



## Problem

- Child sexual abuse is associated with higher incidence of many adult health problems and risk-taking behaviors<sup>1</sup>.
- Literature on adult caregiver vigilance (protective and preventive behaviors) for child sexual abuse largely focuses on a single caregiver<sup>2</sup>.
- Examining caregiver vigilance from a social ecological perspective reflects that child sexual abuse is a complex, dynamic, and social phenomenon<sup>1</sup>.

## Aim

The study aim was to examine adult caregiver vigilance for child sexual abuse from a social ecology perspective, across multiple settings for a school-age child.

Research Questions:

- How does vigilance around child sexual abuse exist within the caregiving cluster of a child's social ecology?
- What are the experiences of caregivers within a child's social ecology pertaining to vigilance around child sexual abuse?

## Methods

A family was identified. Informed consent obtained from adults; assent from child.

The child, a 9-year-old Caucasian male, identified adults in his social ecology who "live with you, teach you, help take care of you."

One-on-one semi-structured interviews conducted with both biological parents.

Questions included focus on:

- Actions they take to address safety needs
- Perception of child's risk for various safety and well-being concerns, including child sexual abuse
- Perception of higher risk environments
- Influences on their approach to child's safety

Recruitment of caregivers in out-of-home settings unsuccessful after three attempts via the mother. A focus group of child professionals in child's community was conducted.

Themes were identified using open coding of transcripts of the interviews and focus group.

## Selected Identified Themes

### Attention/Energy Diversion from Caregiver Vigilance

-Responsibilities and activities of various types take away from attention and energy

-Including:

- Meeting basic needs (for families in poverty, per focus group)
- Work-related efforts (per both caregivers)
- "fixing", "maintaining" things in the home (per father)
- Community involvement including church roles (per both caregivers)



### Differences in Vigilance Needs

-Change in prioritization according to age

- More interaction-related concerns for child as he gets older vs. physical injury
  - "scary", "loss of control" of these concerns (per mother)

-Difference in level of concern for child sexual abuse

- Lower concern for child due to stability of environment, familiarity with the adults around child (per caregivers)
  - Knowing [adults around child] "down deep" (per mother)
  - Shared belief system with adults (per caregivers)
- Bias in safety concerns for child based on caregivers' personal trauma history (per focus group)

### Personal Sense of Risk Assessment

-Caregivers feeling "caught off guard" by occurrence/circumstance of abuse event (per focus group)

-Caregiver assessment of internal risk recognition

- "Emotionally" assessing situations and risk surveillance "inside of us" with "little flags" (per mother)
- Addressing risks "on the front end" includes "a scan of the area" in new settings (per father)

## Conclusions

There are cross themes for caregivers of a child that also can be identified among child well-being professionals. How the theme translates into action around child can vary.

Differences in risk assessment and vigilance behaviors may exist according to gender roles, personal trauma experience, and environments of interaction for child.

Further exploration with additional caregiver clusters, and with clusters for a diverse group of family make ups may provide additional insight into the influences and action of vigilance as it affects the child within their social ecology.

Recruitment within caregiver clusters appears more successful for one-on-one interviews compared to focus group, perhaps due to sensitivity of topic or scheduling challenges. This can inform future, wider study design.



## References

1. Felitti, V.J. and R.F. Anda, *The relationship of adverse childhood experiences to adult medical disease, psychiatric disorders, and sexual behavior: Implications for healthcare*, in *The hidden epidemic: The impact of early life trauma on health and disease*, R. Lumins and E. Vermetten, Editors. 2009, Cambridge University Press: Cambridge, England.
2. Babatsikos, G., *Parents' knowledge, attitudes and practices about preventing child sexual abuse: a literature review*. *Child Abuse Review*, 2010. 19(2): p. 107-129.