



Facilitators and Barriers to Child Sexual Abuse Interventions: A Qualitative Study of Interventions in Iran

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Abstract

Background: Child sexual abuse is a public health problem in most countries. Sensitization, research, and programs for identifying and preventing child sexual abuse have been carried out at the national level with increased political and social awareness and international commitments to decline its consequences.

Objectives: This study investigated the facilitators and barriers to community-based interventions for child sexual abuse.

Methods: Semi-structured interviews were conducted between September 2021 and March 2022 with 15 purposefully selected experts. The interviews were audio-recorded, transcribed, and analyzed using the content analysis method.

Results: Several barriers and facilitators affected child sexual abuse interventions. The barriers included: (1) sociocultural challenges; (2) legal challenges and gaps; and (3) managerial-structural challenges, while the facilitators were: (1) the improvement of the quality of provided services; and (2) facilitative role of the law.

Conclusions: Social interventions for child sexual abuse could consider some items to improve implementation, namely as follow: (1) the intersectional cooperation of organizations and beneficiaries to conduct child abuse interventions for children and their families at the local and national levels; (2) the implementation of empowerment activities for the return of children and parents to the community after child sexual abuse; and (3) the revision of the laws and establishment of more deterrent punishments.

Keywords: Child Abuse, Psychosocial Intervention, Sexual, Social Work

1. Background

Child sexual abuse includes a wide range of activities, such as genital caressing, exposing a child to adult sexual activity, engaging a child in prostitution or pornography, attempted sexual activity, or practical sexual activity (1). Sexually abused children have a wide range of aggressive behaviors depending on several factors, including age, age at the onset of sexual abuse, and the time of the last abuse (2). They usually suffer from psychiatric disorders, including depression, anxiety, low self-esteem, shortness of breath, sexual promiscuity, suicidal thoughts, and a greater risk of substance use (3-5).

The official data and statistics on the sexual abuse of children, especially in developing countries, are less than the actual amount for a variety of reasons, including sensitivity, shame, guilt, stigma, lack of awareness of the victim's rights, fear of not being proven, cultural issues, and nondisclosure of sexual harassment (6-8). Even the prevalence varies depending on the definition, study plan, sampling method, and other methodological factors, such as

the type of questionnaire and the process of interviewing and obtaining information (1, 9). However, the prevalence reported in Iranian studies varied widely, ranging from 1.5% to 32.5% (10-14). A meta-analysis study in Asia estimated the lifetime prevalence of child sexual abuse at 9.5% for females and 8% for males (15). Another meta-analysis study estimated the global prevalence of child sexual abuse at 127 per 1,000 individuals and the lifetime prevalence of child sexual abuse at 21.2% for females and 10.7% for males (16). Overall, previous studies indicated that females had reported child sexual abuse two to three times more than males (4, 9, 17). Moreover, although the prevalence varies from country to country, it is noteworthy and requires immediate intervention.

Various international studies have been conducted to prevent the first level of child abuse in preschool and elementary school children, including educational interventions, increasing targeted skills of saying no, shouting and disclosing child abuse through educational programs, playing doll roles, watching theaters and films by parents and professionals (e.g., teachers and the police), and

through knowledge and raising awareness of body ownership. These interventions are believed to increase children's knowledge and awareness to enable them to protect themselves against child abuse (18-22). To the best of our knowledge, no study has yet evaluated child sexual abuse interventions in Iran.

Considering the prevalence of child sexual abuse and recognizing the extent of this phenomenon through increased political and social awareness and to meet Iran's international obligations, sensitization, studies, and programs have nationally been conducted to identify and prevent child sexual abuse and reduce the consequences of this problem. One of these programs, developed by the Child and Adolescent Psychiatric Association and commissioned by the Welfare Organization, is an intervention program to prevent and provide urgent services in cases of child sexual abuse, which has been operational for several years. The program includes the establishment of child abuse reporting hotlines and the intervention of social emergency outreach teams, and its goal is to carry out scientific and appropriate interventions in a short time in case of child abuse. This program is being implemented in collaboration with various organizations and institutions, including the police, the judiciary, and the Ministry of Health (23). The program is the result of a review of the scientific and specialized literature on child abuse supportive interventions in developed countries, including the United States, Canada, Australia, India, and Belgium, and the World Health Organization. However, to the best of our knowledge, no study has yet been conducted to evaluate the elements of program implementation and the actual adequacy and content of such interventions.

2. Objectives

This qualitative study aimed to investigate the facilitators and barriers to community-based child sexual abuse intervention programs as third-level prevention through interviews with experts and intervention providers.

3. Methods

3.1. Participants

The study population consisted of all active and specialized individuals in the field of child sexual abuse in Tehran governmental and non-governmental centers, Iran, including social workers and psychologists with at least five years of work experience. The partakers' informed consent was obtained to participate in the study.

3.2. Data Collection

A total of 13 centers (seven governmental and six non-governmental) were involved in the study. All purposefully selected professionals accepted the request to participate in the research. Face-to-face semi-structured interviews were conducted by two members of the research team (M.D and A.MM). The interviews were carried out between September 2021 and March 2022 at the workplace of these experts.

Topic guides were used to guide the interviews, including open-ended questions regarding the facilitators and barriers encountered during the provision of services and interventions. Furthermore, corresponding prompts were added to questions to gain more clarity or detail regarding responses.

The questions in participants' topic guides were developed through discussion with the core research team (M.D, M.A, and A.MM). The topic guide was piloted on the members of the research team to check the relevance of the topics and legibility of questions, which were adapted accordingly.

Before the start of the interviews, the researchers explained the purpose of the study and encouraged the participants to share both facilitators and barriers encountered during the provision of services and interventions. The participants were required to complete a form to ascertain demographic details.

All the interviews were audio-recorded and transcribed verbatim by an external transcription company. The transcripts were checked with audio recordings for accuracy by the researchers. The researchers anonymized the transcripts by removing all identifiable content. Semi-structured interviews with qualified experts were conducted until data saturation. After holding interviews with 15 experts, the data reached saturation.

3.3. Data Analysis

The anonymized and corrected transcripts were stored and analyzed on MAXQDA software (version 2020). Conventional content analysis method was used to analyze the qualitative data. This approach has three stages: (1) Preparation, (2) organization, and (3) reporting (24). The analysis was conducted by researchers with a background in qualitative research, social work, psychology, and child abuse research. In the initial analysis, the researchers familiarized themselves with the data by reading the transcripts and then coded the data descriptively to represent emerging topics. The codes were developed through discussions with the research team. This process was iterative, and the researchers continuously revised and adapted the codes until they felt that the codes represented the data.

Once coded, the data were then analyzed. Themes were identified inductively by searching for commonalities, discordant views, and underlying meanings behind the derived codes. The themes were derived iteratively from discussions with the research team (25). This stage was carried out simultaneously with data collection. Therefore, broader categories were formed, and the main categories appeared. The acceptance criteria, equivalent to content validity, were achieved using various strategies, such as allocation of sufficient time, communication and in-depth interviews with participants, clarification of the study objectives, and return of the codes to participants to check their accuracy and check by observers.

3.4. Study Integrity

It was ensured that various steps were taken to maximize the integrity of the study findings. Two researchers (M.D and A.MM) were involved in data collection, allowing them to engage and observe the participants and their responses. They were also involved in the analysis process, and their familiarity with the data allowed the team to interpret the data in the context in which they were collected. The researchers also discussed the coding strategy and development of themes. As discussed previously, the researchers had a multidisciplinary background with specialisms in different subject areas, which allowed the researchers to consider the interpretation of the data in various ways.

4. Results

This qualitative study was conducted with the participation of 15 specialists and staff (12 women and three men with an average age of 42.13 years and an average work experience of 15.86 years) working in the Welfare Organization and service providers for sexually abused children. The results were categorized into two themes, including five main categories and 24 subcategories. The findings showed that the facilitators were the improved quality of provided facilities and services and the facilitative role of the law, while sociocultural challenges, legal challenges and gaps, and managerial-structural challenges were the barriers to interventions and social work services offered to sexually harassed children (Box 1).

4.1. Barriers

4.1.1. Sociocultural Challenges

The first obstacle to providing services to children who are sexually abused is cultural and social issues that hinder the child from taking appropriate action. These challenges are rooted in how society views and thinks about child sexual abuse.

4.1.1.1. Nondisclosure of Sexual Harassment

Hiding child sexual abuse is rooted in social issues, such as the taboo and the child's and family's fear of scandal and social exclusion, which make families reluctant to pursue and complain about the abuser, and even the medical and judicial systems prefer to conceal the issue. In addition, the child's fear of the abuser and their threats and the fear of repeated harassment are the main obstacles to not disclosing sexual harassment.

"Sexual harassment is undoubtedly taboo in Iranian society, which means that Iranian society tries not to address this phenomenon, to hide it, and to deny it" (interviewee 15).

"We asked her to go to forensic medicine, enabling us to prove it later and get help from a lawyer. They usually say no, because they said that, for example, my father would kill me, so they are unwilling to cooperate" (interviewee 3).

4.1.1.2. Child and Family Ignorance

Children's and parents' lack of knowledge and awareness about instances of sexual abuse in some cases makes them consider some behaviors of sexual abuse, such as caressing, as different behaviors, such as love and affection, and not react to them. In addition, parents are not familiar with the necessary measures after the abuse, and they have different opinion about the way of exposure to abuser. Additionally, in some cases, parents arbitrarily seek to solve the problems.

"Part of the challenge is that the child, due to his/her age, may not even notice that something is being abused and that the abuse is noticed and reported by another family member; the child does not pay much attention to this issue" (interviewee 1).

4.1.1.3. Lack of Family Cooperation

One of the main problems with social work interventions for children victims of sexual harassment is the non-cooperation of families. Part of this is due to the same cultural issues and to preserve the reputation or prevent disgrace, which causes incomplete information to social workers, resulting in a lack of follow-up and treatment of the child. This lack of cooperation spreads to the point that families refuse to report child abuse due to the fear of being accused or separating the child from the family; they do not participate in empowering the child after the abuse and face challenges and conflicts with social emergency personnel and social workers.

"They are usually not willing to help anymore; the child has no way to go to the legal authorities at all, and the mother usually does not cooperate" (interviewee 4).

"Because many people are afraid of this, they resist and avoid receiving help because their qualifications have been

Box 1. Facilitators and Barriers to Social Interventions and Services

Themes, Categories and Subcategories
Barriers
Sociocultural challenges
Nondisclosure of sexual harassment
Child and family ignorance
Lack of cooperation in the family
Concealment of harassment to maintain social prestige
Rejection and child sacrifice
Family challenges
Legal challenges and gaps
Concealment of child abuse by close relatives
Difficulty in proving harassment
Barriers and limitations of service providers
Problems and limitations related to the laws
Judge (court)-oriented decisions
Managerial-structural challenges
Low skills of service providers
Poor community familiarity with social emergencies and social work services
Poor codified intersectoral cooperation
Absence of a comprehensive program to deal with sexual harassment
Poor infrastructure and shortage of facilities
Shortage of workforce
Low security of service providers
Unbalanced expansion of service programs
Facilitators
Improvement of quality of provided services
The relative improvement of quality of the service delivery system
Sharing information on available services
Improvement of quality of intersectoral cooperation
Facilitative role of law
Support and cooperation of the judicial and law enforcement systems
Approval of protective laws

questioned, and the child may now be taken away from them or accused" (interviewee 5).

"His dad called again with an aggressive attitude, leave us alone" (interviewee 7).

4.1.1.4. Concealing Harassment to Maintain Social Prestige

It has already been pointed out that sexual abuse is not disclosed due to taboo and parents' fear of disgrace. This concealment of truth is pronounced in smaller and more traditional settings due to the dominance of cultural norms and the strength of customary issues and ethnic prejudices. Another reason for this concealment is the parents' disbelief in the truth of the child's statements, which causes the issue of abuse not to be taken seriously and a kind of cover to be put on it. In general, the family tends to hide sexual harassment to avoid more social judgments.

"Many times, I hear this, I say, well, we have to do something, she says no, you do not say anything, we will solve it

somehow, i.e., it is not so serious yet" (interviewee 2).

"A man from those parents called me and asked for help, but wherever I went, he would stand in front of me and tell me no, this is not it, this is not this, this is being disgraced" (interviewee 3).

4.1.1.5. Rejection and Child Sacrifice

One of the social challenges to child sexual abuse is the child becoming a victim and being rejected by society. This social problem leads to continued harassment by the abuser and the child's helplessness and inability to deal with it.

"The view of the people of the society, based on the tradition and culture of the Iranians, is not good toward a child who has been sexually abused" (interviewee 11).

"Some parents blame the child and say that it is your fault and you have no right to say this because you are guilty, you should not have gone, you should not have done

this, you should not have befriended him, why you went there ... that is, in the end, the feeling of guilt returns to the child" (interviewee 1).

4.1.1.6. Family Challenges

New forms of family life, such as staying children with relatives, sometimes cause sexual abuse. Within the family, family disputes and challenges between parents cause them to ignore that child sexual abuse may occur. Then, the relationships between family members become more strained, and domestic violence increases.

"Due to the trust that families have in wife's friends and the mother has in her relatives; they come, all of them are called uncles ... they stay home alone with a child, and something it may happen" (interviewee 9).

4.1.2. Legal Challenges and Gaps

The second major category of barriers to providing services to victims of sexual abuse is the legal problems and challenges associated with the crime of child abuse.

4.1.2.1. Concealing Child Abuse by Close Relatives

The most legal issue is the concealment of child abuse by close relatives. In general, in the case of sexual abuse of children by the family, the law takes the side of the abuser. Because the father is the breadwinner and to avoid the loss of the source of income, the law tolerates the abuser father, and even it is more difficult to prove the abuse by incest. This cultural view based on maintaining the sacred status of the family also leads to the acquittal of the incest member and the child's return to the family.

"For example, proving that this child was abused by her father or a stranger, this is another story; the father says very easily, no, she was out with her boyfriend; it happened like this; sometimes even a pregnancy may take place, and that is another story" (interviewee 4).

4.1.2.2. Difficulty in Proving Harassment

Another legal challenge to child sexual abuse is the complex and tortuous path of proving abuse. Basically, the law pays attention to the physical and external evidence and signs, and in cases where the physical evidence of harassment disappears after a few days, the issue will not be considered and approved by forensic medicine. Given this legal gap and the need for a witness to prove it, the issue of child abuse is difficult to prove.

"Our volunteer lawyers often say not to legalize and not to complain because it does not go anywhere; it is very unfortunate" (interviewee 3).

"Because there is no evidence and in order to give a verdict by a judge, he cites the appearance of forensic

medicine, there is no way we can prove it, and the court simply does not accept it" (interviewee 11).

4.1.2.3. Barriers and Challenges to Service Providers

Another part of the problems related to the law refers to the obstacles and challenges that the law states for the provision of social work services and limits the scope of authority and actions of social workers, including the lack of judicial power of the social emergency, the lack of cooperation of judicial officers, and even the police station for cooperation and intervention. Because any action requires a court verdict, social workers are not allowed to enter the home and examine the abused child in numerous cases. In addition, the presence of social workers in court hearings has not yet been formalized, and emergency forces, as judicial officers, have no practical power or authority.

"The first challenge is how do we enter? Because many people do not allow our colleagues to enter at all, and it requires us to go and get a verdict; now, until the verdict is issued, the family threatens the child or takes the child out of reach; this is one of the challenges. There is not much cooperation from judicial officers; getting help from them is difficult, and they do not have good cooperation" (interviewee 8).

4.1.2.4. Problems and Limitations Related to the Laws

Many laws in this area are not deterrents and do not apply proportionately to the committed crime. The lack of a legal guarantee for the child's protection leads to the child's release in the court process and even imprisonment. These problems are exacerbated by shadowy laws and ignoring sexual violence at the governmental level.

"Laws have been suspended for many years; for several years, they have been passed between the government, the judiciary, and the parliament. There are still punishments that cannot be deterrents at all" (interviewee 13).

4.1.2.5. Judge (Court)-oriented Decisions

It seems that the judge has a top-down and tasteful view toward the whole phenomenon of social work and services for child victims of sexual harassment, which complicates and challenges the case file process. Another instance of relying on the opinion of the judge and court is the absence or opposition of the judge to the presence of a social worker and a psychologist to help expedite the case.

"In many places, you see that the judge makes a decision that everyone is confused about, and it has been reported many times that he did not deliver the child home; the judge says I am responsible for the discretion and not you ... The recognition of judges of the emergency itself, legal capacity, or their top-down view toward emergency are other problems" (interviewee 14).

4.1.3. Managerial-Structural Challenges

Another issue related to barriers to providing services to child victims of sexual harassment is the challenge at the managerial and structural levels of the Welfare Organization and the institutions in charge of child services. In other words, in the body of the Welfare Organization, some executive and major issues prevent the proper provision of services.

4.1.3.1. Low Skills of Service Providers

The first structural challenge refers to the staff and service providers' lack of appropriate capabilities and skills. Numerous staff members are unfamiliar with their rights and responsibilities and how to provide services to clients, which sometimes hurts them instead of helping them, leading to the child's distrust of experts and social workers. The lack of skills is due to both inadequate training and inconsistency of education with duties and responsibilities. In general, inefficient and unskilled forces divert the flow of services to victims of sexual harassment.

"Due to the lack of social work experts, graduates of scientific and applied centers (who lack the necessary skills) and even sociologists work as social workers, which in practice challenges the social emergency" (interviewee 12).

"The lack of social workers' knowledge of providing services to victims and their caregivers is a challenge. Many social workers have only general information about the instances of sexual harassment and how to provide services to victims and their caregivers" (interviewee 15).

4.1.3.2. Poor Community Familiarity with Social Emergencies and Social Work Services

Other challenges at macro and managerial levels are the lack of familiarity or information of some individuals about the existence of social emergencies and services for children who are sex victims. Although the situation is now better than before, there is still a lack of sharing information in the media to introduce the 123 system and social emergency. This causes services to be unknown at the community level and numerous needy individuals to be deprived of them.

"The awareness of people is important when you have such a ground, but you do not allow the TV to come and advertise it due to the cultural discussion, which is ridiculous... Something that they themselves say is that children get rude and think that if anyone shouted at them, they should call 123; when there is such a cultural view, this facility would not be promoted" (interviewee 6).

4.1.3.3. Poor Intersectoral Cooperation

Although naturally helpful and fruitful, the multi-institutional nature of services and interventions does not

bring proper results for reasons such as poor communication, coordination, and cooperation of responsible organizations. The lack of coordination between sectors results in weak intersectoral cooperation to introduce and refer abused children and misunderstandings and challenges between the responsible organizations. The more distant result is the failure of responsible organizations to provide services to children victims of sexual harassment.

"The Welfare Organization is like an island that has not been able to interact with the structures it needs. The Ministry of Health is working on child abuse for itself and has a very good context, but they are not coordinated" (interviewee 6).

"The problem is coordination; when an organization cannot create coordination within itself, naturally coordination outside the organization becomes difficult" (interviewee 14).

4.1.3.4. Absence of a Comprehensive Program to Deal with Sexual Harassment

Although the laws on child abuse have been enacted to deal with related cases and provide services, there is no comprehensive program to address child sexual harassment. In the first step, there is no training for families to follow up and respond to abuse, and specialized protocols for working with children either do not exist or are incomplete. One of the basic needs in the context of child abuse is screening and trying to find cases of child abuse that do not exist in the Welfare Organization's programs. In addition, there is no equal view toward all children, and the process of service provision and the duties of staff and social workers have not been well defined.

"One of our problems is that no one's job is clear at all, not the work of the relief organization, nor social workers, physicians, nurses, and midwives who may encounter such evidence in the clinic" (interviewee 13).

"The Welfare Organization drafted child abuse protocol, but you cannot bring all children forward with one protocol due to their differences" (interviewee 10).

4.1.3.5. Poor Infrastructure and Shortage of Facilities

Another major structural challenge that hinders the provision of services and interventions regarding child sexual abuse is the lack of infrastructure and facilities. Overall, mobile services are challenging throughout the country, and service and care environments for these children are small and unsafe; therefore, the capacity to receive abused children is low.

"I called 123 and said that I have such a case; the man said that they would come in two hours at 7 o'clock; I saw that they did not come; I called again, and they said sorry,

we do not have a car, we have two suicides, and my colleagues have gone until it ends at 8 o'clock" (interviewee 3).

"The facilities are limited, that is, in terms of budget and in terms of the facilities that we can give to these children, our hands are somehow tied ... and I say if there are not donors or free help of the centers, maybe it would not be possible to do anything for the children" (interviewee 11).

4.1.3.6. Shortage of Workforce

A shortage of workforce, especially when there are multiple cases, delays the deployment and, in general, reduces individuals' access to emergency services.

"Sometimes all the experts are talking, no line is open, and some calls are missed because there is insufficient staff. Both cases of child sexual abuse and other cases make experts exhausted, and what is really challenging is a shortage of staff" (interviewee 8).

4.1.3.7. Low Security of Service Providers

In addition to being often stressed and injured due to a workforce shortage, service provider personnel are also exposed to occupational and life-threatening injuries and threats. These issues range from the lack of personal protective equipment for emergency personnel and the threat and physical injury they receive to job insecurity, lack of supplementary insurance, pressure and psychological and economic harms, lack of hard work wage, ambiguous employment status, high job burnout, and low pay.

"There are a lot of contract staff members, and salaries are low. Of 4300 emergency experts, about 4000 individuals are contract staff. Emergency colleagues do not have personal protective equipment, such as pepper sprays and shockers, and sometimes they are attacked and injured" (interviewee 2).

4.1.3.8. Unbalanced Expansion of Service Programs

Another problem with service provision for child victims of sexual harassment is the underdevelopment of programs and services for all areas, cities, and villages, which is partly due to the program's newness.

"The lack of a comprehensive approach in the organization is one of the main challenges of providing services for children victims of sexual harassment" (interviewee 12).

"The program has not been developed for the community's needs, so we cannot claim to have a very high penetration rate in these services. However, the social emergency program is settled in cities with more than 50,000 individuals, but places in which less than 50,000 individuals live or villages have not yet been covered" (interviewee 4).

4.2. Facilitators

4.2.1. Improvement of Quality of Provided Services

Although barriers to services and interventions in child abuse are widespread and have been addressed, progress has been made; there are facilitators in this area, and services have improved to some extent.

4.2.1.1. Relative Improvement of Quality of the Service Delivery System

The proper development and design of social emergency regulations and instructions, the employment of specialized and experienced experts, the existence of a free 24-hour communication line 123, and the existence of care centers are among the instances of improving the service provision system.

"The welfare has built its infrastructure, social emergency; many countries have the same pattern ... The instructions are wonderful compared to the instructions of other countries; it has seen the types of environments, special areas, and mobile services. Also, the space of the building has been built so that a series of emergency interventions, including counseling, can be offered there" (interviewee 6).

4.2.1.2. Information Sharing on Available Services

In line with the previous findings about the lack of sharing information and the weakness of society in recognizing social emergency services and social work, the positive development and facilitator factor of services to children who are victims of sexual harassment is raising awareness of the availability and accessibility of the services and organizations. Recognizing and sharing information about social emergencies are carried out by responsible organizations; cyberspace and mass media both provide the ground for abused children to use services and make society sensitive to child abuse.

"Over time, this phenomenon had become known because in previous years, when we referred, the media did not know very well about this issue; many centers and even hospitals and sometimes courts did not even know what a social emergency was, but in recent years, this awareness has increased, emergency use has become more, and it is more available" (interviewee 1).

"Cyberspace has also been able to help a lot during these years with all its weaknesses, i.e., children have become more informed. These were the things that were not planned and happened out of compulsion ... Satellite itself or TV programs ... Satellite caused a series of awareness" (interviewee 3).

4.2.1.3. Improvement of Quality of Intersectoral Cooperation

The last subcategory of service facilitators and social work interventions refers to the development of intersectoral cooperation. Currently, non-governmental organizations and donors work with the Welfare Organization in various areas, from identifying to empowering children and their families.

“From identification to empowerment, the responsibility is with the Welfare Organization with the help of all related organizations. The subject of article 5 of the civil service, article 29 of the Sixth Plan Law, that is, everyone, no one can say I am not responsible anymore, I am not governmental, I am a local institution, I am a military person, and they all have responsibilities here according to the law” (interviewee 14).

“According to the new law of the central organizations in identifying, if they know and do not say, they are considered deputy criminals, it can be considered a crime for the police not to identify them. The same thing goes for the school teacher. Of course, this section has been highlighted in the regulations and laws. In general, the new law has made our hands more open in implementing interventions and providing services” (interviewee 10).

4.2.2. Facilitative Role of Law

4.2.2.1. Support and Cooperation of the Judicial and Law Enforcement Systems

It has already been mentioned that challenges and judge-centered decisions prevent providing services to children victims of sexual harassment. In this regard, changes have been made, and the support and cooperation of the judicial and police systems have developed. The other law-based developments which greatly facilitate the process of service delivery to abused children include the citation of the report of a social worker, improvement of the judge’s relationship with the emergency and welfare, the presence of a legal expert to obtain a court verdict, the intervention of social workers without a court verdict, obtaining telephone permission from the judge, selection of a lawyer for the family to follow up, and local investigations with the presence of the police.

“Usually, social emergency centers have a legal expert who has more authority over the work, and because she/he has many contacts with the court, she/he has more power than a social work expert or psychologist who can influence the investigator or judge. For this reason, our cases’ files are usually taken to court by a legal expert. On the other hand, our kind of report can greatly impact the verdict we can get from the investigator” (interviewee 1).

“It seems that the judge’s view, like the public view, is becoming more open to making decisions and many other things. Apart from the physical evidence, it seems that

from the first days I worked in the Welfare Organization, I see in the social emergency that now the situation is much better” (interviewee 11).

4.2.2.2. Approval of Protective Laws

Although the approval of the Protection of Children and Adolescents law in 2020, the only law that specifically deals with child abuse in Iran, has shortcomings, it has improved and facilitated the provision of services in the field of child sexual abuse.

“According to the new law of the central organizations in identifying, if they know and do not say, they are considered deputy criminals; it can be considered a crime for the police not to identify them. The same thing goes for the school teacher. Of course, this section has been highlighted in the regulations and laws. In general, the new law has made our hands more open in implementing interventions and providing services” (interviewee 10).

5. Discussion

The present study aimed to investigate the facilitators and barriers to child sexual abuse interventions in Iran. Abused children need special assistance and measures that intervention programs and organized protocols make possible; however, recognizing facilitators and barriers to these protocols will help strengthen them. The findings indicated sociocultural challenges in the disclosure of child sexual abuse. Some studies also have shown that fear of disrespect, shame, guilt and stigma, punishment and blame by the family, and the gap between parents and children have led to fewer reports of child sexual abuse (26-28).

The findings have highlighted the importance of the taboo of child sexual abuse and keeping child sexual abuse secret among children and their families (8, 29). Numerous children do not report sexual abuse for a variety of reasons, including guilt and fear (30), and some families do not even disclose the issue, although they are aware of their child being sexually abused for reasons such as fear of disgrace or inability to prove it (31).

The above-mentioned fears and concerns highlight the need for services by professionals and related organizations, as they are responsible for dealing with child abuse and child and parent support activities. In addition to social work services, professional interventions are needed to empower children and their parents before child sexual abuse occurs since a review of studies has shown that these interventions play a vital role in disclosing sexual harassment and reducing the prevalence of child sexual abuse and its consequences (18-22, 32).

Another challenge or deterrent identified in the present study is the legal gaps associated with child sexual

abuse, which make it challenging to prove child abuse, especially when committed by a close relative. In some cases, it has been reported that the abuser father has been acquitted in order to maintain the family income. Regarding legal gaps, the findings showed that in many cases, social workers are not allowed to enter the home and examine the abused child, given that any action requires a court order. In addition, the presence of social workers in court hearings has not yet been formalized, and emergency forces, as judicial officers, have no practical power or authority.

The obtained results indicated that numerous laws in this context are not deterrents and do not apply in proportion to the committed crime. The lack of a legal guarantee for the child's protection leads to the child's release in the court process and even his/her imprisonment. These problems are exacerbated by shadowy laws and neglect of sexual violence at the governmental level. Finally, the judge makes personal decisions in cases of law violations.

The research has suggested a lack of specialized child abuse courts, and judges use the minimum punishment for the perpetrators due to a lack of sufficient awareness. One reason is that judges are influenced by prevailing cultural and religious attitudes and contexts. That is why advocates for children's rights believe that the judge should apply the sentences in a way that protects children from any child sexual abuse (33-35).

The third obstacle to child abuse interventions is managerial and structural challenges. It should be noted that a shortage of staff and insufficient skills of child abuse intervention staff due to unrelated training and education has led to deviation in serving victims of sexual abuse. The same workforce is often under pressure and occupational and life-threatening harms and threats. Additionally, the community is unfamiliar with social emergencies and social work services.

A shortage of infrastructure and facilities for abused children, multi-institutional provision of services and interventions due to poor communication and cooperation of responsible organizations, and their island-like working cause the lack of intersectoral coordination. The absence of comprehensive and appropriate programs and protocols to deal with the issue has prevented the proper screening of child abuse and, ultimately, no appropriate intervention to be conducted. A review of the studies indicates that interventions and intersectoral collaborations of different organizations effectively reduce child sexual abuse according to different points of view (36).

The last finding of the present study as a facilitator of services is the formation of social emergencies in recent years and the provision of free, round-the-clock, and accessible services to abused children, which, along with

law enforcement and judicial institutions, provide better and faster services. In addition to these cases, efforts have been made to identify and inform the existence of social emergencies by responsible organizations, cyberspace, and mass media, which provide the ground for abused children to use services and make society sensitive to child abuse. Finally, non-governmental organizations and donors cooperate with the Welfare Organization in various fields.

The awareness of children and their families about sexual harassment is essential through the media and schools and at the national level; accordingly, it can be prevented before the problem occurs; even after the problem occurs, clear and comprehensive laws help the victim to feel trusted and supported, and the perpetrator feels threatened and knows that if done, he will be exposed to unforgivable punishment. Studies have suggested that booklets, job guidelines, and accurate information can reduce child sexual abuse (37).

5.1. Application of Results

The present study can serve as a guide for modifying existing protocols and interventions and staff of social work services. It can be mentioned that the irrational behaviors of children and their parents might be rooted in the existing norms of society. With the assistance of informal institutions, social planning and organization can be an important source for overcoming child sexual abuse. Trust should be built between social services staff, the public, and the community. Otherwise, local and individual interventions become temporarily effective.

5.2. Limitations

One of the limitations of this study is that the results cannot be generalized. Furthermore, some experts did not enter the study due to the limited sample sizes of qualitative studies and coronavirus disease 2019 restrictions.

5.3. Conclusions

It is necessary to conduct child abuse interventions at the levels of children and their families and neighborhoods and the national level with the cooperation of organizations and beneficiaries to achieve desirable and effective results. After the occurrence of child sexual harassment, the empowerment activities of the child and parents and their return to the community should be carried out with the help of relevant institutions. The laws need to be reviewed, and more deterrent punishments should be enacted.

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Footnotes

Authors' Contribution: Study concept and design, M.D. and M.A.; Acquisition of data, M.D. and A.MM.; Analysis and interpretation of data, M.D., M.A., and A.MM.; Drafting of the manuscript, M.D., M.A., L.OH and A.MM.; Critical revision of the manuscript for important intellectual content, M.D., M.A., L.OH and A.MM.; Statistical analysis, M.D. and M.A.; Administrative, technical, and material support, M.D.; Study supervision, M.A.

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