



Exploring Gender Differences in Child Sexual Abuse: Evidence from Adolescents in Port Harcourt

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Authors' contributions

This work was carried out in collaboration between both authors. Both authors read and approved the final manuscript.

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ABSTRACT

Background: Child sexual abuse (CSA) is one of the severest forms of abuse in humanity due to its lasting effect on the child. The perpetrators are usually close acquaintances of the victims. This study aims to analyse the gender difference in the pattern of CSA among adolescents in Port Harcourt.

Method: A cross-sectional study was done among adolescents in 4 secondary schools in Port Harcourt. Multi-staged sampling method was employed. The CSA questionnaire was used as the study tool. Ethical clearance was obtained from the University of Port Harcourt Research and Ethics Committee. Data was analysed using SPSS version 25

Result: A total of 600 adolescent males and females aged 10 to 17 years participated in the study. The mean age was 13.25 ± 2.11 years, 340 (56.7%) of them were males. Of the 600 participants, 68 (11.3%) reported that they had experienced CSA. More males, (12.7%), than females, (9.6%), were victims of CSA. Male (90.7%) victims were abused before the age of 15 years, compared to (68.0%) the female victims. While more male victims, compared to females, experienced multiple

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episodes of abuse that lasted for years. Male victims experienced all forms of CSA more than the females. Thirty eight (55.9%) of the perpetrators were adult males, while females were more likely to abuse male victims. Only 5(7.4%) of the victims disclosed their abuse. More female victims, 4 (16.0%), compared to 1 (2.3%) male victim, disclosed their abuse; this gender difference was significant ($\chi^2=4.28$, $p=0.04$).

Conclusion: CSA is still prevalent in our society with a significant gender difference. Adolescent males are common victims, disclosure rate is poor, with more girls likely to disclose their abuse. Most perpetrators are male relatives, with more female perpetrators abusing the male child. Implementing gender sensitive prevention and intervention programs that actively engage both children and parents to reduce the occurrence is needed.

Keywords: CSA; adolescents; gender difference; prevalence; pattern; Port Harcourt.

1. INTRODUCTION

Child Sexual Abuse (CSA) is a crime prevalent in the society and in all cultures, and is described as a grave public and social problem (Zhu et al., 2024). It has been known by different terms, including child sexual victimisation, exploitation, sexual assault and others. According to the World Health Organisation (WHO), CSA is defined as “the involvement of a child in sexual activities that he or she does not fully comprehend, is unable to give informed consent to or for which the child is not developmentally prepared, or else that violates the law or social taboos of society”. Children, by virtue of their age or developmental stage, can be abused by even other children or adults who are in a position of power, trust or responsibility over them (WHO., 2003; Zhu et al., 2024). CSA negatively impacts the mental health of children, causing mental health issues such as post-traumatic stress disorder, major depressive disorder, psychotic experiences, eating disorders, anxiety, borderline personality disorder, and conversion disorder (Palmer et al., 1999; Latiff et al., 2024).

The crime may not be committed only by touching or coming in contact with the child (touching the genital of the child, making the child touch another person's genital, or putting an object or body parts into the child's vulva or vagina, mouth or anus) for sexual gratification; it can also occur in the form of non-contact abuse which includes exposing the child to pornography, child prostitution or watching a child while undressing or while taking a bath. In most cases of CSA, close acquaintances and family members are the major perpetrators, while in one-third of cases, perpetrators are non-family members (Gabriel-Job, 2019a; Ferragut et al., 2021; Shevlin et al., 2018).

Without doubt, studies contain varied prevalence rates that are inconsistent and widely varied. This may be due to various definitions of CSA used, the cultural and religious factors, including the law guiding such a society, as well as the method of data collection; these factors contribute to the inconsistency in prevalence (Krug et al., 2002).

The WHO, in their report on the prevention of violence, stated that the lifetime prevalence rate of CSA for females was 18% with that of males placed at 7.6%. In the same report, Africans had the highest prevalence rate of CSA as high as 33% for females and 14% for males (Butchart & Mikton, 2014). The WHO had also opined that, following reports from several studies, when a more expansive definition of child sexual abuse was used, the prevalence rates increased to 19% and 45% for males and females, respectively (Krug et al., 2002).

Several studies and reviews have consistently reported females as being more vulnerable and prone to recurrent victimisation than males. Several works on CSA among individuals less than 18 years have reported a prevalence ranging from 8%-31% for girls while that of boys was 3% -17% (Zhu et al., 2024; Gabriel-Job, 2019b; Barth et al., 2012).

In contrast, however, a Chinese study reported that males had a higher prevalence of CSA compared to females, with the prevalence of both direct (contact) and indirect (non-contact) forms of CSA being more prevalent in boys than girls, with boys also having a higher prevalence of repeated and chronic abuse than females (Zhu et al., 2024).

According to previous studies (Eagly & Wood, 2012; Reddock et al., 2020), gender inequality

and sexism were the common explanations given for these gender differences in the prevalence of CSA. In a society where men dominate, it is thought that females are often used for male sexual gratification. Thus, in such cultures, males are trained to be more forceful, secretive and self-sufficient than females. Females, because they are perceived as being vulnerable, are more prone to being the objects of male abuse, including CSA, which is a reason they are more likely to be victims of CSA (Zhu et al., 2024; World Health Organization, 2003).

Over the last 3 decades, CSA has gained a considerable amount of attention globally, making it a common researchable type of child abuse. This is due to evidence of the immediate and long-term psychosocial damage that the victims experience (Ajdukovic et al., 2013; Chen et al., 2010). Study has also shown that there is a gender difference in the pattern of behaviours or outcomes following CSA. For instance, internalising behaviours such as suicidal tendencies and depression were reportedly more rampant in females, while externalising behaviours such as substance abuse, violence, delinquent and harmful sexual behaviours were exhibited by male victims (Chandy et al., 1996). Similarly, about disclosure of CSA, Okur et al. (2020) reported that there was a significant gender difference in informal disclosure of CSA, as females were 2.4 times more likely to report this abuse compared to males. In the same vein, a study among Finnish children reported that more girls disclosed their abuse than the boys (Hietamäki et al., 2024). With the aid of social media and recording devices, more girls in Africa are reporting sexual abuse that was perpetrated by their teachers while in school. (Msambila & Abdallah, 2021).

Although several works have consistently reported that girls are more vulnerable than boys to CSA. A relatively few studies have revealed varying results about gender differences in the pattern of CSA in Nigeria. In Rivers State, Nigeria, studies on CSA also showed that the majority of the victims were females, with more adult males as the abusers, compared to females (Gabriel-Job, 2019a; Gabriel-Job et al., 2019b). There are rather limited studies to highlight the gender difference in the prevalence and pattern of CSA, where it exists; adult victims were studied and were made to recall their experiences that may have occurred

several decades ago, with a possibility of recall bias. This study aims to determine the gender differences in the prevalence and pattern of CSA among secondary school students in four selected schools in Rivers State, Nigeria, with a view to providing evidence for early intervention and gender sensitive preventive strategies.

2. METHODS

Study design: A descriptive cross-sectional study was done. A structured pretested questionnaire was used for the study.

Setting of study: This study was carried out in March 2023 in 4 selected secondary schools in Port Harcourt. Port Harcourt is the capital of Rivers State. It is a cosmopolitan city and home to people of diverse cultures and social and economic status. This makes it a suitable place to x-ray a sensitive topic like sexual abuse of children. Port Harcourt has several public and private schools.

Study participants: Male and female adolescents aged 10 years to less than 18 years from the selected schools.

Inclusion criteria:

1. Adolescents aged 10 years -less than 18 years who attend the selected schools
2. Adolescents who were present in school during periods of data collection
3. Adolescents who gave assent to the study and whose parents gave informed consent for the study.

Exclusion criteria:

1. Adolescents who were sick during the period of the survey or who have an intellectual disability that can affect their ability to comprehend the content of the questionnaire.

Sample size calculation: The Cochran formula for descriptive studies was used to calculate the minimum sample size (Cochran, 1977). Using a standard deviation of 1.96 corresponding to 95% confidence interval, a prevalence of CSA from a previous study in Port Harcourt of 36.7%, an error margin tolerated at 5% and a non-response allowance of 10%, a minimum sample size of

400 was calculated. And this was proportionately distributed between the four schools.

Sampling method: A multistage sampling method was used. Using the school list as obtained from the Rivers State Ministry of Education as the sampling frame. The schools were first stratified into private and public schools. Four schools, two each from the private and public groups, were selected by simple balloting. Secondly, from each selected school, a class was randomly selected from the junior and senior secondary classes to represent such school. Last was the selection of study participants. From each selected school, 158 participants were selected. This was done by using the class register as the sampling frame; the odd numbers in the class register were selected until the sample size was attained.

Study tool and administration: A self-administered questionnaire on child sexual abuse by Halpérin et al. (1996) was adapted for the study. The questionnaire was pretested among 40 adolescents in 2 schools that were not part of the study schools for clarity. Four research assistants distributed the questionnaire to the participants and retrieved it after completion same day in the various schools, after assuring them of secrecy and anonymity. Each questionnaire took each student about 25 -35 minutes to complete; teachers were not allowed to view completed questionnaires.

Socioeconomic classification of participants was determined using the scheme proposed by Ibadin & Akpede, 2021).

Data analysis: Analysis was conducted with a significance level set at 0.05 using IBM SPSS Statistics software (version 25.0). Descriptive statistics were done, a Student's t-test was used to compare means, while the chi-square test was used to compare two subgroups. Results were presented in frequency tables in simple proportions.

3. RESULTS

A total of 632 questionnaires were distributed, and 600 were completed, giving a response of 94.9%. The ages of the participants ranged from 10 years to 17 years, with a mean age of 13.25 ± 2.11 years. Two hundred and fifty-two (42.0%) were within the 10-12 years age group. Males were 340(56.7%), while 253(42.2%) were from the lower social class. The distribution of participants in the various school classes was nearly equal. (Table 1).

Of the 600 adolescents who participated in the study, 68 (11.3%) were victims of sexual abuse. Forty-two (12.6%) of the 340 males, compared to the 25(9.6%) of the 260 females, reported that they had experienced sexual abuse. The sex difference in prevalence was not statistically significant, $p = 0.25$, $\chi^2 = 1.35$ (Fig. 1).

Table 1. socio-demographic characteristics of participants

Variables	Frequency	Percentages
Ages		
10-12	252	42.0
13-15	218	36.3
16-17	130	21.7
Sex		
Males	340	56.7
Females	260	43.3
Social class		
Upper	137	22.8
Middle	210	35.0
Lower	253	42.2
Class in school		
JSS1-3	295	49.2
SSS1-3	305	50.8
Total	600	100.0

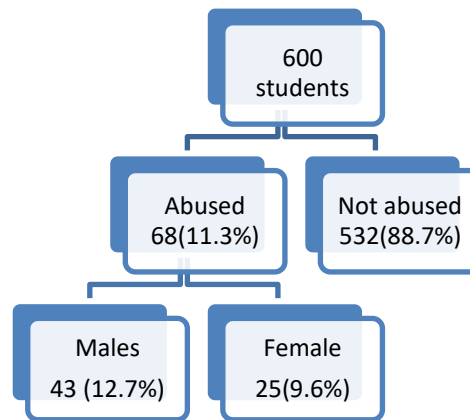


Fig. 1. Overall Prevalence of Sexual abuse and prevalence by sex

Concerning the age at first abuse, 24 (35.3%) cases of abuse occurred between the ages of 10-12 years. Thirty-nine (90.7%) of the 43 male victims were abused before the age of 15 years, compared to 17 (68.0%) of the 25 female victims, while abuses occurring from 15 years of age involved more females, 66.7% compared to 33.3% of male victims. The mean age at onset of abuse was 11.6 ± 2.9 years. The mean age for the males was 10.9 ± 2.9 years, while that of the females was 12.8 ± 2.6 years. The sex difference for age of onset was significant ($t = 2.73$, $p = 0.008$)

Victims came from both lower and upper socioeconomic classes; however, more

victims were of the lower socioeconomic class, and this difference was not statistically significant.

Concerning the episodes of abuse. All the victims reported one perpetrator; multiple episodes from the same perpetrator were reported by 31 (81.6%) of the 43 male victims compared to 7 (18.4%) of the 25 female victims. This sex difference was significant. Thirty eight (59.0%) victims were abused for more than 1 year, with more males experiencing repeated abuse for a longer duration than the females. This was a statistically significant finding ($p < 0.001$). Non-contact form of abuse was more prevalent (Table 2).

Table 2. Characteristics of victims

Variables	Sex of victims		Total	χ^2	P
	Males	Females			
Age at first abuse				7.37	0.61
Less 10	14(82.2)	3(17.7)	17 (100.0)		
10-12	15 (62.5)	9 (37.5)	24 (100.0)		
13-14	10 (66.7)	5 (33.3)	15 (100.0)		
≥ 15 years	4 (33.3)	8 (66.7)	12 (100.0)		
Mean age 11.6 ± 2.9					
Social class				0.01	0.93
Upper	9 (64.3)	5(35.7)	14 (100.0)		
Lower	34 (63.0)	20 (37.0)	54 (100.0)		
Episodes of abuse				12.28	0.0004
Ones	12 (40.0)	18 (60.0)	30 (100.0)		
Multiple	31 (81.6)	7 (18.4)	38 (100.0)		
Duration				14.61	0.0006
Less than 1 year	12 (40.0)	18 (60.0)	30 (100.0)		
1-2 years	24 (88.9)	3 (11.1)	27 (100.0)		
More than 2 years	7 (63.7)	4 (36.4)	11(100.0)		

Variables	Sex of victims		Total	χ^2	P
	Males	Females			
Forms of abuse				0.01	0.94
Contact	10(62.5)	6(37.5)	16(100.0)		
Non-contact	33(63.5)	19(36.5)	52 (100.0)		
Total	43(63.2)	25(36.8)	68 (100.0)		

Disclosure of CSA was low- 5(7.4%) of the 68 victims. More females 4 (16.0%) disclosed their abuse compared to 1 (2.3%) of males. This sex difference was significant. (Table 3)

Perpetrators were 49 (72.0%) males and 19(28.0%) females; their ages ranged from 15 years to 52 years, with a mean age of 24.60±8.85 years. Mean age for the males was 25.67±8.91, while that of the females was 21.84±8.26. This was not significant (t 1.62, p

0.11). Twenty-eight (41.2%) of the perpetrators were between 18-24 years of age, 38 (55.9%) of the perpetrators of CSA were adult males. More than half of the perpetrators (67.5%) were family members. (Table 4)

More females were perpetrators of male CSA, though this was not statistically significant. The age of the perpetrator was not a significant factor in the prevalence of CSA by sex.

Table 3. Pattern of disclosure of abuse

Variables	Disclosure		Total
	Yes	No	
Males	1(2.3)	42(97.7)	43(100.0)
Females	4(16.0)	21(84.0)	25(100.0)
Total	5(7.4)	63(92.6)	68(100.0)

$$\chi^2=4.28, \quad p=0.04$$

Table 4. Characteristics of perpetrators

Variables	Frequency = 68	Percentages
Sex		
Males	49	72.0
Females	19	28.0
Age		
Less than 18years	17	25.0
18 years -24 years	28	41.2
>24 years	23	33.8
Mean age 24.60±8.85		
Relationship to perpetrators		
Relatives	46	67.5
Non-relatives	22	32.4
Total	68	100.0

Table 5. Relationship between perpetrators' sex and age and victims of abuse

Variables	Sex of victims		Total	χ^2	p	OR	CI
	Males	Females					
Sex of perpetrators				0.30	0.58	0.73	0.24-2.25
Males	30 (61.2)	19 (38.8)	49(100.0)				
Females	13 (68.4)	6 (31.6)	19 (100.0)				
Ages of perpetrators				1.02	0.31	0.56	0.18-1.71
Less than 18 years	9 (52.9)	8 (47.1)	17 (100.0)				
18 years and above	34 (66.7)	17 (33.3)	51 (100.0)				
Total	43 (63.2)	25 (36.8)	68 (100.0)				

4. DISCUSSION

This study investigated the prevalence and pattern of child sexual abuse among adolescents and focused on the gender differences.

The overall prevalence of 11.3 % in this study aligns with both global and local prevalence rates (Gabriel-Job, 2019a; Gabriel-Job et al., 2019b; Walker-Descartes et al., 2021; Piolanti et al., 2025). Piolanti et al. (2025) in their study reported a worldwide lifetime prevalence of 11% following their systematic review and meta-analysis.

The male preponderance in this study contrasts with most reports that females were more vulnerable and had higher prevalence rates (Piolanti et al., 2025). This difference may reflect a methodological factor. For instance, Barth et al. (2012) reported that the prevalence was varied among the two genders, with the females having a prevalence ranging from 8% to 31% while the males had much lower prevalence rates of 3% - 17%. Similarly, Cagney et al. (2025) reported a global prevalence of sexual violence against children of 18.9% among females, while for males it was 14.8%. These studies were both systematic review of previous works from several countries. Figueiredo et al, on the other hand, found an equal prevalence rate for both males and females (Figueiredo et al., 2004).

The finding of this present study, however, agrees with Zhu et al. (2024)) who reported a higher prevalence among males. Likewise, Madu et al reported a higher prevalence among males in a South African study in which the male prevalence was 7% higher than that of the females (Madu & Peltzer, 2000).

It could be possible that, being a school-based study with questionnaires that were self-administered, victims, especially males, were more willing to give the true nature of the abuse they experienced. Also, the fact that confidentiality and anonymity were assured may have encouraged them to be truthful in a setting where males are trained to be more forceful, secretive and self-sufficient than females (Zhu et al., 2024; World Health Organization, 2003). Furthermore, the fact that more boys participated in the study could be a reason for the higher prevalence noted among them.

CSA may start at a very young age and last for a long time, even extending into adulthood

(Ajdukovic et al., 2013). In this study, the mean age at onset of CSA was 11.6 ± 2.9 years. This was much higher than the two previous studies that reported a much younger age of onset and the abuse lasting for several years (Crowley & Seery, 2008; Abreu et al., 2025).

The age at first abuse differed significantly between sexes in the present study. The finding of a much younger age of onset among males in this study is similar to a report by AL-Asadi (2021), who opined that males were twice at risk of experiencing their first sexual abuse at a much younger age than females. Our finding, however, is at variance with a study by Sydney that had reported an increase in the proportion of female victims across all age categories, with a steady increase as their age increases (Snyder, 2000).

The higher occurrence of sexual abuse commencing at a much older age among female adolescents may be a reflection of the developmental stage where there is a high interest in sexuality and exploration, which could put them at a higher risk for abuse (Ajdukovic et al., 2013).

The findings of this study showed that non-contact forms of CSA were more common, a finding similar to previous studies (Gabriel-Job, 2019a; Ajdukovic et al., 2013). Although male victims experience more of the contact and non-contact forms of CSA compared to females, a finding that conforms with a recent Nigerian study (Abreu et al., 2025). This finding highlights the need to pay attention to the plight of the male child and to ensure sexuality education as early as possible to prevent this menace.

There was a significant gender difference in disclosure of sexual abuse in the present study, with more females likely to report their abuse than males. This finding agrees with previous studies that reported less disclosure in boys than girls (Okur et al., 2020). Okur et al. (2020) reported that there was a significant gender difference in disclosure of CSA, as females were 2.4 times more likely to report their abuses compared to males. Similarly, Hietamäki et al. (2024) reported that females were more likely than males to tell someone about their abuse. Cultural concepts of masculinity, fear of being stigmatised, as well as humiliation, may prevent a male victim from disclosing such abuse. In contrast, females may be more willing to share their experience with someone they trust (Zhu et al., 2024).

The poor disclosure rates is an important factor that leads to repeated and chronic victimisation, a situation that was observed in this study, as some of the victims, particularly the boys, experienced multiple episodes of abuse that lasted for several years. Thus, this has a key implication for prevention and interventions.

Regarding the perpetrators' characteristics, most were males, known to the family and were mainly family members; this finding aligns with previous studies that stated that a high proportion of the perpetrators are males (Snyder, 2000; Ferragut et al., 2021). Though female perpetrators constituted 28% in this study, they were more likely to abuse male victims. This finding agrees with Abreu et al. (2025) and Ferragut et al. (2021) who reported that females were the major perpetrators of CSA for the male victims. Several studies have reported that males were disproportionately victimised by perpetrators who were females; however, such abuse was mostly trivialised or wrongly interpreted as consensual sexual initiation (Zhu et al., 2024). Hence, while designing a preventive programme on child sexual abuse, there is a need to consider the male child as a victim and a female who seems harmless as a possible aggressor.

5. CONCLUSION

This study discloses a gender difference in the pattern of CSA in Port Harcourt, with a higher prevalence in males, more males being abused much earlier and for a longer period of time. Additionally, more males experienced both contact and non-contact forms of CSA compared to females. Disclosure of abuse is low, with more females disclosing their abuse than males. Males were the major perpetrators; however, more females were aggressors of male victims. Implementing gender sensitive prevention and intervention programs that actively engage both children and parents to reduce the prevalence is needed.

ETHICAL APPROVAL AND CONSENT

Permission was obtained from the Rivers State Ministry of Education and the head teachers of the selected schools before commencement of the survey. Confidentiality and anonymity were assured. Assent was obtained from all the participants, while a written consent was obtained from the parent or guardian a few days before administering the questionnaires. Ethical clearance was obtained from the Research and

Ethics Committee of the University of Port Harcourt with Ref Number UPH/CEREMAD /REC/MM73/017

DISCLAIMER (ARTIFICIAL INTELLIGENCE)

Author(s) hereby declare that NO generative AI technologies such as Large Language Models (ChatGPT, COPILOT, etc.) and text-to-image generators have been used during the writing or editing of this manuscript.

COMPETING INTERESTS

Authors have declared that they have no known competing financial interests or non-financial interests or personal relationships that could have appeared to influence the work reported in this paper.

REFERENCES

- Abreu, L., Hecker, T., Goessmann, K., Abioye, T. O., Olorunlambe, W., & Hoeffler, A. (2025). Prevalence and correlates of sexual violence against adolescents: Quantitative evidence from rural and urban communities in South-West Nigeria. *PLOS Global Public Health*, 5(2), e0004223. <https://doi.org/10.1371/journal.pgph.0004223>
- Ajdukovic, M., Susac, N., & Rajter, M. (2013). Gender and age differences in prevalence and incidence of child sexual abuse in Croatia. *Croatian Medical Journal*, 54(5), 469–479. <https://doi.org/10.3325/cmj.2013.54.469>
- Ajdukovic, M., Susac, N., & Rajter, M. (2013). Gender and age differences in prevalence and incidence of child sexual abuse in Croatia. *Croatian Medical Journal*, 54(5), 469–479. <https://doi.org/10.3325/cmj.2013.54.469>
- Al-Asadi, A. (2021). A comparison between male and female survivors of sexual abuse and assault in relation to age at admission to therapy, age of onset, and age at last sexual assault: Retrospective observational study. *JMIRx Med*, 2(4), e23713. <https://xmed.jmir.org/2021/4/e23713>
- Barth, J., Bermetz, L., Heim, E., Trelle, S., & Tonia, T. (2012). The current prevalence of child sexual abuse worldwide: A systematic review and meta-analysis. *International Journal of Public Health*. <https://doi.org/10.1007/s00038-012-0426-1>

- Butchart, A., & Mikton, C. (2014). *Global status report on violence prevention*. World Health Organization. https://www.researchgate.net/publication/269405646_Global_status_report_on_violence_prevention_2014
- Cagney, J., Spencer, C., Flor, L., Herbert, M., Khalil, M., O'Connell, E., et al. (2025). Prevalence of sexual violence against children and age at first exposure: A global analysis by location, age, and sex (1990–2023). *The Lancet*. [https://doi.org/10.1016/s0140-6736\(25\)00311-3](https://doi.org/10.1016/s0140-6736(25)00311-3)
- Chandy, J. M., Blum, R. W., & Resnick, M. D. (1996). Gender-specific outcomes for sexually abused adolescents. *Child Abuse & Neglect*, 20(12), 1219–1231. [https://doi.org/10.1016/s0145-2134\(96\)00117-2](https://doi.org/10.1016/s0145-2134(96)00117-2)
- Chen, L. P., Murad, M. H., Paras, M. L., Colbenson, K. M., Sattler, A. L., Goranson, E. N., et al. (2010). Sexual abuse and lifetime diagnosis of psychiatric disorders: Systematic review and meta-analysis. *Mayo Clinic Proceedings*, 85, 618–629. <https://doi.org/10.4065/mcp.2009.0583>
- Cochran, W. G. (1977). *Sampling techniques* (3rd ed.). John Wiley & Sons.
- Crowley, M. S., & Seery, B. L. (2008). Exploring the multiplicity of childhood sexual abuse with a focus on polyincestuous contexts of abuse. *Journal of Child Sexual Abuse*, 10(4), 91–110.
- Eagly, A. H., & Wood, W. (2012). Social role theory. In *SAGE Publications Ltd eBooks* (pp. 458–476). <https://doi.org/10.4135/9781446249222.n49>
- Ferragut, M., Ortiz-Tallo, M., & Blanca, M. J. (2021). Victims and perpetrators of child sexual abuse: Abusive contact and penetration experiences. *International Journal of Environmental Research and Public Health*, 18(18), 9593. <https://doi.org/10.3390/ijerph18189593>
- Ferragut, M., Ortiz-Tallo, M., & Blanca, M. J. (2021). Victims and perpetrators of child sexual abuse: Abusive contact and penetration experiences. *International Journal of Environmental Research and Public Health*, 18(18), 9593. <https://doi.org/10.3390/ijerph18189593>
- Figueiredo, B., Bifulco, A., Paiva, C., Maia, A., Fernandes, E., & Matos, R. (2004). History of childhood abuse in Portuguese parents. *Child Abuse & Neglect*, 28(6), 669–682.
- Gabriel-Job, N. (2019a). Pattern of sexual abuse of minors in Rivers State, Nigeria: A school-based study. *West African Journal of Medicine*, 36(3), 274–279.
- Gabriel-Job, N., Alikor, E. A. D., & Akani, N. (2019b). Prevalence of child sexual abuse among secondary school adolescents in Obio/Akpor Local Government Area of Rivers State, Nigeria. *Nigerian Journal of Paediatrics*, 46(4), 156–162. <https://www.njpaediatrics.com/index.php/njp/article/view/81>
- Halpérin, D. S., Bouvier, P., Jaffe, P. D., Mounoud, R.-L., Pawlak, C. H., Laederach, J., & Rey Wicky, H. (1996). Prevalence of child sexual abuse among adolescents in Geneva: Results of a cross sectional survey. *British Medical Journal*, 312, 1326–1329.
- Hietamäki, J., Husso, M., Arponen, T., & Lahtinen, H. M. (2024). Differences between girls and boys in the disclosure of sexual violence. *Journal of Interpersonal Violence*. <https://doi.org/10.1177/08862605231221283>
- Ibadin, O. M., & Akpede, G. O. (2021). A revised scoring scheme for the classification of socio-economic status in Nigeria. *Nigerian Journal of Paediatrics*, 48(1), 26–33.
- Krug, E., Dahlberg, L., Marcy, J., Zwi, A., & Lozano, R. (2002). *World report on violence and death*. World Health Organization. https://apps.who.int/iris/bitstream/handle/10665/42495/9241545615_eng.pdf?sequence=1
- Latiff, M. A., Fang, L., Goh, D. A., & Tan, L. J. (2024). A systematic review of factors associated with disclosure of child sexual abuse. *Child Abuse & Neglect*, 147, 106564.
- Madu, S., & Peltzer, K. (2000). Risk factors and child sexual abuse among secondary school students in the Northern Province (South Africa). *Child Abuse & Neglect*, 24(2), 259–268.
- Msambila, A. A., & Abdallah, A. A. (2021). Economic factors influencing sexual violence against children (SVAC) in primary schools of urban district, Zanzibar, Tanzania. *Asian Research Journal of Arts & Social Sciences*, 15(4), 23–32. <https://doi.org/10.9734/arjass/2021/v15i430264>

- Okur, P., van der Knaap, L. M., & Bogaerts, S. (2020). A quantitative study on gender differences in disclosing child sexual abuse and reasons for nondisclosure. *Journal of Interpersonal Violence*, 35(23–24), 5255–5275.
<https://doi.org/10.1177/0886260517720732>
- Palmer, S., Brown, R., Rae-Grant, N., & Loughlin, M. (1999). Responding to children's disclosure of familial abuse: What survivors tell us. *Child Welfare*, 78(2), 259–282.
- Piolanti, A., Schmid, I. E., Fiderer, F. J., Ward, C. L., Stöckl, H., & Foran, H. M. (2025). Global prevalence of sexual violence against children: A systematic review and meta-analysis. *JAMA Pediatrics*, 179(3), 264–272.
<https://doi.org/10.1001/jamapediatrics.2024.5326>
- Reddock, R., Reid, S. D., & Nickenig, T. (2020). Child sexual abuse and the complexities of gender, power, and sexuality. *Journal of Interpersonal Violence*.
<https://doi.org/10.1177/0886260520909193>
- Shevlin, M., Murphy, S., Elklit, A., Murphy, J., & Hyland, P. (2018). Typologies of child sexual abuse: An analysis of multiple abuse acts among a large sample of Danish treatment-seeking survivors of childhood sexual abuse. *Psychological Trauma: Theory, Research, Practice, and Policy*, 10, 263–269.
- Snyder, H. N. (2000). *Sexual assault of young children as reported to law enforcement: Victim, incident, and offender characteristics*.
<https://bjs.ojp.gov/content/pub/pdf/saycrle.pdf>
- Walker-Descartes, I., Hopgood, G., Condado, L. V., & Legano, L. (2021). Sexual violence against children. *Pediatric Clinics*, 68(2), 427–436.
- World Health Organization. (2003). *Child sexual abuse. Guidelines for medicolegal care for victims of sexual violence*.
<https://whqlibdoc.who.int/publications/2004/924154628x.pdf>
- Zhu, Y., Xiao, C., & Zhu, B. (2024). Gender differences in child sexual abuse in China: Examining the mediation and moderation effects. *Children and Youth Services Review*.
<https://doi.org/10.1016/j.childyouth.2024.107580>

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