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Child sexual abuse in Japan: A systematic review and future directions

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ABSTRACT

Introduction: Estimating the national prevalence of child sexual abuse (CSA) and its association with health and developmental outcomes is the first step in developing prevention strategies. While such data are available from many countries, less is known about the epidemiology of CSA in Japan.

Methods: For this systematic review, we searched English databases: Embase, Ovid MED-LINE(R) In-Process & Other Non-Indexed Citations, Ovid MEDLINE(R) Daily and Ovid MEDLINE(R), Ovid OLDMEDLINE(R), PsycINFO, and Japanese databases: Cinii, J-Stage, Children's Rainbow Center Japan, Japan Child and Family Research Institute, Japanese Journal of Child Abuse and Neglect to identify articles published before July 2015 examining the lifetime prevalence of CSA in Japan using non-clinical samples. Data were extracted from published reports.

Results: We initially identified 606 citations and after abstract review, retrieved 120 publications. Six studies that met the selection criteria and additional two relevant studies were reviewed. The range of contact CSA for females was 10.4%–60.7%, and the prevalence of this type of CSA for males was 4.1%. The range of penetrative CSA for females was 1.3%–8.3% and that for males was 0.5%–1.3%. A number of methodological issues were identified, including a lack of validated measures of CSA, and low response rates.

Conclusion: In contrast to a lower prevalence of penetrative CSA, the prevalence of contact CSA among Japanese females may be comparable or higher in relation to international estimates. Future research on children's perceptions of and exposure to sexual abuse, crime and exploitation in Japan is discussed.

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1. Introduction

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Child sexual abuse (CSA) is a global public health problem and violation of human rights (Office of the United Nations High Commissioner for Human Rights, 1989; World Health Organization, 1946) that results in devastating health, developmental, and economic consequences for victims and society (Gilbert, Widom et al., 2009). CSA is defined by the WHO as "the involvement of a child in sexual activity 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 laws or social taboos of society. Children can be sexually abused by both adults and other children who are – by virtue of their age or stage of development – in a position of responsibility, trust or power over the victim" (World Health Organization, 2006). Despite the mounting evidence of adverse short-term and long-term consequences for victims of CSA, only 37% of 133 countries (0% in South-East Asia Region) have implemented a large scale national strategy to prevent CSA (World Health Organization, 2014).

Collecting nationally representative data about the prevalence of CSA is the first step to understanding the nature and magnitude of this problem in developing strategies for prevention, monitoring progress and evaluating the effectiveness of implemented strategies overtime (World Health Organization, 2006). CSA, as well as other subtypes of child maltreatment, including physical abuse, emotional/psychological abuse, and neglect is rarely brought to the attention of child protection authorities at the time of the incident, resulting in severe underestimates according to official data (Gilbert, Kemp et al., 2009). In addition to official reports, population-based self-report survey data is an essential component of obtaining a more comprehensive picture of this problem as well as the associated impairment. Both types of information are important in determining evidence-based approaches to prevention.

An international meta-analysis of 217 publications with 331 independent samples estimated the lifetime prevalence of contact CSA based on self-report as 21.2% and 10.7% for females and males respectively; the estimates for penetrative CSA were 15.1% and 6.9% for females and males respectively (StoltenborghStoletenborgh, van Ijzendoorn, Euser, & Bakermans-Kranenburg, 2011). In this meta-analysis, CSA estimates based on studies conducted in Asia were among the lowest combining all types of CSA for both genders. Another meta-analysis of 27 studies conducted in China, Hong Kong, and Taiwan found the lifetime prevalence of contact CSA was 9.5% for females and 8.0% for males; self-reports of penetrative CSA were 1% for females and 0.9% for males (Ji, Finkelhor, & Dunne, 2013). These reviews showed a higher prevalence of CSA for females than males, which is consistent with the global literature; of particular note, the estimates of contact and penetrative CSA tended to be lower in Asian countries for both males and females compared with global averages.

Several authors have commented that reduced disclosure of CSA in Asian countries may result from the social dimension of a collective worldview rather than an emphasis on individualism, which exists in many western countries (Back et al., 2003; Ji et al., 2013; Kim & Kim, 2005). Previous meta-analytic studies of CSA prevalence have not included data from Japan; this may be due to a lack of adequate data, or the search being limited to English language studies.

In Japan's Child Abuse Prevention Act, the Ministry of Health, Labour and Welfare in Japan (n.d.) defines CSA as "sexual acts against children, showing sexual acts, showing genitals and touching their genitals, using children as an object of pornography" by "parents or guardians." Following an amendment of the Child Abuse Prevention Act in 2003, definitions of child abuse, including CSA, were broadened to include abuse committed by individuals other than parents or guardians who live with the child¹; however, this is classified as neglect, instead of CSA – i.e., the failure of parents/guardian to protect children from sexual abuse perpetrators, resulting in an underestimate of the reported CSA cases that are incestuous in nature.

In a review of Japanese publications on the topic of CSA up until 2011, Kanto (2014) noted a rapid increase in the number of publications after the year 2000 when the Child Abuse Prevention Act was implemented in Japan. This paralleled the increased numbers of reported child maltreatment cases in Japan over the past decade until 2013, although CSA remains the smallest proportion of all types which is decreasing (3.2% in 2007–2.1% in 2013) (Cabinet Office, Government of Japan, 2015).² However, a paucity of studies on the epidemiology of CSA was identified in this review; most studies were conducted within clinical settings, and 99% of publications included only female samples (Kanto, 2014). While Japan's collectivist culture may reduce the disclosure of CSA victimizations, other social factors such as inequalities and power imbalances across gender and age may influence the occurrence and disclosure of CSA. Therefore, a national prevalence study is urgently needed in Japan to identify and address issues specific to its social and cultural context. Currently this information is lacking. Our aim is to systematically review published non-clinical studies of CSA prevalence in Japan using English and Japanese databases and to discuss implications for research, practice, and policy.

2. Methods

This systematic review was guided by Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) criteria (Moher, Liberati, Tetzlaff, & Altman, 2009).

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¹ This includes boyfriend/girlfriend of parent or guardian, relatives, acquaintances, teachers, or siblings of the child.

² Currently, there are no official statistics available for substantiated cases of child maltreatment in Japan. There is a report of confirmed criminal cases related to CSA; however, this severely underestimates the extent of this problem.

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