victims not to commit suicide. They refer the victim to a psychologist for further</p>	<p>education programmes which will include child sexual abuse as a community-based problem.</p>			<p>The Victim Empowerment Group emphasised that the role of the social workers is to counsel the victims and support them by providing food or clothes where possible. The Victim Empowerment Group further mentioned that</p>	<p>the professionals is to facilitate community education programmes. The professionals need to encourage community members to participate in each community education programme. They suggested</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>by all means to restore normal behaviour in the abused child.</p> <p>In the educators' view, the role of the tribal leadership is to call council meetings to discuss child sexual abuse as a community-based problem.</p> <p>The tribal</p>		<p>counselling.</p> <p>Social workers suggested that professionals should organise campaigns against child sexual abuse.</p> <p>They should design posters of child sexual abuse and put them up for all the community to see. A further</p>				<p>social workers can also advise both the victims and the perpetrators on acceptable ways of living in the community.</p> <p>The Victim Empowerment Group suggested that the professionals' role is to organise</p>	<p>that the professionals should help the community to review cultural norms and values which will prevent child sexual abuse.</p> <p>They indicated also that the professionals' role is to organise and sponsor sporting activities.</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>leadership can report sexual abuse to the Victim Empowerment Group or direct to the police. They can organise prevention awareness campaigns in the community and keep statistics of child sexual abuse cases.</p>		<p>suggestion was that professionals should organise community education programmes and that they should share their experiences in the programme with the whole community.</p>				<p>campaigns or become guest speakers in the campaigns. They believed that the professionals' role is to share their knowledge with the community because they can identify community-based problems.</p>	<p>Furthermore, they mentioned that the professionals should play a role at churches by engaging children in Sunday school programmes.</p>

The responses of the individuals to the interview question indicated that the traditional leader's role is to organise council meetings as well as community meetings. They further pointed that the social worker's role is to counsel the victims. Other professionals can organise campaigns against child abuse.

4.3.9 Question 9: The availability of community education programmes in the community

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators pointed out that there are community education programmes such as home-based care centres and a	The nurses mentioned that community education programmes are available although some of the programmes do not focus on	Social workers indicated that community education programmes are not effective which are available.	Church leaders indicated that the available community education programmes are not effective; the community needs people	The police pointed out that community education programmes need to be supported so that they can be effective.	Traditional leaders indicated that community education programmes are available but they are not enough.	The Victim Empowerment Group pointed out that community education programmes such as a home-based care	The members of the civic organisation indicated that community education programmes are available but they are not effective;

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>victim empowerment centre in this community. They claimed that these community education programmes are not effective; therefore, they need the community's support.</p>	<p>child sexual abuse but on feeding and cleaning. However, they indicated that victim empowerment groups and home-based care programmes also focus on child sexual abuse and that HIV/AIDS programmes,</p>		<p>who can help to establish community education programmes that address a variety of community-based problems, including child sexual abuse.</p>			<p>programme and a drop in centres programme (including an orphanage programme and a child-line programme) are available. The Victim Empowerment Group mentioned that some of the programmes are not effective due to poor</p>	<p>these programmes need to be extended to include the child sexual abuse programme. Traditional leaders indicated that community education programmes are available but not effective.</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
	drug abuse programmes and malaria programmes are available in this community.					management. The Victim Empowerment Group indicated that an HIV/AIDS community education programme is also available.	

The responses of all the individuals to the interview question showed that community education programmes are available in the community. They further indicated that the existing programmes are not effective due to a lack of support from the community and Government.

4.3.10 Question 10: Strategies to encourage community participation

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators suggested that community participation can be promoted by campaigns such as door-to-door campaigns against child sexual abuse. Community meetings should be organised frequently to discuss</p>	<p>The nurses suggested that community participation can be encouraged by campaigns focusing on places where there is a concentration of people. They also suggested that someone who had once been a</p>	<p>The social workers proposed that community members can be encouraged by motivating them to report child sexual abuse (e.g. by giving them awards). They further indicated that sporting activities should be</p>	<p>Church leaders suggested that the community should become involved in the fight against child sexual abuse. The council meetings should be organised by the traditional leaders. The church Sunday school programme</p>	<p>Police suggested that sporting activities should be promoted in each community to bring children to gather. They further indicated that this can help to break the silence.</p>	<p>The traditional leaders suggested that invitations to community meetings should be extended to all community members. They further indicated that awards to community builders can be another strategy to encourage all</p>	<p>The Victim Empowerment Group suggested that campaigns can be one of the strategies to encourage community members to get involved in the reduction of child sexual abuse. The group also indicated that another strategy</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>community problems affecting the community. One of the educators indicated that the community should organise celebration parties annually at local councils.</p>	<p>perpetrator of child sexual abuse could be included in the campaigns to share his/her experiences with other people. Where possible, a victim of child sexual abuse can be requested to share his/her suffering with other children.</p>	<p>organised where children and adults can communicate.</p>	<p>needs to be promoted in order to engage children. They indicated that sports days must be organised in the community.</p>		<p>community members to participate in community activities.</p>	<p>is to involve victims and perpetrators of child sexual abuse to present their experiences on child sexual abuse. The Victim Empowerment Group further mentioned that the community should be encouraged to visit prisons</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
						<p>where the perpetrators are incarcerated and hospitals where the victims are taken care of. The members of the civic organisation suggested that child sexual abuse can be included in the church programme to encourage the</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
						community to participate in the reduction of child sexual abuse. At all community meetings, child sexual abuse can be on the agenda to encourage every community member to participate. They further indicated that during sporting activities, child	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
						<p>sexual abuse can be talked about. They pointed out that at school, Life Orientation educators can emphasise the reduction of child sexual abuse. Traditional dances such as tshikona, malende and tshigombela can be used to get the community</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
						together to fight child sexual abuse.	

In their responses to the interview question individuals indicated that campaigns, frequent community meetings, annual celebration parties and council meetings can be used in counteracting child sexual abuse. They also believed that visits to prison, sporting activities and traditional dances such as *tshikona* and *malende* can help.

4.3.11 Question 11: The child protection legislation

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators indicated that	The nurses stated that they	The social workers	The traditional leaders indicated	The police pointed out that	The traditional leaders indicated	The Victim Empowerment	The members of the civic

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
they are aware of child protection legislation. They also emphasised that a child has the right to protection by her/his parents.	know the Child Care Amendment Act, 1999 and section 116 of the Domestic Violence Act, 1998.	commented that they know child protection legislation and are conversant with the legislation on children's rights. They also indicated that a child has the right to protection by her/his parents.	that they do not much about the child protection legislation.	they know about the protection legislation of children.	that they know about the child protection legislation because they attend workshops for traditional leaders. The workshops include topics such as family violence and child sexual abuse. They pointed out that	Group also indicated that they are informed regarding child protection legislation and that they know of children's right to protection.	organisation indicated that only a few members of the community have knowledge of child protection legislation and that the lack of knowledge in the community is the reason for the frequent violation of children's right to protection.

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
					the Domestic Violence Act (1998) helps them to understand child protection legislation.		

The responses of the individuals to the interview question indicated that some people know about child protection legislation, but there are some who do not know anything about the legislation.

4.3.12 Question 12: Organising child advocacy

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators suggested that a child advocacy organisation could be formed by involving all stakeholders who deal with the well-being of children. They recommended that teams or committees should be</p>	<p>The nurses commented that child support groups can be formed in which children will be requested to share their experiences and new ideas. The groups should not consist of sexually abused children only; all</p>	<p>The social workers suggested that they can help to establish a child advocacy organisation by organising teamwork of all the stakeholders. They have the ability to arrange community education</p>	<p>The church leaders suggested that they can help to establish a child advocacy organisation by participating in the team work.</p>	<p>The police indicated that child advocacy organisation could be formed by involving all stakeholders.</p>	<p>The traditional leaders pointed out that they can support any organisation which can fight against child sexual abuse. They further indicated that at all meetings child abuse should be on the</p>	<p>The Victim Empowerment Group commented that a child advocacy organisation can be established by involving all stakeholders who should share their knowledge on child sexual abuse as a community-</p>	<p>The members of the civic organisation pointed out that a child advocacy organisation can be set up by establishing a youth organisation. They further suggested that community education</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
formed.	children whether they are victims of child sexual abuse or not, must be accommodated. They further indicated that perpetrators should not have access to these groups. Doctors can also address these child support groups.	programmes.			programme.	based problem.	programmes can be arranged to promote teamwork.

The responses to the interview question indicated that child support groups are important in each community. The respondents further pointed out that all stakeholders are responsible for organising child advocacy.

4.3.13 Question 13: The best way to encourage the community to report suspected child sexual abuse to the local authorities

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators emphasised that community members must know that such information is confidential and that the name of the informer will	The nurses suggested that community members can be encouraged to report suspected child sexual abuse by introducing a	The social workers also indicated that a suggestion box should be introduced to encourage community members to	The church leaders proposed that workshops on the channels for reporting child sexual abuse should be held for community members.	The police suggested that suggestion box should be introduced to encourage community members to report child	The traditional leaders suggested that one of the best ways to encourage the community to report child sexual abuse is	The Victim Empowerment Group commented that awareness campaigns can encourage the community to report suspected	The members of the civic organisation proposed that a suggestion box be established in clinics and schools to encourage

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>not be mentioned. Another educator indicated that the community must be educated through community education to understand the consequences of child sexual abuse and the impact on the community at</p>	<p>suggestion box at the clinic, the local council's offices and police stations. They further indicated that community awareness campaigns can encourage community members to report child sexual abuse. The community should be aware</p>	<p>report child sexual abuse. They emphasised that the community must know that the police will guarantee the confidentiality of any informers. Policing staff suggested that youth development programmes should be</p>	<p>Community members must be encouraged not to hide any information on child sexual abuse. They further indicated that awareness campaigns should be organised and that suggestion boxes be introduced to encourage the</p>	<p>sexual abuse. They further indicated that police stations open twenty four hours to help community members.</p>	<p>to promote a sound relationship between traditional leaders and civic structures. They further pointed out that the relationship between the community and the police is another way of encouraging the community to</p>	<p>child sexual abuse. They commented that the introduction of a suggestion box can contribute towards motivating the community to report child sexual abuse. The Victim Empowerment Group indicated that the</p>	<p>community participation and guarantee confidentiality. They indicated that awards can encourage community members to report suspected child sexual abuse. A community policing forum can be established to</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
large.	of all community empowerment structures. Such community awareness campaigns should take place more than twice a year.	established to fight against child sexual abuse and that the youth should be engaged in all activities to fight child sexual abuse.	community to report child sexual abuse.		report child sexual abuse.	community should be aware of ethical considerations such as fair treatment towards any individual who can report child sexual abuse.	encourage the community to report child sexual abuse. They pointed out that a toll free number can also encourage the community to report child sexual abuse.

The respondents pointed out that community education programmes are important to encourage the community to report child sexual abuse. The introduction of a suggestion box can also help the community. They further indicated that confidentiality must be emphasised to whoever reports the case to the Community Policing Forum or the police.

4.3.14 Question 14: The relationship between child sexual abuse and educational attainment

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators expressed various views on the relationship between child sexual abuse and educational attainment. One educator indicated that there is no relationship between child	The nurses indicated that there is no relationship between child sexual abuse and educational attainment because community members abuse children irrespective of	The social workers mentioned that most of the cases of child sexual abuse are committed by uneducated people. They further indicated that uneducated people are not controlled by	The church leaders pointed out that there is no relationship between child sexual abuse and educational attainment.	The policing staff indicated that there is no relationship between child sexual abuse and educational attainment. They further indicated that both educated and uneducated people are	The traditional leaders mentioned that there is no relationship between child sexual abuse and educational attainment.	The Victim Empowerment Group pointed out that there is no relationship between child sexual abuse and educational attainment because child sexual abuse is committed by both educated	The members of the civic organisation indicated that there is no relationship between child sexual abuse and educational attainment because both educated and uneducated

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>sexual abuse and educational attainment because even educators are abusing children at school sexually. Another educator indicated that there is a relationship between child sexual abuse and educational attainment</p>	<p>their educational attainment.</p>	<p>consciousness. They commented that very few cases of child sexual abuse are committed by educated people.</p>		<p>involved in the sexual abuse of children.</p>		<p>and uneducated people. They mentioned that children are sexually even abused at school by their educators. What is more, their parents sometimes abuse them sexually at home. Therefore, in their view, there is no relationship</p>	<p>people are abusing children sexually. Some of the uneducated people abuse children based on cultural norms which allow them to marry young girls (lufarathonga). They further indicated that educated people tempt children by</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
because most of the perpetrators are uneducated but heavy drinkers.						between child sexual abuse and educational attainment.	offering them money in order to abuse them sexually. The traditional leaders indicated that there is no relationship between child sexual abuse and educational attainment because both educated and uneducated people have

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
							been shown to be the perpetrators of child sexual abuse.

The responses of the individuals to the interview question indicated that there is no relationship between child sexual abuse and educational attainment. Both educated and uneducated people abuse children sexually.

4.3.15 Question 15: The relationship between child sexual abuse and a myth

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators stated that there is a strong relationship between child sexual abuse and the myth that exists in the community that having sexual intercourse with a young girl or virgin helps in the</p>	<p>The nurses also pointed out that there is a relationship between child sexual abuse and this myth. They claimed that in most cases, the children are sexually abused as a result of this</p>	<p>The social workers indicated that there is a strong relationship between child sexual abuse and this myth.</p>	<p>The church leaders pointed out that there is a relationship between child abuse and a myth. They further indicated that since diagnosis of the HIV/AIDS child sexual abuse has</p>	<p>The policing staff agreed with the observation that the above-mentioned myth is prevalent because people think that by having sex with a young child or virgin can help in the cleansing of HIV/AIDS.</p>	<p>The traditional leaders also pointed out that there is a strong relationship between child sexual abuse and HIV/AIDS and that people believe that by having sex with young girls helps in the cleansing</p>	<p>Similarly, the Victim Empowerment Group indicated that there is a strong relationship between child sexual abuse and this myth. This is one of the factors that contribute to</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
cleansing of HIV/AIDS. This is one of the reasons for abusing children sexually.	belief. They further indicated that most of victims will be HIV positive if they do not report such abuse within 72 hours.		increased.		of HIV/AIDS. They further indicated that by traditional healers promote this belief. They indicated that there are families who have cultural norms and values that encourage child sexual abuse: in those families having sex with children is not a	child sexual abuse. They further indicated that a cultural norm which allows an old man to be married to a young child is also contributing to child sexual abuse.	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
					<p>problem to be reported. These families often force their children to marry at an early age because they believe that children have no right to choose to marry or not their parents decide for them.</p>		

The responses of the individuals to the question indicated that there is a strong relationship between child sexual abuse and a myth.

People still think that there can be cleansing of HIV/AIDS after abusing a child sexually.

4.3.16 Question 16: Whether the municipality is aware of the child sexual abuse problem

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators indicated that the municipality is aware of the child sexual abuse problem and they pointed out that the municipality had set up victim empowerment centres established in the community in</p>	<p>The nurses also indicated that the municipality is aware of this problem. According to the nurses, the municipality is thinking about the problem, but the problem is still continuing. The nurses' responses indicated that they</p>	<p>The social workers commented that the municipality is aware of the child sexual abuse problem. They indicated that social workers had been placed in most of the clinics in the Vhembe district</p>	<p>The church leaders indicated that they were not sure if the municipality is aware of the seriousness of the problem.</p>	<p>The police pointed out that the municipality is aware of the problem. They further indicated that the municipality is providing adequate support to community.</p>	<p>The traditional leaders indicated that they were not sure whether than the municipality is aware of this problem in this community. They further mentioned that the municipality is not involved in the campaigns</p>	<p>The victim empowerment group explained how the municipality is supporting a fight against child sexual abuse on daily basis</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>order to empower the victims of child sexual abuse.</p>	<p>have experience of the child sexual abuse problem. They can therefore contribute to the reduction of child sexual abuse together with other stakeholders such as the church leaders. Their responses helped the researcher to arrive at</p>	<p>together with victim empowerment groups.</p>			<p>against child sexual abuse.</p>		

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
	conclusions and make recommendations.						

The responses of the individuals to the interview question indicated that the municipality is aware of the problem, but does not give full support as expected by the community. They further pointed out that a Victim Empowerment Group has been established in most of the police stations.

4.3.17 Question 17: Whether sex education can help in the reduction of child sexual abuse

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
The educators indicated that	The nurses pointed out that	The social workers	The church leaders indicated	The police indicated that	The traditional leaders	The victim empowerment	The members of the civic

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
sex education can contribute to the reduction of child sexual abuse. They further indicated that children should know when they can be allowed to have sex and the consequences thereof.	sex education can help in the fight against child sexual abuse.	suggested that sex education can contribute to the reduction of child sexual abuse. They argued that parents and educators should be open to children on matters related to sex. Children should know the effects of sexual intercourse. They further indicated	that sex education should be promoted in the community to teach children about sexual abuse.	sex education can help in the reduction of child sexual abuse.	suggested that sex education through traditional education programmes such as vhusha, domba, tshitambo, murundu and mahondwane can contribute to the reduction of child sexual abuse. They further indicated	group pointed out that sex education should be included in the community education programmes.	organisation suggested that sex education can contribute to the reduction of child sexual abuse. Through sex education, children will know why people have sex, when to have sex, who should have sex and the consequences of sex. Through sex

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
		<p>that in sex education, children will learn what to do if someone wants to force them to have sexual intercourse. They appeared to have considerable experience of the problem of child sexual abuse. Their responses indicated that they are ready to work</p>			<p>that in the past, child sexual abuse was not a serious community-based problem.</p>		<p>education they will also gain knowledge of sexually transmitted diseases.</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
		with other stakeholders such as the police to reduce child sexual abuse. Their responses helped the researcher to arrive at conclusions and make recommendations.					

The responses of those who responded to the interview question indicated that sex education can help in the reduction of child sexual abuse. They also pointed out that traditional education programmes can help in the fight against child abuse.

4.3.18 Question 18: What needs to change in the Vhembe community

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>The educators suggested that the community should regard young children as valuable assets of the community. They emphasised that the community must understand that HIV/AIDS cannot be cured by having sexual</p>	<p>The nurses pointed out that the mindset of the community members should change towards child sexual abuse.</p>	<p>The social workers indicated that the attitude of the community towards child sexual abuse should change.</p>	<p>The church leaders also indicated that community should change its mindset. The community should do away with the belief that to have sex with a young girl or virgin can help in the cleansing of HIV/AIDS.</p>	<p>The policing staff contended that the community needs to break the silence; no secret on matters regarding child sexual abuse should be kept. They further indicated that as law enforcement agents they cannot reduce</p>	<p>The traditional leaders indicated that the community must regenerate its culture when fighting child sexual abuse. The traditional sex education programme should be re-established to reduce child</p>	<p>The Victim Empowerment Group suggested that the mindset of the community towards child sexual abuse should change. They further commented that the lifestyle of the community should change in order to reduce</p>	<p>The members of the civic organisation suggested that the community's attitude towards child sexual abuse and HIV/AIDS needs to change. They also indicated that cultural norms and values that</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
intercourse with young girls or virgins. Therefore the community must change its mindset.			<p>They further indicated that community education programmes must include a discussion on this belief.</p> <p>Although the church leaders focused on the spiritual development of the community, it was clear that</p>	<p>child sexual abuse on their own. All community members are responsible for the reduction of child sexual abuse.</p> <p>Stakeholders such as the Victim Empowerment Group should support the police in the</p>	<p>sexual abuse. They further pointed out that the community and the community policing forum should work hand in hand to encourage all community members to report child sexual abuse. They emphasised that</p>	<p>child sexual abuse.</p> <p>Like the other respondents, the Victim Empowerment Group indicated that child sexual abuse is a community-based problem which needs the community's involvement. The Victim</p>	<p>promote child sexual abuse need to be reviewed. They believe that the community must be educated through community education in order to improve their line of thinking. They further pointed out that the community's</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
			<p>they were also concerned about the sexual abuse of children. Their responses contributed to one of the recommendations of the researcher, namely that church leaders should work with other professionals such as social workers to reduce</p>	<p>reduction of child sexual abuse.</p>	<p>the attitude of the community towards the police should change. The cultural norms and values that promote child sexual abuse need to change.</p>	<p>Empowerment Group believes that community can play an important role in the reduction of child sexual abuse.</p>	<p>understanding of the Constitution of the country should improve; in particular the sub-section on human rights. Community members need to decentralise responsibilities. Each community member has to be approachable. All community members need to</p>

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
			child sexual abuse.				attend all community meetings. They also felt that there needs to be a change of heart in the community: the community needs to understand the concept of love from the biblical point of view. Their responses indicate that the

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>Educators indicated that commitment in the community can be enhanced by educational programmes on child sexual abuse. Such educational programmes should be established in the community in order to involve</p>	<p>They pointed out that community education should be promoted to build commitment in the community.</p>	<p>The social workers showed that community projects should be established to build commitment.</p>	<p>The church leaders indicated that churches should organise services at churches to engage the community members at churches.</p>	<p>The police suggested that sporting activities can build commitment in the community more especially the youth.</p>	<p>The traditional leaders indicated that traditional dances should be organised in the community to build commitment because traditional dances can accommodate all age groups.</p>	<p>The victim empowerment group pointed out that community education programmes can build community's commitment.</p>	

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
<p>all community members.</p> <p>Educators based their responses to the interview questions on their experiences.</p> <p>These responses of the individuals to the interview questions helped the researcher to report the findings in</p>							

Educators	Nurses	Social Workers	Church Leaders	Police	Traditional Leaders	Victim Empowerment Group	Civic Organisation
Chapter Five. Some of the individuals could not respond to some of the interview questions.							

The individuals who responded to the interview question indicated that commitment can be enhanced through community education programmes.

These responses of the individuals to the interview questions helped the researcher to report the findings in Chapter Five. All individuals responded to the interview questions to help the researcher to arrive at conclusions and recommendations.

4.4 CONCLUSION

The responses of the individuals indicate that child sexual abuse is a serious community-based problem. It is clear from the responses that an individual alone can not reduce child sexual abuse. Their responses confirmed the focus group's responses to the interview questions. The responses of both the focus group and individuals indicate that community participation is one of the strategies to fight child sexual abuse. Their responses have helped the researcher to report the findings of the fieldwork in Chapter Five. After completing the individual interviews, the researcher realised that Life Orientation as a subject should include the topic of child abuse.

4.5 LIFE ORIENTATION EDUCATORS

This section provides the report of the responses of the Life orientation educators' focus group.

4.5.1 Life Orientation educators' focus group responses to interview questions

The Life Orientation (LO) educators were interviewed at their school. Their responses were audio recorded and then transcribed by the researcher. The same questions were used for the individual interviews in order to determine their experiences which were based on the knowledge of the subject. Their responses to each of the interview questions are provided below.

4.5.1.1 Question 1: *The identification of sexually abused children in class*

The LO educators pointed out that a sexually abused child does not concentrate in

class and that the performance of such a child deteriorates bit by bit. They further indicated that a sexually abused child does not work with other children in class. A sexually abused child does not want to take care of him-/herself any longer. The child finds it difficult to focus and is restless. A sexually abused child's performance in class usually deteriorates. More often than not an abused child starts to lose weight.

4.5.1.2 Question 2: The behaviour of sexually abused children

The LO educators commented that a sexually abused child isolates herself from others and often starts crying when people talk to her. Such an abused child does not feel free in class. They indicated that a sexually abused child does not share books and learning material with other children in class.

4.5.1.3 Question 3: The victims and perpetrators of child sexual abuse

The LO educators mentioned that young girls whose parents are always away from them are vulnerable to sexual abuse. They indicated that children whose parents come home late are also often the victims of child sexual abuse. They also pointed out that parents, especially step-fathers, are often the perpetrators of child sexual abuse and that businessmen have been found to use money to trap children. According to the LO educators, foreigners and educators have been the perpetrators of child sexual abuse in a number of cases.

4.5.1.4 Question 4: The relationship between substance abuse and child sexual abuse

The LO educators identified a strong relationship between substance abuse and child sexual abuse. After taking drugs or alcohol, there is a greater desire for sexual activities. When people are under the influence of drugs or alcohol they do not mind

whether there is an age gap when they need sex. In addition, the educators indicated that after taking drugs, children influence each other to have sex with whoever is available.

4.5.1.5 Question 5: The responsibility for handling child sexual abuse

The LO educators suggested that parents, especially mothers, are more responsible for handling child sexual abuse cases because fathers sometimes happen to be perpetrators. They indicated that civic structures, victim empowerment groups and educators should be responsible for handling child sexual abuse cases. They also indicated that friends can play an important role because the victim might be more open to a friend than to parents. Sometimes a friend might be a witness.

4.5.1.6 Question 6: The perpetrators of child sexual abuse

The educators mentioned that parents, more especially step-fathers, are often the perpetrators of child sexual abuse. Business-men sometimes use money to trap children and to sexually abuse them. They further indicated that foreigners and educators have also been found to be guilty of child sexual abuse.

4.5.1.7 Question 7: How to protect children

LO educators stated that they can help to protect children by advising them how to report sexual abuse immediately. At church, child sexual abuse can be on the agenda to share strategies for child protection. They further indicated that at all community meetings, child sexual abuse should be discussed as a serious community-based problem.

Campaigns by the police involving schools and the community can help to protect

children. They indicated that the media can help in the protection of children.

LO educators indicated that another way to reduce child sexual abuse is to keep them busy with sport as much as possible. They further indicated that community education programmes must include children in cultural activities such as community choirs and theatre. Parents must support their children in their attempts to keep themselves busy. Parents should show that they love their children and appreciate what their children do.

4.5.1.8 Question 8: The professionals' role in responding to child sexual abuse

The LO educators indicated that the professionals' role is to act as role models in the community. They commented that since professionals can be the agents of change in the community, they should involve themselves in all community activities. For instance, they can organise sports to engage children all the time. Professionals can also organise community education programmes that include sex education.

4.5.1.9 Question 9: The strategies to encourage community participation in the reduction of child sexual abuse

The LO educators suggested that awards can be another way to encourage community participation in the community's activities. These awards may be in the form of certificates. They further indicated that sponsorship can help to encourage community participation in the fight against child sexual abuse. In this case professionals should provide sponsorship to help the community to sustain the educational programme.

4.5.1.10 Question 10: The best way to encourage community members to

report suspected child sexual abuse

They pointed out that the introduction of suggestion boxes at school and clinics as well as at police stations can encourage the community to report suspected child sexual abuse. They further indicated that a toll free number may also encourage the community to report child sexual abuse.

4.5.1.11 Question 11: Whether child sexual abuse is related to educational attainment

They indicated that there is no relationship between child sexual abuse and educational attainment because both educated and uneducated people were abusing children sexually. They further indicated that children are abused at schools by some of the educators.

4.5.1.12 Question 12: What needs to change in this community

The LO educators suggested that the attitude of the community towards child sexual abuse and HIV/AIDS needs to change. The mindset of parents needs to change as well. Community education programmes should include all age groups. They further indicated that the responsibilities should not be delegated to the children. They claimed that parents' love for their children is not enough; they need to experience the love indicated in the Bible.

The responses of the Life Orientation educators added to both the focus group and individuals' responses to the interview questions. Their responses indicated that no single agent can fight child sexual abuse, but that the whole community needs to stand together in this matter. Their responses helped the researcher to arrive at the conclusions and the recommendations that are put forward in this dissertation.

4.5.2 Educators' approaches to child sexual abuse as a lesson in the class

Educators indicated that they use the learners' performance in the tests as their point of departure for discussing child sexual abuse. They indicated that the performance of learners – even highly gifted learners – can deteriorate if they are being sexually abused. They further indicated that the educators must be very friendly to learners in order to get information. In the discussions on the factors that contribute to the deterioration of performance, educators might ask their learners if child sexual abuse can indeed contribute to low performance. Their learners agreed that child sexual abuse does contribute to poor performance. They indicated that they are abused sexually for many reasons. One of the Life Orientation educators commented:

Vhana vhari vha a tenda u tambudwa lwa vhudzekani nga u vhona khonani yo no zwi thomaho uri vha fane. Arali a tshi vhona khonani i na zwithu zwavhudi u a tenda u tambudzwa a tshi humbula uri na ene a nga zwi wanavho. Vhanwe vhana vha tou zwi amba uri vha vha vha tshi khou toda tshелеde. Vhanwe vhana vha tou zwi amba uri vha itiswa nga vhabebi vhane vha vha vhudza uri vha tea u toda zwiliwa. Vhana vha sumbedza uri nwana a khou tambudzwaho lwa vhudzekani nga u toda tshелеde u vhone nga u didzhiela ntha ngamaanda, u tshimbila na vhatukana na u tshintsha matshimbilele awe.

When translated into English it means:

Learners agreed that they are sexually abused as a result of peer pressure. If a learner sees that her friend has

good things which she does not have, she will start having sex with old men. Some of the learners indicated that they are after money; that is why they hardly disclose such abuse. Again they indicated that parents even force their children to have sex with old men because they expect them to bring back food at the end of the day.

The educators thereafter discussed what can be done to reduce child sexual abuse of learners. Learners indicated that sex education is important to them.

The responses of the Life Orientation educators indicated that child sexual abuse is one of the topics to be discussed with the learners in class. In their responses they pointed out aspects that should be added to the subject. These responses helped the researcher to make recommendations emanating from this research.

It was evident that the responses of the above-mentioned target groups alone would not be sufficient for this study; the responses of the victims and the perpetrators were also vital. The responses of the victim and perpetrator confirm the responses of other target groups.

4.6 LEARNERS' RESPONSES TO INTERVIEW QUESTIONS

This section provides the responses of learners as victims of abuse. The individual learners were interviewed at their respective schools. The interview questions were the same for everyone. Their responses to the interview questions were grouped according to their experiences regarding child sexual abuse. Their responses were audio-recorded and then transcribed by the researcher. Their responses to each of the interview question are provided below.

4.6.1 Question 1: Reasons for child sexual abuse

Learners indicated that children are sexually abused due to peer pressure. Children who might have started to have sex encourage their friends to have sex with adults so that they can have common interests. They further pointed out that there are children who want to demonstrate what they might have seen on television, so such children are ready to have sex with anybody. Again they mentioned that there are people who just want to satisfy their sexual desire and in doing so destroy the children's future. They also indicated that the fact that many people are HIV/AIDS positive is also one of promoting factors of child sexual abuse. There were also children who were sexually abused because they needed money.

4.6.2 Question 2: Do sexually abused children share their experiences?

The respondents pointed out that some children do not share their experiences of sexual abuse because they are ashamed of the incidents. These children are scared to tell their friends or anyone else. They think that if they divulge this information to their friends, their friends will reject them so they decide to keep quiet. They further indicated that some children share their secret with friends to relieve stress or to urge them to become involved in the same activities.

4.6.3 Question 3: Identification of a sexually abused child

The respondents indicated that although it is not easy to identify an abused child, they can identify them through their behaviour. They further pointed out that such an abused child is always afraid of men and they avoid close contact with men. They mentioned that some of the sexually abused children are identified when they want to commit suicide.

4.6.4 Question 4: The sexual abuse of boys

The respondents pointed out that boys are also abused sexually. However, they indicated that the percentage of sexually abused boys appears to be lower than that of girls because boys do not always disclose this problem as readily as girls. They further pointed out that after a boy has been sexually abused, a boy would be given money in order not to disclose the incident.

4.6.5 Question 5: Why do children keep quiet after sexual abuse?

According to the respondents children keep quiet because they are ashamed and fear that their friends will mock them. They further indicated that children keep quiet because they are scared of the perpetrators who usually threaten to kill them. They indicated that they keep quiet because they also blame themselves. They are afraid of their parents who threaten to beat them if such an incident should occur.

4.6.6 Question 6: The perpetrators of child sexual abuse

The respondents indicated that educators are sometimes the perpetrators; more especially those who drink and take drugs. They also commented that these days most of the perpetrators are parents and other close relatives; more especially who are HIV positive or are living with AIDS.

4.6.7 Question 7: Children's rights

The respondents indicated that not all children know their rights. Those who have an idea know only a few children's rights. They pointed out that educators and other community leaders such as the Civic Organisation Group and the Community Policing Forum should educate children on their rights.

4.6.8 Question 8: Where does child sexual abuse usually occur?

According to the respondents sexual abuse even occurs at school because educators are often the perpetrators. At home children are sexually abused by their parents; more especially if mothers are not at home. They further indicated that sexual abuse can occur anywhere. They mentioned that strangers can sexually abuse them at home if the parents are not there. They also indicated that child sexual abuse even occurs at church.

4.6.9 Question 9: Accessible place to report child sexual abuse

The respondents felt that the most accessible place to report abuse is at school, and that they would report it to their educators. They further mentioned that the police station is one of the easiest places to report the case. They indicated that at the police station, security and safety are guaranteed to the child. They indicated that at the police station a child can be counselled because social workers are available at most of the police stations. They pointed out that parents should not be ignored because they can offer assistance by reporting any incident of child abuse to the police.

4.6.10 Question 10: The protection of children by their parents

The respondents pointed out that parents must make sure that children are at home after school. At home they should be with a responsible person – preferably an adult. If children happen to be at home without their parents, abuse can occur. They further indicated that parents should go to church with their children to avoid abuse. At church they are guided by church leaders on the values and norms of the community. Again they mentioned that sufficient parental support is important in protecting

children from abuse. They indicated that parents are responsible for educating children on sexual matters. It is important for parents to organise community education programmes for their children.

4.6.11 Question 11: Can sex education help to reduce child sexual abuse?

The respondents were not sure if sex education can help to reduce child sexual abuse. They pointed out that sex education as one of community education programmes may help. In community education, children can learn ways and means of protecting themselves. They can also learn to share problems, including those related to sexual abuse.

4.6.12 Question 12: Can sporting activities help to protect children?

The respondents were of the opinion that sporting activities can help to protect them from abuse because during such activities they can spend most of their time together. They pointed out that if a child feels bored, the child might start drinking or taking drugs which can result in abuse. Most of the children who had been sexually abused had been drunk at the time of the abuse. After sport, children will be tired and they will want to go home.

4.6.13 Question 13: What should the community do to reduce child sexual abuse?

The respondents pointed out that the community should organise community education programmes to engage them. In community education programmes, they can learn skills and strategies for reporting abuse. Their point of view was that the community should never ignore children in any kind of community education programmes. In the community education programmes, parents can learn how to

protect their children as well as to report child abuse. The issue of love between parents and children should be included in such programmes.

4.6.14 Question 14: Responsibilities of educators in fighting child sexual abuse

They maintained that educators should guide them on all matters of life, including self-protection from abuse. They indicated that they feel free to communicate with educators in investigating whether something is wrong. They stressed that educators should not disclose the information to other learners because an abused child can feel humiliated. They pointed out that educators should be open with children on topics related to sex and that they should create a free environment for discussions of any problem affecting children. They also indicated that educators must give counselling to the victim before referring the case to the police. They proposed that educators can refer the matter to the nurses for further investigation.

4.6.15 Question 15: Life Orientation as a subject

According to the respondents Life Orientation as a subject helps them to understand themselves because it includes different spheres of life. They indicated that the subject includes topics on the different lifestyles of people and teenage problems. They further mentioned that the teacher concerned should be open when treating any topic.

4.6.16 Question 16: What should the Government do to reduce child sexual abuse?

They pointed out that the Government should disclose the consequences of abusing a child through television and posters. They indicated that children should be

protected by the Government at all cost and that the Government, through the relevant department, should strictly enforce laws against child sexual abuse. They indicated that perpetrators should be given life sentences in prison.

The responses of learners to the interview questions indicated that children are not safe – neither at home nor at school. They further pointed that they do not trust anybody because parents and teachers happen to abuse children sexually. They mentioned that they should be given total love by parents and that the Government should show that they care. They showed a willingness to be included in any community education programmes.

Learners' responses to the interview questions helped the researcher to synthesise the findings. These responses helped to confirm that the problem is prevalent in the community under study. It is clear from the responses that child sexual abuse is a serious community-based problem which needs collective efforts. These responses confirm the focus group and individuals' responses to the interviews and discussions. It is clear from their responses that they should be included in efforts to reduce the problem. These responses helped the researcher to reach conclusions and make recommendations.

4.7 PARENTS' RESPONSES TO INTERVIEW QUESTIONS

This section provides the responses of parents of the victims. The individual parents were interviewed at their respective homes. The interview questions were the same for everyone. Their responses to the interview questions were grouped according to their experiences regarding child sexual abuse and the responses were audio-recorded and then transcribed by the researcher. Their responses to each of the

interview questions are provided below.

4.7.1 Question 1: After the abuse of your child, how did you feel?

The parents indicated that after the abuse of their children they were angry. One of the parents pointed out that he did not want to see the perpetrator because he could have killed him. They further indicated that they reported the case to police station.

4.7.2 Question 2: What did you do to the child?

The respondents replied that they took the child to the social worker for counselling.

Thereafter the child was taken to the clinic where it was confirmed that the child had had sex with a man. They wanted the child to be checked to determine if any sexual diseases had been transmitted. One of the parents indicated that the child was advised to be with the mother all the time.

4.7.3 Question 3: What did you want to be done to the perpetrator?

They mentioned that they wanted the perpetrator to be arrested immediately. They wanted the perpetrator to give a reason for abusing the child. They further pointed out that they wanted a long sentence to be given.

4.7.4 Question 4: How effective is the Community Policing Forum in this community?

The respondents indicated that the Community Policing Forum was not effective and that one of the reasons was that there was a power struggle within this organisation. Furthermore, the arrest of the perpetrator divided the community.

4.7.5 Question 5: How often do community members come together?

The respondents indicated that community members meet fortnightly but very few attend the meetings. The power struggle among the members of the civic organisation is discouraging the community from coming together to discuss community problems.

4.7.6 Question 6: How did the police react?

They indicated that the police reacted quickly. The perpetrator was arrested.

4.7.7 Question 7: What was the reaction of civic members?

They pointed out that some members were reluctant because the perpetrator was close to civic members. However, some others were ready to help.

4.7.8 Question 8: What should be done to protect children?

The respondents indicated that children should be always close to their mothers or grandmothers. They pointed out that the community should discuss child protection strategies at meetings. Educators should help the community on children's rights to protection.

4.7.9 Question 9: What was the reaction of the entire community?

The respondents indicated that the community was worried about the incidence of sexual abuse of children and they proposed that meetings be held to discuss this issue. They also indicated that both the Community Policing Forum and the civic committee should be re-elected.

4.7.10 Question 10: Knowledge of the perpetrator

One respondent indicated that the perpetrator was an educator. The other respondent showed that the perpetrator was a member of the civic committee.

The responses of parents of the victims helped the researcher to reach the conclusion of the study and to make recommendations. These responses were added to the responses of the victims, the focus groups and the individuals' responses to the interview questions.

4.8 THE PORTRAITS OF VICTIMS

4.8.1 Concept clarification

According to Collins (1999) portrait is a photograph or picture of a person, or a description of something or somebody. In this study 'portrait' refers to a detailed description of the incident.

The responses that constituted the portraits of victims were audio-recorded and then transcribed. The portraits of the victims and the perpetrators are presented in the following sub-sections.

4.8.1.1 The portrait of the first victim

The victim, a girl, was 14 years old and the perpetrator was 21 years old. Both victim and the perpetrator were at the same school. The information was disclosed on 1 June 2011. The victim stated:

*Duvha linwe na linwe tshikolo tshi tshi va u rumela vhathu
uri vha de vha mmbidze. Arali ndi saya, u tou da e ne*

mune, u mfulufhedzisa lufhanga. Nga dzi 31 Lambai 2011 o da a nkokodza ndi tshi khou ya hayani a tshi khou tou somba na tshanda. Ri ndilani ankombetshedza uri ri khisane. Ro ri u fhedza u khisana a ri a zwi fheleli khau khisa u fanela u nndala. O mbodi nkokodzela tshitakani a nndala. Ndi khou humela thuso ngauri a si lwa u thoma nga o noyu mutukana

When translated into English it means:

Every day after school this boy sends other learners to call me; when I do not respond he comes in person and promises to stab me with a knife. On 31 May 2011 he approached me on the way home. He held me by the hand and forced me to accompany him. On the way, he forced me to kiss him and suddenly he said kissing was not enough but sexual intercourse. He forced me into a bush where he sexually abused me. I need help because it was not for the first time with the same boy.

4.8.1.2 The portrait of the second victim

The victim, a 15-year-old girl, was in Grade 10 and the perpetrator was an educator at the same school. The incident occurred on July 2010. In the words of the victim:

Havha mudededzi vho da kha nne linwe duvha vha mmbudzisa uri phathi ya mabebo anga ndi ya lini. Nne nda vha vhudza uri a thi iti phathi ngauri a huna tshelede hahashu ya u renga zwithu zwa phathi. Vhone vha ri kha

ndi vha vhudze uri ndo bebiwa nga dzi ngana vhone vha do nthusa nga u nnyitela phathi ya mabebo. Ndo ri u vha vhudza uri ndo bebwa lini vha mbo di tuwa na zwenezwo. Duvha la mabebo anga ndo mangala vha tshi mmbidzela goloini he nda wana hu na zwiliwa zwe vha mbodi ndi ri ndi zwanga ndi tea u takala na dzikhonani dzanga. Nne ndo dzhia ndala na khonani dzanga nga tshifhinga tsha ula sa phathi ya mabebo anga. Ndo do mangala linwe duvha vha tshida khoroni ya mudi wa hashu vha mmbidza. Vho mbo tuwa na nne sa I zwi lo vha li tshi vho kovhela. Ro mbo di dzhena dumbani linwe vha ri vha khou humbela u lala na nne. Khathihifhedzi vha mbo di nndala vha mpha fumi la bonndo. Zwino a vha tsha funa u huma muruhu hanga vha dzula vha tshi ri ri tuwe rothe uri vha kone u nndala. Vhanwe vhana vha vho tou ntsea nga vho.

When translated into English it means:

'This educator came to me one day and wanted to know about my birthday party. I told him that neither I nor my parents had any money for the birthday party. The educator insisted that I should give him my date of birth so that he could arrange everything for my birthday party. Indeed I gave him my date of birth. One day I was surprised to be called to his car where there was a lot of food and drinks. The man indicated that they were all mine for the birthday party. I enjoyed them during break

with my classmates while celebrating my birthday. One late afternoon the man arrived at my home. I was amazed. Unfortunately I was still alone then. The man wanted me to accompany him to an unknown place. On the way the man decided to enter an old house which was nearby and demanded to have sex with me but I refused till he forced me to have sex. After having sex, he gave me twenty rand. The educator did not want to leave me alone; that's why I decided to tell the principal of the school'.

4.8.1.3 The portrait of the third victim

The victim was a 14-year-old girl whose mother worked on a farm belonging to ZZ2.

The perpetrator was a married man. The victim explained:

Mme anga vha shuma bulasini ya ZZ2. Vho vha vha tshir vha tshi ya maushumoni vha sia vho vhudza ha vha munnauri vha de vha tshi ri linda na murathu wanga. Vho mbo thomau da na vhusiku he linwe duvha vha mbo diri vha tama u edela na nne vha do mpha tshinwe na tshinwe tshine nda funa. Nne nga u vhona u shaya na vhusiwana nda mbo di tenda vha thoma u edela na nne u thoma nga 2010 ndi sa humbuli uri ndi nga vha thumbu. Zwino ndi na thumbu a vha tsha da kha nne ndi nga zwo ndo humbula u vha pota.

When translated into English it means:

My mother works on the farm of ZZ2. Most of the time when she went back to work, she asked another man to remain responsible for us. The man started to come to home even during the night. One day the man asked to have sexual intercourse with me and promised to do everything for me. Because I was poor I agreed, not knowing that I would get pregnant. Since 2010 the man would come and have sex with me till I am now pregnant. The man does not want to come to me anymore; that is why I have decided to report him.

4.8.1.4 The portrait of the fourth victim

A Grade 9 girl of 15 years old was found lying outside her classroom. When she was asked why she was crying, she answered that she had a problem: her father insisted that she should marry a certain man.

In the words of the victim:

Ndi dzula na mme anga na khotsi anga fhedzi nne ndo tou da na mme anga. Khotsi anga vha dzula vha tshi nkombetshedza uri ndi maliwe nga vhanwe munna vhane vha vha muhulwane. Musi ndo edela vha da vha vulela havha munna uri vha ite zwa vhudzekani na nne. Nne ndi mbodi va nda shavha vhusiku nda lala nnda. Zwino ndi vho tou shavha na u ya hayani ngauri ndi uva nga Luhuhi 2011 na mulovha nga dzi 30 Thangule 2011.

When translated into English it means:

I live with my mother and stepfather. My father always instructs me to marry a certain man who is older than me but I resist because I do not love him and I want to go to school. Most of the time he opens a door to let the man in while I am in bed. The man tries to force me to have sex with him. I usually run out of my bedroom and sleep outside the room. This problem continued from February 2011 to 30 August 2011. I do not know what to do.

4.9 THE PORTRAIT OF A PERPETRATOR

The portrait of each of the perpetrators follows below. The responses of the portraits of the perpetrators were audio-recorded and then transcribed.

4.9.1 The portrait of the first perpetrator

The perpetrator, who confessed that he had sexually abused a young girl, was 21 years old. His account of the situation is as follows:

Ndi zwone nne ndi tou mu funa hoyu musidzana o vhuya a tendela zwino ha tsha funa. Ndi nga zwo ndi tshi mu lala a sa funi na mulovha nga dzi 31 Lambamai 2011 ndo mulala tshitakani

When translated into English it means:

It is true because I love her. I once proposed to her and she agreed but now she says she does not want me any longer. That is why I used to force her – like yesterday on 31 May 2011. I had sex with her.

4.9.2 The portrait of the second perpetrator

The perpetrator, who confessed that he had sexually abused a young girl, was 19 years old. His account of the situation is as follows:

Ndi musi tshikolo tsho valela holiday ya Goodfriday ya 2012 musi khaladzi anga a tshi da u dala na nwana wawe wa minwaha 8. Tshifhinga tshothe nga madekwana o vha a tshi da kamarani yanga a vha a tshi khou vhona zwifanyiso nne ndi kha founu yanga. Nne ndi muthu o no di dahela mafola. Linwe duvha a thi divhi uri ndo vha ndo dzhenwa ngani ngoho. Ndo di mangala ndi tshi vho batana na nwana wa khaladzi anga. Nwana o mbo tavha mukosi ha mbo vha u vhidza vhathu. Ndo mbo vhidzelwa mapholisa tshenetsho tshifhinga. A thon go wana na tshifhinga tsha u shavha. Na zwino ndi fhanu ndi khou senga ndi nga zwo ndi songo nwala na dzinwe thesite.

When translated into English it means:

It was during Easter holiday when my sister came to visit at home. She was accompanied by her daughter. Every evening she came to my room. She enjoyed pictures while I was playing games on my phone. I take drugs and drink. I did not know what happened when I found myself raping a young girl. She screamed at the top of her voice and suddenly the door was opened. I was arrested the same night and that was the reason for my failing to write the other tests. I am now on bail so I do not know what

will happen.

The responses of the victims and the perpetrator confirm that child sexual abuse is a serious community-based problem, particularly in the area under study. Their responses strengthened the conclusions and recommendations of the research.

4.10 CONCLUSION

All the individuals and the focus groups indicated that child sexual abuse is a serious community-based problem (see 4.2.1 and 4.3.1). The focus groups reported a number of contributing factors towards child sexual abuse (see 4.2.2). The individuals pointed out that a child who has been abused can be identified from the other children by behaviour (see 4.3.2 and 4.3.3). The focus groups and the individuals indicated that educators and parents are the serious perpetrators of the problem (see 4.2.4 and 4.3.4). All individuals pointed out that there is a strong relationship between child abuse and substance abuse such as drugs and alcohol (see 4.3.5).

The target groups mentioned that all community structures and community stakeholders are responsible for handling child sexual abuse problem (see 4.3.6). The individuals indicated a number of solutions to protect children such as sporting activities, reporting to civic structures; sex education and community education (see 4.3.7). The individuals reported the roles of each stakeholder in the reduction of the problem (see 4.3.8). The target groups pointed out the availability of community education programmes which are not effective (see 4.3.9). Educators and nurses indicated that campaigns can be used as a strategy to encourage community participation. Church leaders pointed out that Sunday school programmes can be

another way to encourage community participation and to encourage children to report each incidence (see 4.3.10). The individuals indicated that the attitude of community towards child sexual abuse should change (see 4.3.18). Children indicated that the perpetrators threaten to kill them if they disclose the incidence (see 4.6.5). Both victims and parents indicated to know the perpetrators of child sexual abuse (see 4.6.6 and 4.7.3).

All focus groups pointed out those young girls are most often the victims of child sexual abuse. The various target groups indicated that in many cases adults who are HIV positive are the perpetrators of child sexual abuse. They also indicated that there are a number of contributing factors related to child sexual abuse. The portraits of both victims and perpetrators helped to prove that the problem under study is indeed real. The findings of the fieldwork are provided in Chapter Five.

CHAPTER FIVE

SYNTHESIS OF THE FINDINGS OF THE FIELDWORK

5.1 INTRODUCTION

This chapter reports the synthesis of the theoretical framework and the findings of the fieldwork. The discussions, recommendations and conclusions based on the responses of all the target groups are described in Chapter Six. The discussions were based on the responses to the interview questions on community participation and child sexual abuse. Most questions were structured to find ways of promoting community participation in the reduction of child sexual abuse. Some of the questions were structured to find strategies to encourage the community to participate in the reduction of child sexual abuse, while other questions were structured to find out more about educational programmes that can be employed in the fight against child sexual abuse.

All responses to questions supported the aim of community participation in the reduction of child sexual abuse. Educators, nurses, church leaders, social workers, policing staff, traditional leaders, and members of the civic organisation and the Victim Empowerment Group of the Khakhu area of the Vhembe district of the Limpopo province were asked to respond to questions that were structured in such a way that they would show how the community can be involved in the reduction of

child sexual abuse. Their responses were based on their experiences in the community.

Interviews were conducted with all target groups. Most of the responses showed how community participation can contribute towards the reduction of child sexual abuse. The responses also revealed that child sexual abuse is a serious community-based problem. The overall responses of all target groups demonstrate the importance of community participation in the reduction of child sexual abuse as a community-based problem.

5.2 SYNTHESIS OF THE LITERATURE REVIEW

If community education programmes are established in the community, these programmes could encourage community participation in the reduction of child sexual abuse by eliminating norms that legitimise and glorify child sexual abuse in the communities. These programmes help by teaching communities to understand children's right to protection. The sound relationship between all stakeholders in the community is significant in the reduction of child sexual abuse; therefore there should be a change of attitude towards child sexual abuse in the community.

In Israel (see Chapter Two) children child sexual abuse was prevalent at one time. Community-based programmes were subsequently initiated to address this problem. The programmes focused on developing the community's attitude towards child sexual abuse, especially by encouraging them to report child sexual abuse. A change was brought about among the community members when they started to report all cases of child sexual abuse. Community members enjoyed sound relationships between children and adults and children could move about freely without any threat

of abuse.

In the USA and Canada (see Chapter Two) children were seriously abused by community members at one stage. Seeing that children were at risk, the churches intervened and helped most of the children. The contact between churches and victims of sexual abuse was mediated by women's groups. Finally, child sexual abuse started to decline. In the USA (see Chapter Two) it was proved that strategies involving spirituality, community support and activism are very important in order to deal with child sexual abuse. Although the problem cannot be totally eradicated, there has been a great decline of child sexual abuse in the USA. Therefore church leaders should never be underestimated when it comes to this community-based problem. This earlier research encouraged the researcher to include these countries in the current study.

In China (see Chapter Two) child sexual abuse was also identified as a community-based problem. The community decided to establish prevention programmes which were initiated with an intention to encourage community participation in the reduction of the problem in areas such as Shenzhen. China influenced Hong Kong, a neighbouring country, to introduce the same community education programmes and Hong Kong was also successful in fighting child sexual abuse. The problem started to decline in these countries. In the northeast corner of Connecticut (see Chapter Two) a community partnership team (CPT) was created to address the problem of child sexual abuse. Most of the people felt positive about the programme and started to participate. The problem has declined since then.

In Louisvleweg in South Africa (see Chapter Two) child sexual abuse was a great concern in the entire community because educators and parents were the

perpetrators. Finally, community members started to educate one another after children were sexually abused for a number of years and the community organised community education programmes to fight the abuse. Since then community members have started to report any sexual abuse of children to the police stations.

In Athens-Clark county and Georgia (see Chapter Two) child sexual abuse was recognised as a community-based problem. A response team was established to fight against child sexual abuse. Community members were happy to participate in the team. After a year the problem started to decline.

In Northern Utah (see Chapter Two) a community-family partnership programme was established due to the occurrence of child sexual abuse. The programme provided comprehensive services to families living with sexually abused children. Such family support lowered the level of child sexual abuse. The implementation of the programme brought about a decline in child sexual abuse. In Sub-Saharan Africa (see Chapter Two) community programmes were established to prevent child sexual abuse. The programmes included the development of parental capacities through training in child-rearing and child care. Such programmes clearly helped in the prevention of child sexual abuse.

In Boston (see Chapter Two) non-profit health and human services organisations were formed to develop a community-based model to prevent and reduce child sexual abuse. In the UK (see Chapter Two) a Council of Europe fellowship was established to manage and treat child sexual abuse in a community setting. Aspects discussed included organising community education training of staff, assessment of abusers, methods of treatment and resources and facilities to use.

In Alaska (see Chapter Two) a programme was designed to change social customs

and traditional intervention regarding child sexual abuse. The programme involved the application of an old church custom of constructive gossip by volunteers to change the community's attitude towards child sexual abuse. The community's attitude appeared to have changed after a year.

A child sexual abuse conference was held in Paris (see Chapter Two) with the aim of launching an attitude-shaping campaign. Another aim was to show the community that if child sexual abuse cannot be handled within a family or among relatives, assistance was available in community organisations.

A tool known as Bitter Earth was established to train community members on how to prevent child sexual abuse in India (see Chapter Two). Many tribal communities had multidisciplinary child protection teams (CPTs). Tribal leaders played a vital role in community education and prevention and intervention services for communities.

In London Borough (see Chapter Two) a programme known as NEWPIN was established to deal with child sexual abuse. The aim of the programme was to improve mothers' self-esteem and reduce child sexual abuse. After 13 years the lives of community members appeared to have improved with the reduction of child sexual abuse.

5.3 CONCLUSION

According to the theoretical framework, each community is responsible for any community-based problem. Community education programmes identified in earlier research appear to be suitable in the community under study. The success of reducing child sexual abuse in other countries by community members themselves has indicated that the researcher can base the recommendations on the theoretical

framework and the fieldwork done. The researcher compared the findings with those of previous research. It appears that the attitude of the community towards child sexual abuse can be reshaped.

5.4 SYNTHESIS OF THE FINDINGS FROM THE DISCUSSIONS AND INTERVIEWS

The results of the responses of the focus groups and target groups to the discussions and interview questions are presented in this section. The target group discussions were conducted on different days. The results of each discussion were shared with focus group.

The target groups clearly indicated that child sexual abuse was prevalent in this community. They regarded child sexual abuse as a serious community-based problem which needs the participation of the entire community. They mentioned that cases of child sexual abuse are reported now and then; however, some cases still go unreported (see 4.2.1)

Many factors that contribute to child sexual abuse were mentioned. Some of these factors are related to alcohol, poverty, pornography, unacceptable behaviour and beliefs (see 4.2.2). A child who has been abused sexually is passive in class and the performance of school work deteriorates gradually. Some of the abused children are aggressive both in class and in the community. A sexually abused rarely plays with other children.

It was found that some of the sexually abused children are afraid of men. Sexually abused children are often found crying. A child is shy to speak out about what happened to her or him. A sexually abused child can never be free. Some sexually

abused children may have an unusual odour because of abnormal discharges and their health deteriorates gradually. A child who has been abused sexually may find it difficult to walk properly. Sometimes a sexually abused child suffers from sexually transmitted diseases

Although children of both sexes are sexually abused, young girls are more frequently the victims of sexual abuse than boys. Parents – more especially step-fathers and other relatives – are often the perpetrators of child sexual abuse. Children are sometimes abused sexually by their educators and friends, and in some cases strangers abuse children sexually under the pretext that they take care of children. There is a close relationship between child sexual abuse and poverty.

Children who take drugs and alcohol are at risk because most of the perpetrators are drug abusers and drinkers who mix socially with these vulnerable children. There is also a close relationship between child sexual abuse and substance abuse coupled with poverty. Many children are abused sexually as a result of a lack of adequate support.

The entire community is responsible for handling child sexual abuse cases. Community structures such as members of the civic organisation and the Community Policing Forum get the community organised to fight child sexual abuse. All professionals within a particular community are also responsible for organising community education programmes. Community education programmes should include aspects of child protection legislation so that the community can be familiar with the legislation. Education for an individual alone is not enough; the whole community needs to be educated.

Both the traditional leaders and the church leaders are responsible for handling child

sexual abuse cases. The traditional schools should be re-established for moral regeneration. The parents of the sexually abused children are responsible for handling child sexual abuse cases because the perpetrator can happen to be one of the relatives.

The community itself is responsible for the protection of children. Children are expected to remain in groups of children, particularly when they walk to school and back. Community education programmes provide good parental skills training which help parents to protect their children from sexual abuse. Campaigns focusing on taverns and all places of interest are fundamental in the fight against child sexual abuse

Any suspected child sexual abuse must be reported to the community structures in order to protect children from sexual abuse. Community education programmes play an important role in the protection of children. Another way of protecting children is by imposing heavy sentences on the perpetrators. Parents should avoid sending children to tuck-shops, especially in the evening. If parents understand children's rights, they will never send them to buy drugs or alcohol.

Traditional leaders get the community organised through community meetings to discuss child sexual abuse in each community. Social workers organise child sexual abuse awareness campaigns and support victims together with the families of the victims. Social workers arrange for food and shelter for the victims where there is a need. In doing this, they collaborate with all responsible community stakeholders. Social workers provide counselling for the victims of child sexual abuse. All professionals in the community empower the community through community education. Educators report any suspected child sexual abuse to the nearest health

centre for further diagnosis.

Campaigning against child sexual abuse is one of the strategies that can be employed to encourage community participation in community education programmes aimed at the reduction of child sexual abuse. Community meetings can help the community to participate in community education programmes which can help to reduce the incidence of child sexual abuse. Rewarding community builders is another strategy to encourage community participation. As a strategy, door-to-door campaigns have been proved to be most effective. Child awareness campaigns include the victims and the perpetrators. Community members are involved in all community activities to encourage them to participate in the fight against child sexual abuse. It is suggested that community members should visit prisons where perpetrators of child sexual abuse are incarcerated.

It is essential to introduce a suggestion box to encourage the community to report suspected child sexual abuse. Through community education programmes the community needs to be discouraged from hiding information with regard to child sexual abuse (see 4.3.5.11 and 4.3.4.12).

Children are sexually abused because people have different views on sexual matters. Both educated and uneducated people are abusing children sexually; child sexual abuse occurs at school, in the community and in rural as well as urban communities.

There is evidence that a change in the mindset of the community helps to reduce the incidence of child sexual abuse. An improvement in the attitude of the community towards child sexual abuse and HIV/AIDS has a positive impact in the reduction of child sexual abuse (see 4.3.1.19, 4.3.3.12, 4.3.5.11 and 4.3.7.18). Sex education can

also help in reducing child sexual abuse. It is important to reintroduce community educational programmes such as *domba*, *musevhethe* and *murundu* to assist in the reduction of child sexual abuse.

Learners themselves clearly indicated that they are abused sexually due to peer pressure and the influence of media such as television (see 4.6.1). The respondents indicated that some talk about their experiences of abuse while others do not share such experiences (see 4.6.2). Learners indicated that they can identify a sexually abused child. Such child seems to be afraid of men, while others threaten to commit suicide (see 4.6.3). All children, both boys and girls, can be sexually abused. Boys do not find it easy to disclose such incidents (see 4.6.4). The boys indicated that they do not want to disclose abuse because they are ashamed and the perpetrator usually threatens to kill them if they divulge what has happened to them. Furthermore, parents often threaten to beat them if they talk about the abuse (see 4.6.5).

The respondents revealed that both educators and parents are sometimes the perpetrators of child sexual abuse; more especially those who are HIV positive or are living with AIDS (see 4.6.6). Although some learners know their rights, there are some who are not informed (see 4.6.7). According to the respondents sexual abuse can occur anywhere, both at home and at school (see 4.6.8). The respondents indicated that they would like to report abuse, but the perpetrators promise to kill them if they do so. However, they can report cases to educators and the police (see 4.6.9). Although parents might abuse them, they still believe that parents should protect them. They indicated that they should accompany their parents to church (see 4.6.10).

Learners indicated that sex education is important in each community and they

commented that community education programmes should include sex education (see 4.6.11). The respondents indicated that sporting activities are essential in each community as such activities could assist in reducing child abuse. Sporting activities can bring children together and away from drinking and drug taking (see 4.6.12). Learners indicated that community education programmes should be established in order to empower the community. Children should never be ignored in the planning of community education (see 4.6.13). The respondents indicated that Life Orientation is one of the important subjects in this context (see 4.6.15).

5.5 CONCLUSION

The responses to each interview question indicated the experiences of various target groups with regard to the problem under study. These responses to the interview questions can help the researcher to design document guidelines along which the community can establish community education programmes. These responses can help the researcher to develop strategies to get the community involved in reducing child sexual abuse. These responses also helped the researcher to arrive at the conclusions of the study. The responses to the interview questions by educators, nurses, social workers, church leaders, traditional leaders, members of the civic organisation, policing staff and the Victim Empowerment Group helped the researcher to make recommendations for the implementation of strategies to reduce child sexual abuse and for further studies. The recommendations are provided in Chapter Six.

CHAPTER SIX

DISCUSSION, CONCLUSIONS, RECOMMENDATIONS AND CONCLUSION

6.1 INTRODUCTION

This chapter provides the discussions, conclusions, recommendations and conclusion based on the responses of all the target groups described in Chapters Four and Five. The conclusions based on the literature review are provided. The recommendations have been based on the responses to interview questions structured on community participation and child sexual abuse and conclusions. Most of the questions were structured to find ways and means of involving the community in reducing child sexual abuse. Some of the questions were structured to find strategies through which to encourage the community to get involved and report child sexual abuse.

All responses to questions supported the involvement of the community members, educators, nurses, social workers, members of the civic organisation, the church leaders, traditional leaders, policing staff and the Victim Empowerment Group in reducing child sexual abuse. The questions which all target groups were required to respond to were structured in such a way as to verify the occurrence of child sexual abuse. According to their views, child sexual abuse was prevalent in the community under study.

Most of the responses showed how child sexual abuse can be reduced through the participation of community members. The responses from all target groups indicated how children can be protected. The overall responses of all target groups demonstrate the importance of community education programmes in reducing child sexual abuse. The recommendations are provided in section 6.3.

6.2 CONCLUSIONS

Based on the findings of the responses to the interviews, the following conclusions can be made.

6.2.1 All target groups seemed to be aware of child sexual abuse problem in the community (see 4.3.1). The target groups appeared to be aware of some of the contributing factors towards child sexual abuse (see 4.2.2). All members of the target groups seemed to know the perpetrators of the abuse (see 4.2.4). Some of the educators appeared to know that some of their co-workers abused children sexually at schools and in the community (see 4.3.4).

It was evident that social workers seemed to be informed of cases of child sexual abuse from time to time. The policing staff appeared to have registered a number of cases of child sexual abuse at the police stations (see 4.3.1). The traditional leaders appeared to have handled a few cases at their council meetings (see 4.3.6). The Victim Empowerment Group had handled a number of child sexual abuse cases (see 4.3.6). The church leaders reported that they had even experienced the problem of child sexual abuse at the church.

The individuals seemed to have different views on the protection of children. All the views can still help in the protection of children (see 4.3.7).

Both nurses and policing staff appeared to have identified a few cases of child sexual abuse (see 4.3.1). All target groups seemed to have strategies to involve community members in the reduction of child sexual abuse (see 4.3.10).

Nurses seemed to be ready to work hand-in-hand with all community stakeholders (see 4.3.8). Policing staff appeared to be ready to meet with both members of the civic organisation and traditional leaders from time to time to support each other in the fight against child sexual abuse. The Victim Empowerment Group seemed to be available in the community, organising child sexual abuse awareness campaigns. Educators alone appeared to be unable to deal with child sexual abuse because it is a community-based problem (see 4.3.8).

The community participation appeared to be essential in the reduction of child sexual abuse through community education programmes. Community education programmes seemed to be helpful in dealing with community-based problems including child sexual abuse (see 4.3.9). Both educated and uneducated community members seemed to participate in the community education programmes. An individual education programme seemed to be unable to address the child sexual abuse problem but community education can. Community education programme in this area under study appeared to be not effective (see 4.3.9).

Although some community members might wish to be silent on child sexual abuse, the community seemed to be ready to break the silence through community education programmes (see 4.3.10). Child sexual abuse appeared to be such a complex problem that no one sector of community can tackle it singlehandedly (see 4.3.9). Team work seemed to be important in organising child advocacy (see 4.3.12). Community education programmes should be introduced because this is a way of

empowering community members (see 4.3.13). In the community education programmes, community members appeared to be directly involved through participation in community activities which enable those to solve some of the problems experienced in the community.

Only a few individuals seemed to be aware of child protection legislation and the children's rights (see 4.3.11). The use of suggestion boxes appeared to be one of the best ways to encourage the community to report child sexual abuse (see 4.3.13). The target group seemed to have different views on the relationship between child sexual abuse and educational attainment (see 4.3.14). There seemed to be a strong relationship between child sexual abuse and a myth (see 4.3.15). The Municipality seemed to be aware of the problem under study (see 4.3.16). All individuals seemed to believe that sex education can help in the reduction of the problem (see 4.3.17). The individuals appeared to be ready to change the attitude of child sexual abusers towards HIV/AIDS (see 4.3.18). Educators seemed to be ready to support community education programmes to build the commitment (see 4.3.19).

This study proved that the participatory action approach is one of the best approaches for solving problems because it is more effective in empowering the community than the traditional approaches. The ultimate result is the enhanced quality of life of the community members.

6.2.2 Learners as victims of abuse seemed to be aware of the reasons for their abuse (see 4.6.1). Some learners appeared to talk about the experience of abuse while others do not share this experience (see 4.6.2). Learners seemed to be able to identify their friends who have been abused (see 4.6.3). Both boys and girls seemed to be abused sexually (see 4.6.4). Learners usually appeared to keep quiet after

being sexually abused and they seemed to have strong reasons for this (see 4.6.5). Learners appeared to be aware of the abusers (see 4.6.6). A few learners seemed to know their rights (see 4.6.6), but it was evident that not all learners are well informed (4.6.7).

It appeared that learners know that sexual abuse can occur anywhere (4.6.8). Learners seemed to be aware of where to report child sexual abuse (4.6.9). They appeared to have confidence that their parents can protect them (4.6.10). One respondent seemed to be sure that sex education can help in the reduction of child sexual abuse (see 4.6.11). Learners seemed to be aware that sporting activities can help to protect them from sexual abuse (see 4.6.12). Learners supported community education programmes in the community under study (see 4.6.13). Learners appeared to have trust in educators although some educators abuse their learners (see 4.6.14). Learners seemed to like Life Orientation as a subject (see 4.6.15). It was apparent that learners expect more from the Government (see 4.6.16).

Children are sometimes seemed to have been abused by educators and their parents; more especially by those who are HIV positive or living with AIDS. Perpetrators appeared to threaten to kill children if the incidents are disclosed. Children know only a few of their rights. Children can easily identify an abused child. They appeared to be ready to report child sexual abuse if the perpetrators do not threaten to kill them. They seemed to regard sporting activities as being important in each community.

Therefore learners should participate in the fight against child sexual abuse. Community education programmes organised in the community under study should include youth programmes.

6.2.3 Parents seemed to find it difficult to accept the abuse of their children (4.7.1). Parents appeared to be aware of what to do after a child has been abused (see 4.7.2) and they seemed to have ideas regarding what should be done to the perpetrators (see 4.7.3). Parents appeared to know that the Community Policing Forum in the community under study is not effective (see 4.7.4). Parents seemed to be aware that there is a power struggle in the community (see 4.7.5). Parents seemed to have confidence in the police in the area under study (see 4.7.6). They also seemed to be aware of the necessity to protect children and the reluctance of the civic group in this community to do so (see 4.7.7 and 4.7.8). It is clear that the community is against child sexual abuse and that they know who some of the perpetrators are (see 4.7.9 and 4.7.10).

Parents should therefore be included in organising community education programmes; more especially with regard to the problem of child sexual abuse. Their contributions can help in the reduction of the problem.

Based on the literature review, the following conclusions can be made.

6.2.4 Family disintegration appeared to be one of the contributing factors towards child sexual abuse (see 2.4.3). There are many children who seemed to have been sexual abused due to lack of parental support (see 2.4.3). Family violence seemed to be another contributing factor related to child sexual abuse (2.4.4). There seemed to be social norms and values which promote the abuse of children in the community (see 2.4.4).

Spiritual involvement by the church leaders appeared to have encouraged community participation in the reduction of child sexual abuse. This involvement resulted a decline of child sexual abuse (see 2.4.5). Team work seemed to have

played important role in organising community education programmes which encouraged so many people to participate in the reduction of the problem (2.4.5). Educators appeared to have organised community education programmes which encourage community members to get involved in the fight against child sexual abuse (see 2.4.5). Traditional leaders and other community stakeholders seemed to have played important role in the reduction of child sexual abuse (see 2.4.5). Counselling seemed to be another way to support the victim (see 2.4.5). The change of attitude of the community members towards child sexual abuse and a myth appeared to have saved children from abuse (2.4.4).

Although community members could participate in the reduction of child sexual abuse, children themselves should be involved in the reduction of the problem. The community should introduce community education programmes in order to motivate community participation in the reduction of child sexual abuse. Community education should also be introduced because this is a form of learning in which all community members are directly involved through participation in community activities.

These conclusions helped the researcher to make the recommendations provided in section 6.3.

6.3 RECOMMENDATIONS

Based on the conclusions described in 6.2, the following recommendations are made which contribute to minimising the problem of child sexual abuse in the community of Vhembe district but also in the entire province of Limpopo. It is believed that it could ultimately help to reduce child sexual abuse throughout the whole South Africa. The recommendations are made in two categories, namely recommendations for

implementation and recommendations for further research.

6.3.1 Recommendations for implementation

The implementation of these recommendations could result in the improvement of the quality of lives of community members and the development of harmonious interpersonal relationships within a particular community. Some of these recommendations could contribute towards encouraging communities to find a solution to the problem of child sexual abuse.

One way to contribute to a solution would be to use various community structures to educate the community on how to deal with child sexual abuse (see 4.3.7). It therefore becomes fundamental to develop educational programmes from which the community can gain knowledge, develop skills and nurture a disposition to be in a better position to deal with the problem or at least to attempt to minimise the problem. One way to do this would be to help the community to respond effectively to a community based-problem by developing, from the community for the community, community education programmes.

Well-constructed educational programmes can be used to improve the identification of a sexually abused child and increase the likelihood of such a child receiving effective intervention from the community. Education programmes produce more change in behaviour and belief if the community incorporates instruction that assists participants in articulating and examining their personal values and beliefs concerning the sexual abuse of children (see 4.3.18). The education of an individual person cannot change the situation, but the provision of educational programmes in the structural setting of the community could be advantageous (see 4.3.9 and 4.3.19).

Community education programmes should be vigorously expanded and appropriately targeted to the community at risk. Traditional leaders and healers should play an important role in delivering appropriate messages (see 4.3.8). A system of responsible reporting of all infant and child sexual abuse is needed with standardised protocols for the collection of forensic evidence.

The implementation of community education and lifelong learning could confirm community involvement in dealing with child sexual abuse (see 4.3.10). If community education is not promoted within the community, many children will respond negatively to the abuse-screening questions and report that they are not experiencing abuse from their parents. They would never feel safe to disclose sexual abuse if there is no community education (see 4.6.5). Community education could entail helping an abused child to identify a personal support system and a safety plan in the event that the abuse escalates and providing information and referrals to shelter services and other community and legal resources.

Child sexual abuse is a problem that must be addressed by the community. It is recognised that no single agency or profession can prevent or treat child sexual abuse. Communities need to understand that this is not an individual problem but a problem of the community in which it occurs. Child protection efforts therefore involve the whole community.

Child sexual abuse in contemporary South Africa seems to be a community-based problem which needs the entire community to deal with it. Community structures such as schools, churches, civic organisations, victim empowerment groups and the community policing forum, as principal stakeholders of the community, should work hand-in-hand to combat the child sexual abuse problem. Hence community

education is to be promoted (see 4.3.8).

A placement prevention programme should be established to empower families in which children are at risk of out-of-home placement (see 4.3.10). This should be a voluntary programme that works with students and families on goals primarily identified by the community. This programme will help to present skills training for parents to enable them to deal with child sexual abuse. The ultimate goal of the programme will be to help children to remain in the home environment; therefore, community education should be promoted to encourage the community to contribute successfully in the fight against child sexual abuse. Child sexual abuse needs community involvement if it is to be prevented or reduced. Furthermore, the parent-child relationship should not be ignored

Parents should try to give adequate support to their children in order to reduce child sexual abuse. Parents and Life Orientation educators should work hand-in-hand. Parents who work far from their families should delegate responsibilities to an adult person who are near their families. Although poverty and child sexual abuse cannot be treated concurrently, poverty should never be undermined. If possible, children of different sexes should not share the same bedrooms.

Through sex education, children can be taught to respect their bodies. Educating children about how to protect themselves from being sexually abused through community-based prevention programmes is viewed by participants as another viable tool that should be used to fight child sexual abuse (see 4.3.17). The establishment of a victim empowerment group should be promoted at all police stations in South Africa, particularly in Limpopo province, to strengthen the relationship between the police and community members. When an educator is convicted of child sexual

abuse, the Department of Education should disseminate the information on the conviction to other departments.

It is also recommended that the community be educated to understand the consequences of child sexual abuse. Parents or community members must always know the whereabouts of the children. It is again emphasised that a strong relationship between the stakeholders in each community should be promoted in order for the community to deal with child sexual abuse successfully.

It is recommended that child sexual abuse should be reported immediately to the police or traditional leaders. Parents should not leave their children alone but they rather ask someone responsible to be with them (see 4.2.2). For the safety of the children it is recommended that the perpetrators be given long prison sentences (see 4.2.4). It is recommended that parents should protect their children at all cost. Suggestion boxes should be introduced at all public offices (see 4.3.13). It is also recommended that traditional healers should be educated with regard to child sexual abuse and HIV/AIDS (see 4.3.15).

A child should be taken to a clinic or a doctor after being sexually abused and then to a social worker for counselling (see 4.7.2). The Community Policing Forum should be supported fully by the community to avoid division among members of the community (see 4.7.4); otherwise the community cannot be successful in fighting against child sexual abuse. The community should have regular meetings at which community problems can be discussed, including the abuse of children (see 4.7.9). It is recommended that educators should live exemplary lives because they are community leaders by virtue of being educators (see 4.6.14). Non-profit organisations should play an important role in the fight against child sexual abuse by supporting

any campaign organised by the community. It is recommended that youth conferences should be held regularly to shape the attitude of the children.

It is recommended that the community should be educated on child protection legislation (see 4.3.11). Team work should be organised to support the child (see 4.3.12). It is recommended that the community should be educated to change the attitude people who still believe in the myth regarding intercourse with a virgin or child (see 4.3.15). The municipality should support the community activities since it is aware of the problem (see 4.3.16). Since educators are ready to build commitment in the community they should be included in organising community education programmes (see 4.3.19). Children should be protected from the perpetrators – more especially after the abuse – so that they can be free to disclose any attempt at abuse (see 4.6.6).

Since children have reasons for being quiet after they have been abused, it is recommended that they should be assured of their safety (see 4.6.5). Children should be educated on their own rights so that they can know when someone has violated them (see 4.6.7). It is recommended that children should not be left alone seeing that the abuse can occur anywhere (see 4.6.8). Children should know where to report the abuse, therefore they should be encouraged to report any abuse immediately and parents should protect them (see 4.6.9 and 4.6.10).

It is recommended that the community should organise sporting activities to reduce child sexual abuse (see 4.6.12). Life Orientation as a subject should be treated like all other subjects because it can empower children to fight sexual abuse (see 4.6.15). It is recommended that the Government, through the department concerned, should support any community education programmes including child abuse campaigns (see

4.6.16).

Team work should be promoted in each community in order to reduce child sexual abuse (see 2.4.5). The traditional leaders should never be ignored in the fight against child abuse (see 2.4.5). It is recommended that family disintegration should be discouraged in order to succeed in reducing the problem (see 2.4.3).

If all or some of the recommendations provided above can be implemented, child sexual abuse in the community under study can be reduced.

6.3.2 Recommendations related to the Life Orientation curriculum

Although schools have a key role to play in the fight against child sexual abuse, the community should not forget that the curriculum itself should provide guidelines along which child sexual abuse can be tackled.

The Life Orientation curriculum for all grades should include material on child sexual abuse as a community-based problem affecting learners' performance. Children should learn ways of protecting themselves from sexual abuse. The curriculum should include procedures for reporting child sexual abuse to educators, civic structures, parents and all community stakeholders. Educational programmes which can encourage children to report sexual abuse need to be addressed. Community education programmes should also be highlighted in the curriculum so that children can have an influence in the development of community education programmes. The impact of child sexual abuse on the development of a province and the country at large must be elaborated. The relationship between LO educators and community educators should be emphasised in the curriculum for the reduction of child sexual abuse. Issues to discuss on a parents' day – including child sexual abuse – should

be included in the curriculum of Life Orientation.

6.3.3 Some recommended educational programmes for implementation

The educational programmes mentioned below are recommended for implementation with the aim of reducing child sexual abuse. These recommended programmes are related to aspects discussed in Chapter Five of this dissertation.

- Sex education programmes where parents will share their knowledge with their children with regard to sexual intercourse
- Youth education programmes aimed to empower children
- Awareness campaign programmes against child sexual abuse
- Women's empowerment programmes, including the empowerment of women to break the silence
- Civic empowerment education programmes including those that emphasise human rights in the community in line with the Constitution of South Africa
- Council empowerment education programmes that train members of tribal councils on skills to judge child sexual abuse cases, among others
- Sports education programmes with emphasis on sporting codes and the importance of sport to human health
- Parental education programmes that train parents on good parental skills
- Sunday school education programmes

According to the theoretical framework presented in Chapter Two, some of the educational programmes suggested in this study have also been implemented in order to reduce child sexual abuse in different countries. The theoretical framework

showed that community education appeared to be one of the strategies used to reduce child sexual abuse. Most of the community education programmes were effective in the fight against child sexual abuse. It is therefore suggested that the above-mentioned educational programmes can be utilised in the community under study together with other programmes in an attempt to reduce the incidence of child sexual abuse.

6.3.4 Recommendations for further research

The research focused on the reduction of child sexual abuse through community participation. It is suggested that more research needs to be conducted on the following topics:

- How community educators could be trained in order to support community education programmes
- The role of all stakeholders in the development of a community education programme
- Whether sex education can assist in the reduction of child sexual abuse
- A review of cultural norms and values that promote child sexual abuse
- How to sustain community education programmes
- The myth that sexual intercourse with a young girl or virgin can help in the cleansing of HIV/AIDS
- The relationship between child sexual abuse and the environment

6.4 CONCLUSION

The researcher's assumption is that child sexual abuse prevails in the community under study. To test this assumption, questions had to be put to educators, nurses, social workers, church leaders, members of civic organisations, traditional leaders, policing staff and the Victim Empowerment Group as community stakeholders to find out how they viewed the prevalence of child sexual abuse in this community. The findings are reported in Chapter Four.

The research focused on the participation of community members in an attempt to reduce child sexual abuse. The purpose of the research was to investigate ways by which to involve the community in the fight against child sexual abuse to improve the quality of life of community members. A secondary aim was to develop educational programmes that will encourage the community to participate in attempts to reduce the incidence of child sexual abuse. Ways of developing satisfactory interpersonal relationships were also explored.

Through the findings strategies could be identified to encourage community involvement in the reduction of child sexual abuse. Educational programmes that can be established to get the community involved in the fight against child sexual abuse were also identified. The findings further indicated the importance of community education within a particular community. Through this research it became evident that individual education is not enough to deal with community-based problems; community education by community members themselves is of paramount importance to deal with any community-based problem, including child sexual abuse.

This thesis reproduced the voices of different people as authentically as possible to keep them so genuine and original that the participants can recognise their own

thinking. A practical result of this project is the empowerment of the participants who developed a positive attitude to the reduction of child sexual abuse.

The participants appeared to believe in the community education programmes and were committed and willing to support them. They were confident that they would contribute to the success of community education programmes with the aim of improving the quality of life of children and developing harmonious interpersonal relationships. Their contributions in terms of raising awareness between children and parents have to be appreciated and valued.

The findings also helped in identifying the solution to the problem and in finding strategies to encourage community to participate in reducing child sexual abuse.

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APPENDIX 1

ENQ: MABADE A.S.

CELL: 0734110102

P.O. BOX 502

KHAKHU

0974

15 February 2011

The Station Commissioner

Siloam Police Station

A REQUEST FOR TWO STAFF MEMBERS

I would like to request for two members from your staff to participate in the discussions which will be based on child abuse.

I am a registered student at the University of Limpopo. I would like to have discussions which include different stakeholders. My supervisor from the University will also be present.

The details of the discussions:

Date: 22 February 2011

Time: 14:00

Venue: Madala Clinic

I would be happy if this request could be considered positively.

Mabade A.S.

ENQ: MABADE A.S.

APPENDIX 2

CELL: 0734110102

P.O. BOX 502

KHAKHU

0974

9 March 2011

The Station Commissioner

Siloam Police Station

A REQUEST FOR TWO STAFF MEMBERS

I would like to request for two members from your staff to participate in the discussions which will be based on child abuse.

I am a registered student at the University of Limpopo. I would like to have discussions which include different stakeholders. My supervisor from the University will also be present.

The details of the discussions:

Date; 15 March 2011

Time: 14:00

Venue: Madala Clinic

I would be happy if this request could be considered positively

Mabade A.S.

APPENDIX 3

ENQ: MABADE A.S.

CELL: 0734110102

P.O. BOX 502

KHAKHU

0974

15 July 2011

The Station Commissioner

Siloam Police Station

A REQUEST FOR TWO STAFF MEMBERS

I would like to request for two members from your staff to participate in the discussions which will be based on child abuse.

I am a registered student at the University of Limpopo. I would like to have discussions which include different stakeholders. The purpose is to give a report of the individual discussions.

The details of the discussions:

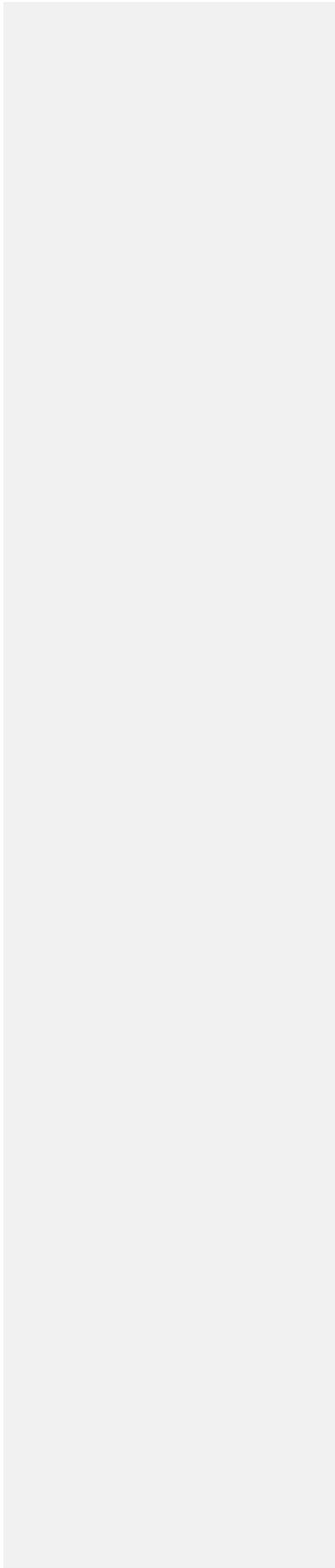
Date; 20 July 2011

Time: 14:00

Venue: Madala Clinic

I would be happy if this request could be considered positively.

Mabade A.S.



APPENDIX 4

GUIDELINES FOR DISCUSSIONS AND INTERVIEWS WITH FOCUS GROUPS

Introduction

The aim is to encourage community participation in the fight against child sexual abuse. The ultimate results will be the improvement of the quality of life and development of good interpersonal relations in the community. You are all experienced community members who live with children. I am interested in your views about child abuse, more especially child sexual abuse in this community. This is an opportunity to discuss your experiences and what can be implemented to improve the situation.

The following questions will be used as a guideline for discussions and interviews. All participants will be required to respond to the same questions. Some of the questions will be responded to individually. The discussions are based on the following themes:

1. The recent cases of child sexual abuse
2. The contributing factors to child sexual abuse
3. The victims of to child sexual abuse
4. The perpetrators of child sexual abuse
5. What can be done to reduce child sexual abuse

Questions for various target groups

The questions were on the following themes:

6. The knowledge of child sexual abuse cases
7. The identification of sexually abused children
8. The behaviour of sexually abused children
9. The victims and perpetrators of child sexual abuse
10. The relationship between child sexual abuse, substance abuse and poverty
11. The responsibility for handling child sexual abuse
12. The solutions for protecting children
13. The role of the stakeholders such as traditional leaders, church leaders and other professionals
14. The availability of community education programmes in the community
15. The strategies to encourage community participation
16. The child protection legislation
17. About organising child advocacy
18. The best way to encourage community to report suspected child abuse
19. The relationship between child sexual abuse and education attainment
20. The relationship between child sexual abuse and a myth
21. The relationship between the victim and perpetrator
22. The role of sex education in the reduction of child sexual abuse
23. On what needs to change in the community
24. The building of commitment in the community.

APPENDIX 5

INTERVIEWS SCHEDULE

Phases	Date	Time	Duration	Venue
Preparatory phase	22 Feb 2011	14:00	2 hrs	Madala clinic
Second phase	15 Mar 2011	14:00	2 hrs	Madala clinic
Third phase	1-30 May 2011	14:00	2 hrs	Homes
Fourth phase	20 July 2011	14:00	2 hrs	Madala clinic

APPENDIX 6

DATA MATRIX

TOPIC	EDUCATORS	NURSES	SOCIAL WORKERS	CHURCH LEADERS	TRADITIONAL LEADERS	CIVICS	POLICING STAFF	VICTIM
1. Identification	Passiveness in class; shy; withdrawal symptoms	Aggressiveness and depression; very shy and cannot walk properly	Crying, shy to speak and frustrated	Poor performance; passiveness; crying and difficulty in walking	Lonely, very shy Deterioration of performance at school	Unable to walk, abnormal discharges, health deteriorate and afraid	Lonely, shy	Lonely; do not walk properly; sexually transferred diseases programme
2. Behaviour	Isolated; lonely	Lonely and always in need of sex	Not free; afraid of adults; would never want to marry	Feel inferior, frustrated and always fail; unclean	Ignorant and careless	Very careless, hopeless and not free	Not free	Shy, afraid of her mistake; stability
3. Victim and perpetrators	Young girls, step-fathers and educators	Both boys and girls; HIV positive step-parents. HIV positive educators and relatives	Primary school girls; secondary girls due to peer pressure; boys, men and women HIV positive	Young girls, parents and relatives	Young girls, few boys; parents and relatives	Young girls mostly without parents. Children of heavy drinkers and step-fathers	Young girls, few boys. Step-father and educators	Young girls and few boys; disabled and mentally disabled father or mother
4. Relationship: child sexual	Strong	Yes	Yes, drinkers and	Yes, drinkers and drug abusers;	Yes, drinkers and	Yes, strong	Yes, strong relationship;	Yes, parents are drinkers; lack of

Comment [EB1]: SAMSON, I don't know what is meant here. Do you mean 'no stability'?

abuse, substance abuse and poverty	relationship		drug abusers. Lack of parental support	lack of parental support	drugs abuse	relationship	drinker, drug abuser. Children need money	parental support
5. Responsible for handling CSA	Civic structures, social workers, police and local council	Civil structures, victim empowerment, social workers, nurses and police	Families affected, tribal councils and social workers	Police, social workers and traditional leaders	Educators, parents, social workers, members of civic organisation, CPF and tribal council	Civic and CPF, traditional and police	VEP refers to police	SW, nurses child-line; home-based care
6. Protection against child sexual abuse	Reporting abuse. Always Be in group; open to educator; sporting activities and awareness campaigns	By playing close to home; always in groups; away from strangers; sex education; community education programme	Not to be left alone. Advised not to follow strangers; parents should be taught what a child is	Close to parents or adult people; heavy punishment for perpetrator; visibility of police	Campaign against CA; community meetings; relationships	CEP	Sport; awareness campaigns; Community Policing Forum	CE programme; sport; campaigns; conferences
7. Role of tribal leader, social workers and	Organise council meeting; involve other stakeholders; give	Call council meeting; report to VEP; police organise	Emphasise the protection of children; refer case to SW;	Call victim and perpetrator in kangaroo court; call meetings of	Counsel victim; report cases to police station	Call community meetings; confirm the counseling of the victim;	Inform SW and police and social worker; organise campaigns;	Council meetings; keep statistics; counsel victims; organise

professionals	counseling to victim	awareness campaign; keep statistics of child sexual abuse; identify abused formal	organise campaign; arrange posters; organise education	youth to keep them from drugs		facilitate community education	facilitate sporting activities	campaigns
8. Community education programmes	Victim empowerment, community education programme Home-based care but not effective	Yes, such as VEP. Home-based care; HIV programme and drug abuse	Yes	Yes	Yes, but not effective	Yes, but not effective	Youth development programme	Yes HBC; orphanage programme; child-line programme
9. Strategies to encourage community participation	Door-to-door campaigns, community meetings and collaboration of parties	Campaigns focusing on child sexual abuse including the victims and perpetrators	Awards to reporters and sporting activities	Engage community in any activity; council meetings Sunday school programme sports	Meeting of all community members; awards to community builders	Campaigns include victims and perpetrators		Campaign includes victims and perpetrators; visit to prisons
10. Child protection	Known	Known/yes	Known/yes	_____	Known, attended workshop	Yes / known		Known / yes

legislation								
11. Organising child advocacy	Teams and committees	Child support groups	Teamwork for all	_____	_____	Involving stakeholder		Involving all stakeholders
12. Encouraging community to report child sexual abuse	Know about confidentiality and through community education	Suggestion box and community awareness campaigns	Suggestion box and awareness of confidentiality	Workshops, awareness campaigns and suggestion boxes	Promotion of relationship between civic and traditional leaders, police	Awareness campaigns		Awareness campaigns. Suggestion box ethical consideration
13. Relationship child sexual abuse and educational attainment	No relationship because they are all abusing	Yes uneducated people are the most perpetrators. Not clear cut in this regard	Yes, uneducated people are the most perpetrators	_____	No, both abuse sexually	No relationship	No	No relatives
14. Relationship: child sexual abuse and myth	Yes, belief with regard to HIV/AIDS and virginal children	Yes, strong belief of HIV/ AIDS and virginal children	Yes, strong belief of HIV/ AIDS and virginal children	Yes , strong belief of HIV/AIDS and virginal children	Yes , strong belief of HIV/AIDS and virgin or child	Yes relationship belief of HIV/AIDS and child	Yes , belief of HIV/AIDS and virginal children	Strong relationship belief of HIV/ AIDS and virgin/child
15. Sex education and child sexual	Yes	Yes	Yes		Yes	Yes		

abuse								
16. What needs to change in the community	Mindset knowledge through education	Mindset and attitude	Mindset, attitude towards child abuse and HIV/AIDS	Mindset, attitude towards child SA and HIV	Community education programme, attitude and working of CPF	Mindset, lifestyle, attitude	Break the silence	Mindset, attitude towards child sexual abuse
17. Commitment building	Community educational programme				—			
18. Municipality	Yes	Yes	Yes, the placement of social workers		No indications of municipality			