RQ3: Do service providers more appreciate that there may be cross-cultural differences in belief of the myth that most perpetrators of child sexual abuse are unknown to the victim?

**Background and rationale**

**Myth that most perpetrators are unknown**

There are several myths about child sexual abuse. In 1997, Collings published his now seminal scale identifying some of these myths (see Table 9). In RQ3, myth #3 is being solely addressed – that most children are sexually abused by someone unknown. The other myths are addressed in RQ4.

The research shows that most perpetrators of sexual abuse are known to the child. In 2006, it was found from the Australian Bureau of Statistics’ (ABS) Personal Safety Survey (PSS) that 8.6% of female victims and 18.3% of male victims were sexually assaulted by a stranger. Most perpetrators are fathers or step-fathers (16.5% for female victims, 5% for male victims), another relative such as siblings or cousins (35.1% for female victims, 16.4% for male victims), a family friend (16.5% for female victims, 15.6% for male victims), an acquaintance or neighbour (15.4% for female victims, 16.2% for male victims), and another known person (11% for female victims, 27.3% for male victims). Thus, over 90% of perpetrators are known to female victims and over 80% are known to male victims. The more recent wave of data collection and analysis in 2016 shows either stability or increases over time in findings: the proportion of women that experienced sexual abuse before the age of 15 by someone known to them\(^1\) was 91% (n = 907,300), and the proportion of men was 98% (n = 715,300). It is a myth that most perpetrators are strangers; most perpetrators are within the child’s extended family and community.

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\(^1\) E.g. step-parents, step-siblings, foster carer or other person associated with care placement, family friend, acquaintance/neighbour, doctor or other health professional, teacher, other school related staff, childcare worker, in-home care educator or carer, recreational leader, priest/minister/rabbi/nun/other person associated with place of worship, staff in a children’s home/orphanage, corrective services personnel, and other known person.
Table 9: Child Sexual Abuse Myths Scale (CSAMS; Collings, 1997)

<table>
<thead>
<tr>
<th></th>
<th>Statement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Sexual contact between an adult and a child which is wanted by the child and which is physically pleasurable for the child cannot really be described as abuse.</td>
</tr>
<tr>
<td>2.</td>
<td>Sexual contact with an adult can contribute favourably to a child’s subsequent psychosexual development.</td>
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<tr>
<td>3.</td>
<td>Most children are sexually abused by strangers or by someone who is not well known to the child.</td>
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<tr>
<td>4.</td>
<td>Children who act in a seductive manner must be seen as being at least partly to blame if an adult responds to them in a sexual way.</td>
</tr>
<tr>
<td>5.</td>
<td>Sexual contact between an adult and a child that does not involve force or coercion and that does not involve actual or attempted intercourse is unlikely to have serious consequences for the child.</td>
</tr>
<tr>
<td>6.</td>
<td>A woman who does not satisfy her partner sexually must bear some of the responsibility if her partner feels frustrated and turns to her children for sexual satisfaction.</td>
</tr>
<tr>
<td>7.</td>
<td>Child sexual abuse takes place mainly in poor, disorganised, unstable families.</td>
</tr>
<tr>
<td>8.</td>
<td>It is not sexual contact with adults that is harmful for children. What is really damaging for the child is the social stigma that develops after the “secret” is out.</td>
</tr>
<tr>
<td>9.</td>
<td>Many children have an unconscious wish to be sexually involved with the opposite sexed parent, which leads them to unconsciously behave in ways that make sexual abuse more likely.</td>
</tr>
<tr>
<td>10.</td>
<td>Adolescent girls who wear very revealing clothing are asking to be sexually abused.</td>
</tr>
<tr>
<td>11.</td>
<td>Children raised by gay or lesbian couples face a greater risk of being sexually abused than children raised by heterosexual couples.</td>
</tr>
<tr>
<td>12.</td>
<td>Boys are more likely than girls to enjoy sexual contact with adults and are therefore less likely to be emotionally traumatised by the experience.</td>
</tr>
<tr>
<td>13.</td>
<td>Child sexual abuse is caused by social problems such as unemployment, poverty, and alcohol abuse.</td>
</tr>
<tr>
<td>14.</td>
<td>Children who do not report ongoing sexual abuse must want the sexual contact to continue.</td>
</tr>
<tr>
<td>15.</td>
<td>Older children, who have a better understanding of sexual matters, have a responsibility to actively resist sexual advances made by adults.</td>
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</table>
Cross-cultural differences in belief of this myth

In collectivist cultures, where there is strong and normative shared reliance on extended family and community for child-rearing, parents/guardians may unknowingly expose their children to risk of sexual harm if they are left unsupervised with those who are also perpetrators (e.g. fathers, uncles, brothers, neighbours, club staff, etc.). If the extended family and community is particularly large, risk of harm would proportionately increase. Thus, the argument here is that there are not more CALD perpetrators of child sexual abuse, but rather more risk of harm if children are left with perpetrators under the false proviso that they are safe and this risk proportionately increases with the size of the community around that child. It is also the case that matters to do with sex including abuse are not openly discussed, thereby protecting virginal and filial conservativeness, however such prohibitive social norms can make it even more difficult to believe that harm has come from within a network that is stereotypically assumed to be protective; there is little opportunity to at least challenge the myth, and at best debunk it.

To help mitigate the possibility that there is an unknown increased risk of exposure to sexual harm in CALD communities, and therefore better protect their children, CALD carers require accurate knowledge about this myth. The awareness-raising program in Stage 2 of this project addresses this need. It will provide knowledge to CALD carers about child sexual abuse including myths to improve community-empowered prevention; in turn requiring a violation of social norms to not discuss sexual matters, even abusive ones.

However, the purpose of focusing on this myth in Stage 1 was to imbue service providers with an appreciation that the psychosocial experience of child sexual abuse is not universal: belief of the myth that most perpetrators are strangers may be higher in CALD communities because of the cultural collectivist norm valuing the extended family as primary providers of child safety. Indeed, Chen, Dunne, and Han (2007) found that in a sample of 652 parents of elementary school children in China, 56% held views consistent with ‘stranger danger’. Belief of this myth may then be maintained by prohibitive social norms discussing sexual matters. Together, these two socio-cultural trends may cause parents/guardians in CALD communities to be utterly shocked at and disbelieving of their child’s disclosure. (This has implications for whether the parent/guardian offers supportive and protective responses to disclosure and in turn the well-being of victims/survivors; addressed in RQs 4–8).

Limitations of research, risk of systematic state intervention, and ethical stances

Importantly, it may not be possible to determine whether there are cross-cultural differences in belief of this myth for the same reason that quantitative cross-cultural prevalence data is
challenging to interpret with confidence: in all cultural groups, there are many barriers to
disclosure and therefore much silence. The numbers on those who have told do not come
close to painting an accurate picture of the size of the problem, nor do they shed light on how
it is experienced by different victims/survivors and why. Qualitative research has some
capacity to address the latter issue, but it still requires overcoming all the barriers to
disclosure for victims/survivors to take part in such research, meaning that small sample sizes
are likely.

Moreover, the validity of qualitative evidence that the experience of child sexual abuse may
be worse in CALD communities (even with a sufficient sample size that permits thematic
saturation) is open to questioning and criticism from both CALD and non-CALD
communities. Some members from CALD communities may appreciate the increased
attention that research into the area offers so that their experiences are not continued to be
minimised, overlooked, or unnamed, however other CALD community members may take
great offence and perceive an attack on their ‘collectivist’ culture. Some members from non-
CALD communities may appreciate empirical evidence that validates ‘what they have
thought all along’, whereas others may take offence that their traumatic experiences are now
being minimised.

Formal politics also play a key role in being able to conduct such research, which risks racist
government intervention. In the aforementioned study conducted by Sawrikar (2011) in
NSW, it was found that child sexual abuse was substantiated in 11 of 20 (55%) Anglo case
files and 8 of 20 (40%) Aboriginal case files. The sample sizes per group were small but the
case files were randomly selected, thus providing nascent evidence that child sexual abuse in
NSW could be highest in Anglo communities. The Northern Territory (NT) is a different
socio-cultural context to NSW, and children at high risk do need statutory protection from
harm, but ‘the NT intervention’ also highlighted that white-majority governments perceive
risk in ways that racialise numbers.

As has been already argued, prevalence data should be treated with healthy caution and
scepticism. Numbers are often the first point of reference for determining the size of an issue,
but this project is driven by a value for child safety rather than an impetus for it. Having said
that, the impetus is still there. According to the World Health Organisation (WHO, 2002), the
international prevalence rate of child sexual abuse is 20% for females and 5–10% for males,
indicating that it not rare despite decreases in substantiated child sexual abuses over the
preceding twenty year period by an estimate of 47% (cited in Cromer & Goldsmith, 2010).
Thus, the safety of all children from sexual harm is seen as equal. Anglo children could
potentially be at greatest risk of child sexual abuse but this does not warrant greater
intervention. Certainly, such targeted intervention has not even been experienced to date
because of racialised cognitive biases that increase perceptions of risk for criminal behaviour
in the ‘out-group’ and decrease perceptions of risk in the ‘in-group’ (note: the relationship between racism and child sexual abuse has been discussed at length elsewhere; see Sawrikar, 2018b). Instead, it warrants understanding of the psychosocial experience of child sexual abuse in Anglo communities so that intervention is culturally tailored and therefore appropriate.

Finally, it is deeply unethical to conduct research aiming to simply explore and identify cross-cultural differences in the psychosocial experience of child sexual abuse without offering in return culturally appropriate support services. The literature review conducted in 2016 showed that cultural competency was likely to be low in service organisations and therefore developing this was a critical first step before pure qualitative research could be conducted.

For all these reasons, the project did not design a study aiming to find empirical evidence for the possibility that there are cross-cultural differences in belief of the myth that most perpetrators of child sexual abuse are unknown to the victim. Instead, it aimed to highlight to service providers that cultural groups may differ in their psychosocial experiences – it is not the same for everyone – and collectivism plays a central role in this difference.

If future research is able to establish that the psychosocial experience of child sexual abuse is worse in collectivist cultures, it will not be because there are more perpetrators and therefore a greater need for governments to intervene in CALD communities over other communities. Such a response would be racist. The worse experience will be because of the cultural need to protect family reputation in a highly hierarchical society, which in turn could increase CALD carers disbelieving their child’s disclosure, affirm the child’s fear of not being believed, increase self-blame, and intensify mental illnesses as a result of the trauma (addressed in more depth in RQ4). These all point to the importance of the ‘clinical treatment system’ being ready to receive victims/survivors on their way to becoming more mentally well and empowered, not of the government responding to perceptions of child safety being under greater threat in CALD communities.

As it is not yet possible to identify if there are cross-cultural differences in belief of this myth, while acknowledging that it may never be possible because of the immense gravity of barriers to disclosure, limitations of quantitative and qualitative research, racial cognitive biases, and potential for political power to be used irresponsibly and unethically, this project only aimed to examine movement on the number of service providers who thought that belief of this myth was ‘equally likely’ across cultures. That is, research exploration was on whether perceptions of universality had been successfully challenged. Movement across time in the number of service providers endorsing the other categories of ‘less likely’, ‘more likely’, ‘significantly less likely’, and ‘significantly more likely’ were only explored out of interest.
Measures

Program attendees were asked one question in relation to RQ3: B.8 – ‘One myth about child sexual abuse is that perpetrators are usually strangers. However, the research shows that most perpetrators are known to the victim (e.g. fathers, uncles, siblings, cousins, family friends, neighbours, teachers, priests, etc.). Compared to Western populations (e.g. Anglo Australians), do you think CALD communities are:’ Options varied from 1 = Significantly less likely to believe this myth, 2 = Less likely to believe this myth, 3 = Equally likely to believe this myth, 4 = More likely to believe this myth, and 5 = Significantly more likely to believe this myth.

Changes over time

Cross-cultural belief of myth that most perpetrators are unknown

By cultural background of service provider

As can be seen from Figure 5 (and Data Table G.3), the proportion of CALD service providers who thought that belief of the myth that most perpetrators are unknown is cross-culturally equivalent decreased from T1 (47%, n = 28) to T2 (27%, n = 6), as it did for Anglo service providers from T1 (68%, n = 36) to T2 (55%, n = 11). Also, the proportion of CALD service providers who thought that CALD communities are more or significantly more likely to believe the myth that most perpetrators are unknown increased from T1 (27 + 10 = 37%, total n = 22) to T2 (27 + 14 = 41%, total n = 9), as it did for Anglo service providers from T1 (13 + 0 = 13%, total n = 7) to T2 (15 + 5 = 20%, total n = 4).

However, the proportion of CALD service providers who thought that CALD communities are less or significantly less likely to believe the myth that most perpetrators are unknown also increased from T1 (3 + 12 = 15%, total n = 9) to T2 (18 + 14 = 32%, total n = 7), as it did for Anglo service providers from T1 (2 + 17 = 19%, total n = 10) to T2 (5 + 20 = 25%, total n = 5). This finding was not expected, and counter to predicted trends; further research is required.2

Altogether, the changes over time suggest that as a result of the program, service providers are more deeply engaging with cross-cultural differences in the psychosocial experience of child sexual abuse, and less likely to universalise it as if it were essentially the same for all victims/survivors. This is consistent with the intention of the program.

2 It may be similar to findings that show that workplace training on gender equality can sometimes increase gender stereotypes, counter to their intention.
Interestingly, the frequency data shows that before the program was delivered, less CALD than Anglo service providers thought that cross-cultural belief of this myth was equally likely, and more CALD than Anglo service providers thought that belief of this myth was more likely or significantly more likely in CALD communities. These findings suggest tacit knowledge among CALD service providers, fear among Anglo service providers in paying attention to culture and cultural differences (i.e. it is safe to appear ‘colour blind’), or both.

**Figure 5: Percentage distribution on cross-cultural belief of the myth that most perpetrators are unknown by cultural background of service provider (T1 and T2)**

It also highlights the power of examining frequency data, given that the means between CALD and Anglo service providers was significantly different at T1 ($t(101.5) = 2.5, p < 0.05$) but not by a great degree, and not significant at T2 ($t(36.9) = 0.28, p > 0.05$). That is, the descriptive data could mask their differences in cultural knowledge and how white practitioners strive to responsibly use their white privilege (see Table 10).
Table 10: Descriptive data on cross-cultural belief of the myth that most perpetrators are unknown by cultural background of service provider (T1 and T2)

<table>
<thead>
<tr>
<th>Cross-cultural belief of myth that most perpetrators are unknown (B.8)</th>
<th>T1</th>
<th>T2</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>M</td>
<td>SD</td>
</tr>
<tr>
<td>CALD</td>
<td>3.3</td>
<td>0.9</td>
</tr>
<tr>
<td>Anglo</td>
<td>2.9</td>
<td>0.6</td>
</tr>
<tr>
<td>Total</td>
<td>3.1</td>
<td>0.8</td>
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Relationship with cultural self-efficacy

Table 11 shows that cross-cultural belief of the myth that most perpetrators are unknown and cultural self-efficacy are not really related; all correlations with cultural knowledge, confidence, and sensitivity were not significant. However, observing trends over time are still informative.

Whereas cultural knowledge was more impactful for CALD service providers at T1 regarding their beliefs about cross-cultural prevalence of child sexual abuse and accuracy of prevalence data (RQ2), cultural knowledge was more impactful for Anglo (T1 r = 0.18, T2 r = 0.31) than CALD (T1 r = 0.00, T2 r = 0.17) service providers at both T1 and T2 regarding their understanding of cross-cultural belief of the myth that most perpetrators are unknown. This highlights that it is unknown what exactly constitutes as ‘general knowledge about CALD groups’ (B.1) for CALD and Anglo service providers, and therefore what exactly underlies these relationships.

The correlation between cross-cultural belief of the myth that most perpetrators are unknown and cultural confidence was low to moderate for CALD (T1 r = -0.11; T2 r = -0.05) and Anglo (T1 r = 0.10; T2 r = 0.35) service providers, but in opposing directions. This indicates that as belief of the myth that most perpetrators are unknown is seen as more likely in CALD communities, CALD service providers’ confidence to work with CALD victims/survivors of child sexual abuse slightly decreases, but Anglo service providers’ confidence slightly increases. This again seems to reflect a deviation from tacit cultural knowledge among CALD service providers, and a gain in explicit cultural knowledge among Anglo service providers.

Finally, the results show that cross-cultural belief of the myth that most perpetrators are unknown does not really affect cultural sensitivity/respect among Anglo service providers (T1 r = 0.07, T2 r = -0.08), but that at T1 as belief of the myth that most perpetrators are unknown is less likely in CALD communities increases, the less culturally sensitive/respectful CALD service providers are (r = -0.21). This is an important finding.
It suggests that CALD service providers tend to believe that CALD communities are more susceptible to this myth, because of the normative reliance on extended family and community in collectivist cultures (and therefore the cultural, not just personal, violation of beliefs about where children are safest), and because of social taboos that prohibit openly discussing any matters to do with sex including abuse (to protect female purity and family honour), but that such knowledge does not ‘excuse’ parents/guardians from lacking accurate knowledge about child sexual abuse, which in turn would allow them to take responsibility for protecting their children from risk of sexual harm. It is consistent with other reported findings that CALD service providers can sometimes be more judgmental of CALD client families because of their cultural knowledge.

However, this changed after the program with the correlation becoming positive ($r = 0.32$), suggestive of an empathic easing of expectations of CALD communities. Indeed, cultural norms that may not intend to minimise responsibility for the protection of children but still have that effect, need to be addressed but within a holistic understanding of the complex interplay between variables relating to culture, migration, and racism.

**Qualitative data**

Some participants offered important qualitative data regarding the myth that most perpetrators are unknown. For example, one said:

*I think that myth about stranger danger being more prevalent [in CALD communities] reflects a time issue. Thirty, forty, fifty years ago, in the Anglo communities, that was a myth, and it’s moved on because of community awareness and education (Q&A Forum_Syd).*

This comment highlights and fortifies the need for *persistent* awareness-raising campaigns. That is, a search for ‘quick wins’, such as in the form of cost-effectiveness analyses, work against rather than with the protective purpose such myths serve and why they are so difficult to challenge.

Additionally, other participants said:

*I believe culture has very strong protective elements to it (Q&A Forum_Bris).*

*I have confidence in CALD communities that they do protect their kids, they just won’t utter a word (Q&A Forum_Adel).*

*I was just curious if anything came up in the literature around the protective mechanisms of CALD communities around sexual abuse? So my particular community, it’s not spoken about but there are rules about who can sleep where, with whom, and why. So you knew, as a kid, what it was about, you just never uttered the*
words. I think that’s important for us to talk about. There are communities that do quite safe protective parenting and decision making around children, but because the word ‘child sexual abuse’ is not used, we think it’s [protective parenting] not there. It’s there, it’s just not there in a ‘in-your-face’ way (Q&A Forum_Syd).

A similar conversation played out a Q&A discussion:

What strategies are there to overcome those (barriers) and invite them into conversation, so that we can get knowledge of what those protective factors are, so that they can be accounted for in decision-making? (Q&A Forum_Adel).

To tell you the truth, the cases I’ve worked, where the family know me, I don’t think we get to the crux of what really happened until years later. So I’ve had a case since 2006 or 2007, and (only) through getting to know people, they’ll be like, “this and this happened, this is why we were all acting like this”. So it’s trust, it’s time. Trust, and community education as much as possible. Communities have champions, people who are real sticklers for child abuse, it’s really tapping into those community protections (Q&A Forum_Adel).

These comments importantly highlight that although social taboos prohibit open discussion of matters to do with sex including abuse, this does not mean that unspoken protection is not occurring. It also means that cross-cultural differences in the myth of stranger danger may not be as great as the social taboo might suggest.
Table 11: Correlations between cross-cultural belief of the myth that most perpetrators are unknown and cultural self-efficacy by cultural background of service provider (T1 and T2)

<table>
<thead>
<tr>
<th></th>
<th>T1</th>
<th>T2</th>
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<tbody>
<tr>
<td></td>
<td>Cultural knowledge</td>
<td>Cultural confidence</td>
</tr>
<tr>
<td><strong>CALD</strong>a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross-cultural belief of the myth that most perpetrators are unknown</td>
<td>0.01</td>
<td>-0.11</td>
</tr>
<tr>
<td><strong>Anglo</strong>b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross-cultural belief of the myth that most perpetrators are unknown</td>
<td>0.18</td>
<td>0.10</td>
</tr>
<tr>
<td><strong>Total</strong>c</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cross-cultural belief of the myth that most perpetrators are unknown</td>
<td>0.15</td>
<td>0.02</td>
</tr>
</tbody>
</table>

* p < 0.05, ** p < 0.01, *** p < 0.001; a – T1 n = 59, T2 n = 22; b – T1 50 < n < 53, T2 n = 20; c – T1 109 < n < 112, T2 n = 42.
Summary

- The purpose of RQ3 was to examine whether it effectively imbued service providers with an appreciation that the psychosocial experience of child sexual abuse is not universal; specifically, that belief of the myth that most perpetrators are strangers may be higher in CALD communities because of the collectivist norm valuing the extended family as primary providers of child safety, and maintained by prohibitive social norms discussing sexual matters, even abuse, to protect female and family honour. These two socio-cultural trends may cause parents/guardians in CALD communities to be utterly shocked at and disbelieving of their child’s disclosure, which then has implications for whether they offer supportive and protective responses to disclosure, and in turn the well-being of victims/survivors (addressed in RQs 4–8).

- It may not possible to find valid evidence for whether belief of the myth that most perpetrators are strangers is higher in CALD communities, because the many barriers to disclosure that lead to silence and under-reporting compromise capacity to obtain representative data and therefore verify such a trend with confidence. Rigorous qualitative data may be able to identify a link between belief of this myth, responses to disclosure, and mental health among CALD victims/survivors of child sexual abuse and their families and communities, but it risks vilifying collectivist cultures, minimising the trauma of non-CALD victims/survivors and their families and communities, and inviting racist government intervention.

- In this study, only change over time in the number of service providers who thought that belief of this myth was cross-culturally equal was examined. Supporting evidence was found for both CALD and Anglo service providers, demonstrating the effectiveness of the program in challenging assumptions of universality. However, service providers did not just move toward believing that this myth is more likely or significantly more likely in CALD communities; some also thought that it was less or significantly less at T2. This latter finding was not predicted, and is difficult to explain, because it is inconsistent with the intention of the program.

- Prior to program delivery, more CALD than Anglo service providers thought that belief of this myth was more likely or significantly more likely in CALD communities. This could reflect the tacit cultural knowledge of CALD service providers, and/or fear among Anglo service providers to appear ‘colour blind’ as a way of using white privilege responsibly.

- Correlations between cross-cultural equivalence in belief of this myth and cultural self-efficacy were low to moderate and not significant, indicating they are not really related. However, three observed trends among the correlations are potentially informative.
• The first is that cultural knowledge was more impactful for Anglo than CALD service providers regarding their cross-cultural equivalence in belief of the myth that most perpetrators are unknown, however it is unclear what specific cultural knowledge underlies this relationship.

• Secondly, as belief of the myth that most perpetrators are unknown is less likely in CALD communities increases, CALD service providers’ confidence to work with CALD victims/survivors of child sexual abuse slightly decreases, but Anglo service providers’ confidence slightly increases. This seems to reflect a deviation from tacit cultural knowledge among CALD service providers, and a gain in explicit cultural knowledge among Anglo service providers, as a result of the program.

• Finally, as belief of the myth that most perpetrators are unknown is more likely in CALD communities increases at T1, CALD service providers’ cultural sensitivity/respect decreases. This suggests that because of their tacit cultural knowledge, CALD service providers can sometimes be more judgmental of CALD client families. Specifically, cultural knowledge and understanding are not seen as valid reasons for lacking accurate knowledge about child sexual abuse, which in turn increases ability to take community responsibility for the protection of children from risk of sexual harm. By T2, the program seemed to have imbued CALD service providers with an easing of judgement within a holistic context that takes into account the complex interplay of culture, migration, and racism.

• Overall, there is a need for persistent national awareness-raising campaigns against the myth of stranger danger because this myth serves a protective function in all communities about perceptions of where children are and are not safe.

• Child protection from potential intra-familial perpetrators may also be occurring within CALD communities in an unspoken way, and further research on such protective parenting is required.