

# Childhood Sexual Violence in Indonesia: A Systematic Review

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## Abstract

There has been relatively little research into the prevalence of childhood sexual violence (CSV) as well as the risk and protective factors for CSV in low- and middle-income countries including Indonesia. Systematic searches conducted in English and Bahasa Indonesia in this review identified 594 records published between 2006 and 2016 in peer-reviewed journals and other literature including 299 Indonesian records. Fifteen studies, including nine prevalence studies, met the quality appraisal criteria developed for this review. The review found that CSV research is scarce: Only one study included nationally representative prevalence estimates. Varying definitions for CSV, survey methods, and sample characteristics limited the generalizability of the data. The available evidence points to significant risk of sexual violence affecting both girls and boys across many geographical and institutional settings. Married adolescent girls are vulnerable to sexual violence by partners in their homes. Children in schools are vulnerable to CSV by peers and adults. Victims seldom disclose incidents and rarely seek support. In addition, early childhood experiences of trauma were strongly associated with later perpetration of sexual violence and revictimization. Limited information is available about protective factors. This review synthesizes evidence about what is currently known about CSV in Indonesia and identifies the strengths and weaknesses of the existing research. A more robust evidence base regarding CSV is required to better inform policy and justify investment into prevention programs.

## Keywords

child abuse, sexual abuse, child abuse, domestic violence, cultural contexts, adolescents, sexual harassment, prevention of child abuse, child abuse

## Background

There has been relatively little research into the nature and extent of childhood sexual violence (CSV) in low- and middle-income countries (LMICs) including majority Muslim countries. Indonesia has the third largest Muslim population in the world and is home to almost 90 million children (World Bank, 2017). There is an overall lack of evidence regarding CSV in this vast country, despite its likely impact on individuals, communities, and economies (Fang et al., 2015; Fry, McCoy, & Swales, 2012).

Global systematic reviews have highlighted the vulnerability of girls in relation to CSV, but boys are also affected. Between 8% and 31% of girls and 3% and 17% of boys experience CSV worldwide (Barth, Bermetz, Heim, Trelle, & Tonia, 2013; Pereda, Guilera, Forns, & Gómez-Benito, 2009; Stoltenborgh, van Ijzendoorn, Euser, & Bakermans-Kranenburg, 2011), although other estimates are much higher (Sumner et al., 2015). Similar to the global figures, estimates for CSV in Southeast Asia vary widely; however, a recent review of 40 child abuse studies in 14 countries in the region concluded that approximately 10% of boys and 15% of girls

have experienced at least one form of sexual violence in their childhood (Fry & Blight, 2016). These figures cannot be taken to represent a comprehensive depiction of prevalence, as reliable nationally representative data do not yet exist in many LMICs.

Striking variations in prevalence estimates within and between countries are attributable to several factors, not the least of which is a lack of an international consensus about research definitions and methods for conducting nationally representative population surveys (Hillis, Mercy, Amobi, & Kress, 2016; Interagency Working Group in

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Luxembourg, 2016) including in Southeast Asia (Dunne et al., 2015). Where official data does exist, the real extent of CSV is often underrepresented because it is underreported in all settings (World Health Organization [WHO], 2013, 2014).

LMIC countries, including Indonesia, also suffer from a paucity of rigorous research regarding risk and protective factors for CSV, although some efforts have been made (Behrman, Peterman, & Palermo, 2017; Breiding et al., 2011; Jewkes, Nduna, Jama-Shai, Chirwa, & Dunkle, 2016; Meinck, Cluver, Boyes, & Mhlongo, 2015). The existing research on the drivers of CSV in Southeast Asia has yielded various findings including poor family functioning and low-quality parent–child relationships (Choo, Dunne, Marret, Fleming, & Wong, 2011), weak legal systems and/or ineffective policies to protect children (Materowska, Potts, & Fry, 2016), and the absence of the biological mother (Ravi & Ahluwalia, 2017). Some multi-country studies have identified child marriage, or marriage before 18 years, as placing girls at risk of sexual violence by their partners (Kidman, 2016; Peterman, Bleck, & Palermo, 2015). Social norms and beliefs about gender equality may also affect the risk of sexual violence among girls (Heise & Kotsadam, 2015).

Overall, children living in LMICs are vulnerable to CSV and other forms of violence because of poverty, marginalization, discrimination, urbanization (Barrientos, Byrne, Peña, & Villa, 2014), institutionalization (Sherr, Roberts, & Gandhi, 2017), and societal violence (Rubenstein & Stark, 2017; Walker et al., 2011). Conversely, children in LMICs may benefit from protective factors such as close neighborhood integration, relatively low levels of social isolation among young people, and low drug and alcohol use, among others (Ji, Finkelhor, & Dunne, 2013; Wessells, 2015). However, there is little consistency in the evidence about the factors that explain the risk of CSV across Southeast Asia.

*The context in Indonesia.* Indonesia has achieved middle-income country status, but significant poverty and stark inequalities continue to affect children’s well-being (Hasan, Hyson, & Chang, 2013). Child poverty and child and maternal mortality rates remain of concern (Indonesia Ministry of National Development Planning & United Nations [UN] Children’s Fund [UNICEF], 2017). At least 24 million children are without birth certificates, which creates difficulty in accessing health, education, social protection, and justice systems (Duff, Kusumaningrum, & Stark, 2016).

Data about CSV in Indonesia, as with other forms of child violence, are thought to be limited. As such, it is not possible to analyze trends from existing service reports to draw conclusions about the nature and extent of childhood violence (UNICEF, 2014a). The absence of reliable prevalence data limits the Indonesian Government’s ability to assess whether the problem is increasing or decreasing and to make informed decisions for investment in policy and research.

In 2015, the Sustainable Development Goals established the elimination of all forms of childhood violence as a global development target for all member states of the UN (UN General Assembly, 2015). Goal 5 (on gender equality) and Goal 16 (on peace and justice) specifically require governments to report on progress to end sexual violence. Indonesia is a vocal champion of these targets and a board member of the Global Partnership to End Violence against Children. The purpose of this review was to collect and critically analyze all available studies about the prevalence of CSV in Indonesia, as well as the risk and protective factors, to inform future investments in policy and research and to meet the Sustainable Development Goal targets.

## Method

For consistency with other reviews about violence against children from the region (Fang et al., 2015) and globally (UNICEF, 2014b, 2014c), in this study, a *child* is defined as any person under 18 years of age, as described in the UN Convention on the Rights of the Child (UN General Assembly, November 20, 1989), ratified by almost all countries in the world, including Indonesia, in 1990. As in other recent studies (Kumar et al., 2017; Ravi & Ahluwalia, 2017), the term *childhood violence* is used in this study rather than *violence against children* to acknowledge the violence perpetrated by children against other children. CSV is defined as the involvement of a child in sexual activity that they are unable to give informed consent to, or for which the child is not developmentally prepared, or else that violates the laws of society (Krug, Mercy, Dahlberg, & Zwi, 2002; WHO, 1999, 2014).

A systematic search and review method was used, which combined a critical review with a comprehensive search process (Grant & Booth, 2009) and followed reporting guidelines for systematized scoping reviews (Joanna Briggs Institute, 2015) as closely as possible. A process of evidence synthesis (Ganann, Ciliska, & Thomas, 2010; Khangura, Konnyu, Cushman, Grimshaw, & Moher, 2012) of both qualitative and quantitative studies was followed to identify the methodological and ethical quality of the research.

A mixed search strategy was used, including manual and automated searches, to ensure that the search process identified all relevant literature. Automated searches were conducted by systematically entering combinations of various search terms into databases, search engines, and digital libraries. Both free text and controlled vocabulary of subject headings and key word searches were used to identify journal articles and other literature indexed in international electronic databases. Manual searches were conducted through specific journals (Table 1) and were also undertaken of conference proceedings, government reports, information briefings, masters and PhD theses, nongovernment organization publications, UN reports, and websites (Tables 1 and 2). Finally, the reference lists of the included studies were searched to identify potential further sources.

**Table 1.** Databases, Journals, and Websites.

Databases, Search Engines, and Websites	Journals
PubMed/Medline	<i>Child Abuse and Neglect</i>
Cochrane Library	<i>Child Maltreatment</i>
PsycInfo (EBSCOhost)	<i>Child Abuse Review</i>
CINAHL (EBSCO)	<i>International Journal of Child Law</i>
EmBase Social Work	<i>Journal of Interpersonal Violence</i>
Social Work Abstracts	<i>Aggression and Violence Behavior</i>
JSTOR	<i>Child Welfare</i>
Scopus	<i>Journal of Aggression</i>
Proquest	<i>The Lancet</i>
	<i>Maltreatment and Trauma</i>
Google Scholar	<i>Journal of Child and Family Studies</i>
	<i>Journal of Child Sexual Abuse</i>
UN Treaty Body Reports	<i>Journal of Family Violence</i>
UN websites	<i>Journal of School Violence</i>
	<i>Sexual Violence a Journal of Research</i>
	<i>Trauma Violence and Abuse</i>
	<i>Youth Violence and Juvenile Justice</i>
NGO and other websites (Save the Children, Plan International, Care International, World Vision, Partners for Prevention, Together) for Girls, Sexual Violence Research Initiative	

Note. UN = United Nations; NGO = nongovernmental organization.

A wide variety of synonyms and related terms were combined with “OR” within each concept, for example, using the terms *child*, *adolescent*, *youth*, *young person*, and *teen* to capture any person below 18 years. Recognizing that CSV may be reported alongside or within broader categories of violence, and because children often experience polyvictimization (Finkelhor, Ormrod, & Turner, 2007), the search was expanded to include multiple types of childhood violence and a broad definition of CSV, consistent with other systematic reviews from the region (Fry et al., 2012).

Searches were customized for each database, as shown in Table 3. For example, a search in PubMed included the following: “sexual violence” AND “Indonesia,” “child\* sexual abuse” AND “Indonesia,” “sexual abuse” OR “sexual violence” AND “Indonesia,” and “child abuse” (Mesh) OR “child sexual abuse” (Mesh) OR “gender-based violence” AND “child” OR “adolescent.” The search terms were tested through a pilot literature search, which included running a sample of systematic searches and scanning retrieved records to ensure that the search terms

**Table 2.** In-Country Sources Including Local Universities, Research Institutes, and Think Tanks; Government Agencies; and Civil Society and the United Nations.

Universities, Think Tanks, and Research Institutes	Civil Society, United Nations Sources	Government
Social Monitoring and Early Response Unit Indonesia	United Nations Children’s Fund Indonesia	Ministry of Women’s Empowerment and Child Protection
University of Indonesia (Center for Gender Studies and Center for Child Protection)	United Nations Women’s Agency Indonesia	Ministry of Women’s Affairs
Lembaga Ilmu Pengetahuan Indonesia	United Nations Population Fund Indonesia	Ministry of Law and Human Rights
Jaringan Peduli Anak Indonesia University of Gadjah Madah	World Health Organization Indonesia	Ministry of Planning
Kementerian Riset Teknologi Dan Pendidikan Tinggi Republik Indonesia	United Nations Development Program Indonesia	
Bogor Institute of Agriculture, Social Welfare Research Centre	ChildFund Indonesia	
State Islamic University Allauddin Makassar	The Australian Partnership for Justice Indonesia	
Local academic databases from:		
<ul style="list-style-type: none"> <li>• Gadjah Madah University</li> <li>• Sumatera Utara University</li> <li>• Indonesia Library University</li> <li>• Diponegoro University</li> <li>• Program Pasca-sarjana Universitas Udayana</li> </ul>		

were sensitive enough to obtain a comprehensive and relevant set of records.

In-country literature was located through requests to academics and partner research organizations by telephone, e-mail, or in-person visits. No language restrictions were applied. An initial search of the identified sources was conducted in English (Table 1) to locate a total of 282 records. Duplicates were removed using referencing software (Endnote 17.7) and rescreened to create 242 unique records. Searches of databases in Bahasa Indonesia, the dominant local language in the country (Table 2), yielded 299 records, none of which had been

**Table 3.** Search Terms.

Population Search Terms	Indicator and Sexual Violence Type Search Terms
Child*, adolescent*, boy*, girl*, youth*, young*, young person*, teen*, pube*, pre-pube*, minor*, juvenile*, toddler*, and infant	Sex*, sexual trauma, violen*, child marriage, child prostitution, child trafficking, dating violence, domestic violence, early marriage, forced marriage, forced oral sex, gender*, gender-based violence, maltreatment, abuse, intimate partner violence, neglect, bully, rape, parental violence, sexual harassment, molestation, incest, sexual assault, inappropriate touching, youth violence, and victimization

published in international peer-reviewed journals. Manual searches identified 13 additional records.

A total of 554 studies were screened by title and abstract to identify 37 potentially eligible studies, of which only 2 were published in Indonesian. A study flow diagram is presented in Figure 1.

To progress to the review, the studies had to meet the following criteria: (i) be about CSV prevalence and/or the associated risk and protective factors in Indonesia and (ii) be published between 2006 and 2016. Like other reviews (Abrahams et al., 2014), any definition of sexual violence was accepted; however, studies that combined sexual and nonsexual violence in the same prevalence estimates (e.g., key measures included sexual abuse only when there was concurrent physical violence) were excluded.

To assess quality, a quality appraisal tool was adapted to the Indonesian context, where there are limited internationally peer-reviewed published papers on CSV, but at the same time a potentially large volume of locally available studies and reports that include important findings about violence, such as from locally published articles, government, and civil society reports. To the knowledge of the authors, no other systematic literature review of CSV in Indonesia has been published. The quality appraisal tool drew from an existing tool (Crowe, Sheppard, & Campbell, 2012), used in the most recent global systematic review of CSV prevalence in LMICs (Veenema, Thornton, & Corley, 2015), and included a checklist of 13 items including nine essential criteria, as shown in Table 4. Representativeness, relevance, study design, clarity of objectives, and evidence of ethical approach were considered among the quality criteria. For the latter, a relatively broad interpretation was required to review the studies against ethical criteria, as few studies referred to formal ethical clearance being obtained. The validity and reliability of the instruments used in the studies were not reported by the study authors in most cases; thus, consideration was also given to whether the

study methods were clearly described and relevant to the stated purpose.

After screening the selected full text articles against the quality appraisal tool, only 15 studies were identified as meeting the essential criteria. Of these, five were led by Indonesian researchers. The most common reasons for exclusion were: (i) the studies did not discuss or collect data about CSV prevalence or the associated risk and protective factors ( $n = 11$ ); (ii) the study methods were inadequately described, and the study findings could therefore not be compared to others ( $n = 9$ ); and (iii) the studies lacked description of the research definitions and instruments, had extremely small sample sizes, and lacked empirical evidence to inform the research findings ( $n = 2$ ). A brief description of the included studies and their scoring against the criteria is shown in Table 5.

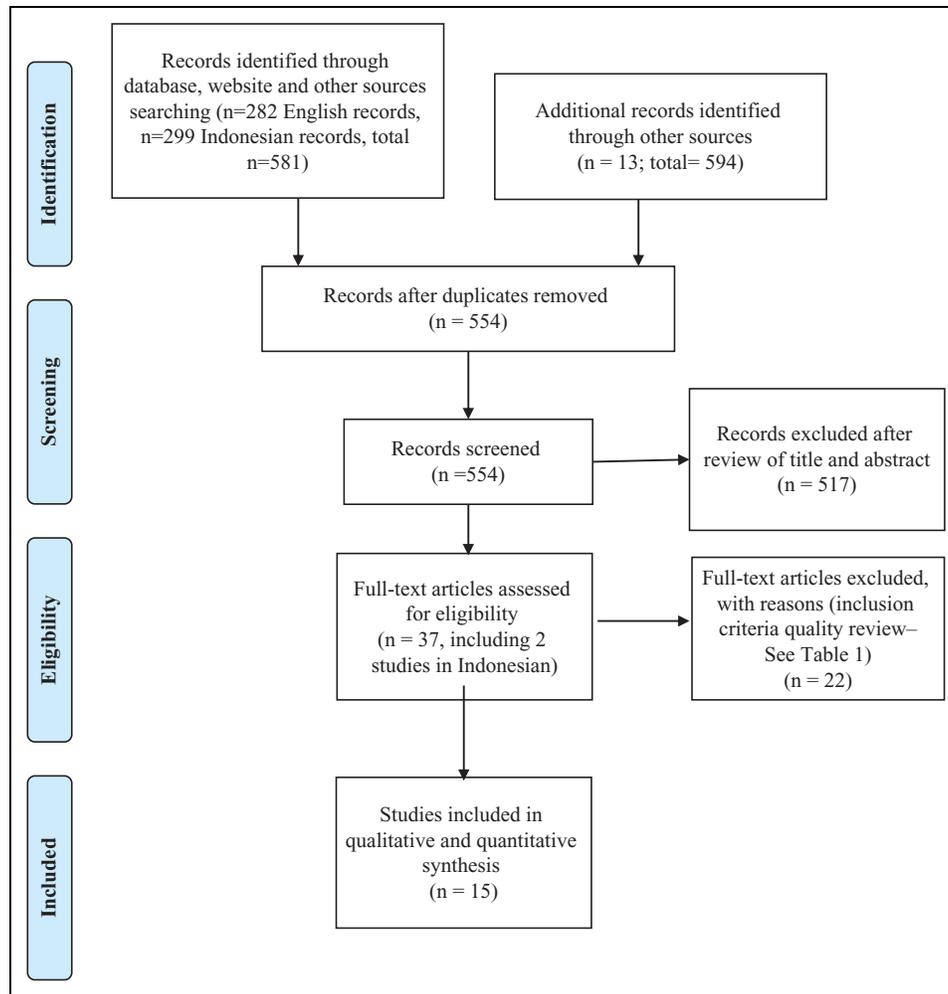
Every effort was made to reduce the risk of bias in this review. An expert panel was comprised of seven representatives from the Indonesian Government, the UN, academics, and youth network/civil society partners. Each expert, trained in child protection, reviewed the list of studies for relevance and the full text of the smaller subset of studies that met the inclusion criteria. Three authors (LR, MN, and RFF) screened the abstracts and extracted the prevalence estimates, qualitative findings on risk, and protective factors, as well as methodological information to score the studies, with discussions held to reach consensus prior to exclusion. The full panel reviewed the review findings for policy and cultural relevance.

## Results

### Overall

This review confirmed that research about CSV in Indonesia is scarce. A few studies generated estimates about the prevalence of violence in schools and certain geographic locations. Some of these were deemed to be stronger than others based on the criteria adopted in this review (Bhatla, Achyut, Khan, & Walia, 2015; Fulu, Jewkes, Roselli, & Garcia-Moreno, 2013; Fulu, Warner, et al., 2013; Indonesia Ministry of Health, Ministry of Education, World Health Organization, & Centers for Disease Control and Prevention, 2015; UN Development Programme [UNDP], Statistics Indonesia, & Rifka Annisa, 2016). The studies scoring highest on the quality appraisal tool focused on intimate partner violence, including sexual violence, among older children or adults (see Table 5).

No comprehensive representative study about CSV that could provide a clear and reliable picture of the prevalence of CSV in Indonesia and of its risk and protective factors was found. However, despite their limitations and the wide heterogeneity in definitions and methodologies, these studies revealed some evidence about the prevalence and risk factors and some useful information about patterns of disclosure and help-seeking. The review also identified the challenges for researching CSV in the Indonesian context as well as areas that require particular attention in the future. The findings are grouped into three main categories: (i) the prevalence of CSV



**Figure 1.** Study flow diagram.

in Indonesia; (ii) the risk and protective factors or drivers of CSV in Indonesia; and (iii) other research findings such as sequelae and the effect on future revictimization and perpetration, disclosure, and help-seeking behaviors.

### *Prevalence of CSV in Indonesia*

Nine studies investigated the prevalence of CSV in Indonesia. Estimates ranged widely from 0% to 66%. The variation appears to have been strongly influenced by the definitions and methods used as well as the methodological quality of the research. The three studies with the highest quality scores (Fulu, Jewkes et al., 2013; Fulu, Warner et al., 2013; UNDP et al., 2016) were conducted among older children (>14 years) and adults, with estimates of lifetime prevalence ranging from 6% to 12% among boys and 6% to 14% among girls.

A relatively large school-based study among 1,738 children aged between 12 and 14 years (922 females, 816 males) found high rates of CSV (Bhatla et al., 2015). Boys reported experiencing higher rates of victimization (29%) compared to girls (21%). In the preceding 6 months, 7% of girls and 21% of boys said they had experienced at least one form of sexual violence.

While the data were not disaggregated by the type of sexual violence, the high prevalence reported in this study, especially for boys, is likely to be attributable to the very broad definition of CSV used, which included unwanted physical and verbal acts, being shown photographs of sexual acts, and the passing of sexual comments. The study was limited to urban school-going children in only two districts and is therefore not representative (Bhatla et al., 2015).

Indonesia's most recent global school-based health survey presents the only nationally representative data about CSV including 11,110 children and adolescents aged between 13 and 19 years (Indonesia Ministry of Health et al., 2015). As in the previous study, boys reported more sexual violence (5%) compared to girls (3%); however, much lower prevalence estimates were reported overall. These low estimates could be attributed to the definition of CSV used in the study, which was limited to forced sexual intercourse only. The methods were only briefly described in this study, and disaggregated data by age and gender were not available, thereby limiting critical review of the data (Indonesia Ministry of Health et al., 2015).

**Table 4.** Quality Appraisal Checklist for Inclusion of Studies.

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 Minimum Score 9/13 Essential Criteria = \*

Response Options: Yes/ No

1. *\*Preamble:* Study aims and design described in the title and abstract, which is clear and informative
2. *\*Objectives:* The objectives of the study were clear
3. *\*Background:* The background includes a summary of current knowledge as well as reference to the specific problem(s) being addressed and reasons for addressing them
4. *\*Relevance:* The study contained information clearly relevant to the systematic review's research questions
5. *\*Design:* Research design is specified, explaining why the design was chosen. The outcomes/outputs of the study are clearly articulated. There is no potential bias in the design and there is equal treatment of participants/cases/groups
6. *\*Study Eligibility Criteria:* The sampling method is suitable to the study's aims and the recruitment of the participants to the study is clearly described
7. *\*Sample size:* The sample size of the study was sufficient to justify the study's conclusions
8. *\*Ethical considerations:* Researcher ethics (ethical approval, funding, any conflicts of interest, and subjectivities) are stated clearly
9. *\*Definition:* The study included a clear definition of sexual violence
10. *Results:* Summary of results clearly specified by outcome/output/predictor/measure. There is clear consideration of benefits/harms as well as any unexpected results or failures/challenges
11. *Discussion:* There is clear interpretation of results in the context of current evidence and objectives. The authors have drawn inferences consistent with the strengths of the data and consideration of alternative explanations for observed results, as well as accounting for bias/confounding effects
12. *Assessment of coherence:* The study was manifestly clear and well researched (e.g., not contradictory/ confusing)

Score:

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The UN Multi-Country Study on Men and Violence in Asia and the Pacific presented rigorous evidence regarding lifetime experience of CSV as reported by adult males (Fulu, Warner, et al., 2013). Conducted in six countries, including Indonesia, between 2011 and 2012, it included a sample of 2,577 randomly selected adult males aged 18–49 years using in-person interviews administered by trained enumerators. This study found that CSV was a common phenomenon across all six countries. The estimates from the three sites in Indonesia reporting sexual violence before the age of 18 were 12% of males in Jayapura, Papua province; 7% of males in Jakarta, the capital city; and 6% of males in Purworejo, Central Java province (Fulu, Warner, et al., 2013).

A recent study in four districts in Papua and West Papua confirmed the high risk of CSV in this region (UNDP et al., 2016). Among the total sample of 1,931 respondents (960 females, 971 males), 14% of females and 6% of males reported experiencing CSV before the age of 15. The study's definition of sexual violence was similar to that used in the Multi-Country

Study (Fulu, Warner, et al., 2013) including forced sexual intercourse, unwanted sexual touching, or being forced to perform degrading sexual acts (Table 5). The authors found that research mode greatly affected disclosure rates among female respondents and that anonymous disclosure via self-administered questionnaires yielded much higher prevalence estimates (13%) than those obtained through personal interview (6%; UNDP et al., 2016).

A local study also undertaken in this region was conducted in 16 schools, with a sample of 1,082 students (546 females, 536 males) aged between 16 and 21 years in Papua and West Papua reporting high levels of lifetime sexual violence among girls (19%) compared to boys (1%) using a self-administered anonymous survey (Diarsvitri, Utomo, Neeman, & Oktavian, 2011). This study's findings were not disaggregated by age, and little information was available about the definitions, methods, and ethical protocols used in this study; thus, the results should be interpreted cautiously.

A study among a convenience sample of children aged between 13 and 18 years living in 56 institutions across three provinces reported relatively low estimates (Center for Child Protection, University of Indonesia, PUSKAPA UI, 2014). Sexual violence was reported as being experienced by 4% of boys and 2% of girls. No information was provided about the interview questions, definitions, or setting in the published-study; thus, it is not possible to ascertain whether the research methods influenced the prevalence estimates.

The highest reported prevalence estimates in this review were reported by married adolescent girls (and women) in a study from Nusa Tenggara Barat province using in-depth interviews carried out by trained female, married interviewers (Bennett, Andajani-Sutjahjo, & Idrus, 2011). Among a purposive sample of 504 married Muslim females aged 16–46 years, 66% of girls and women reported experiencing unwanted sex with their partners in the past year (Bennett et al., 2011).

In contrast, an unpublished 2011 survey from the University of Indonesia reported extremely low estimates of CSV (Horn, 2011, unpublished report). This study piloted the use of the "neighborhood method" (Stark et al., 2009; Stark, Warner, Lehmann, Boothby, & Ager, 2013), in the Nusa Tenggara Timur province among a sample of 365 adult females to establish a rough estimate of sexual violence incidence, with adult respondents reporting only a handful of incidents of CSV ( $n = 5$ ). The author suggested that interviewing adults may underestimate the prevalence of sexual violence against children where the perpetrator is a family member (Horn, 2011, unpublished report).

### **Risk and Protective Factors**

Fourteen of the 15 studies chosen for this research included references to risk and protective factors associated with CSV, mostly through qualitative research, while 12 studies referred to gender social norms and models of masculinity as influencing CSV perpetration and disclosure by victims. For example,

**Table 5. Overview of 15 Included Studies.**

Author (Year; Quality Appraisal Score)	Geographic Area	Sample	Research Method	Definition of CSV	CSV Prevalence	Key Findings
Bennett, Andajani-Sutjahjo, and Idrus (2011; 9)	Nusa Tenggara Barat province, Sumbawa (rural), and Mataram (urban)	504 Ever-married Muslim females 16–46 years (subsample of 1,004 participants in a 2007 health survey)	Interviewer-administered survey with respondents as well as field diaries by interviewers (female, married women)	Unwanted sexual intercourse with a partner within the past year	66% Past year; results not disaggregated by age	High prevalence estimates may be related to lack of awareness among women and men about women's entitlement to refuse sex in marriage as well as this study's methods (broad definition, rapport-building with participants, highly trained interviewers)
Bhatia, Achyut, Khan, and Walia (2015; 11)	Jakarta City, Serang Districts	1,738 (922 females; 816 males) 12–14 years; 30 schools	School-based self-administered survey; focus group discussions	"Passed sexual comments/whistled; showed sexual photo/video; touched body/kissed/fondled/asked for these acts" (p. 16)	Lifetime prevalence: 29% (males), 21% (female). Past 6 months: 21% (males); 7% (females)	Male students most frequent perpetrators of CSV. CSV also more reported among males in this study. Victims tend not to report incidents
Boothby and Stark (2011; 9)	National (including subnational data from Central Java and Nusa Tenggara Barat)	Government, UN, civil society actors	Qualitative review including a desk review (existing reports, data collection tools, evaluations, and other information pertaining to child protection data in Indonesia); semistructured interviews with child protection stakeholders in government and civil society; focus group discussions with community members, site visits to selected service providers	Not available (N/A)	N/A	National gap in resources on child protection data. No reliable prevalence data available
Center for Child Protection University of Indonesia (2013; 9)	South Sulawesi province	96 Children (56 females; 44 males) 13–18 years; 72 adults (36 males; 36 females)	Focus group discussions; participatory ranking, case scenarios; social network mapping	Sexual activity with or without the child's consent, where the perpetrator is older or in a position of authority	N/A	Limited services available for victims. Girls perceived as at risk of CSV in the home or by a boyfriend. CSV reported as common, but no quantitative data provided
Center for Child Protection University of Indonesia (2014; 9)	National: multiple institutions (formal, private or religious institutions)	622 (389 males; 233 females) 13–18 years	Interviews (no details provided)	N/A	4% (males); 2% (females) lifetime prevalence	N/A
Diarsvitri, Utomo, Neeman, and Oktavian (2011; 9)	16 Schools in Papua and West Papua provinces	1,082 (546 females; 536 males) 16–21 years	Self-administered questionnaire; in-depth interviews (n = 40)	N/A	19% (females); 1% (males) lifetime prevalence among 27% reporting sexual activity	Girls lack agency: 37% of sexually active female students afraid to ask their partners to use contraception. Gender inequality, unequal power dynamics established from an early age

(continued)

Table 5. (continued)

Author (Year; Quality Appraisal Score)	Geographic Area	Sample	Research Method	Definition of CSV	CSV Prevalence	Key Findings
Fulu, Jewkes, et al. (2013; 13)	Urban and rural sites in Central Java, Papua provinces	10,178 Males 18–49 years	Further analysis of Fulu, Jewkes, et al., (2013)	Forced, coerced sexual intercourse, unwanted sexual touching, forced to perform sexually degrading acts	Among males: 6% (rural site); 7% (urban site); 12% (Jayapura)	Experience of CSV or any childhood trauma strongly associated with perpetration
Fulu, Wamer, et al. (2013; 13)	Urban and rural sites in Central Java, Papua provinces	10,178 Males 18–49 years	Population-based household survey in nine sites in six countries (Bangladesh, China, Cambodia, Indonesia, Sri Lanka, and Papua New Guinea). Enumerator administered questionnaire through face-to-face interviews	Forced, coerced sexual intercourse perpetrated by males	Among males: Jayapura (12%); rural site (7%); urban site (6%). Jayapura: 62% <20 years when perpetrated rape for the first time	Risk factors for perpetration: absence of a high school education; child abuse; a higher number of sexual partners; transactional sex; involvement in a gang. Reasons for perpetration: entitlement (75%); entertainment (43%)
Hayati, Emmelin, and Eriksson (2014; 10)	Central Java province	12 (sample not disaggregated by age)	Focus group discussions (12 participants); 4 individual interviews	N/A	N/A	Risk factors: poor legislative enforcement; lack of available victim services and trained staff. Traditionally hierarchical society and taboo topic of sexual violence in relationships drivers of violence
Hayati, Högberg, Hakimi, Elisberg, and Emmelin (2011; 10)	Central Java province	765 Females (sample not disaggregated by age)	Enumerator administered questionnaire through in-person interviews	N/A	22% Lifetime prevalence (no disaggregated data available)	Sexual violence associated with husbands' demographic characteristics (less than 35 years) and educated less than 9 years; female economic independence. 59% Respondents viewed coercive sex as justified
Horn (2011; 10)	5 Districts in Nusa Tenggara Timur province	365 Respondents across 30 villages. These respondents reported on themselves, their children ( $n = 854$ ), their 729 adult female neighbors and their neighbors' children ( $n = 1,364$ )	The "neighborhood method": in-person interview	Respondents asked to recall any incident of sexual violence in past 18 months against themselves, any child in the household, a female neighbor or neighbors' children. Rape defined as: "an act of violence committed by someone which includes attempted or actual vaginal, anal, or oral penetration without consent, either within or outside of a marital relationship" (p. 12). Child sexual abuse defined as: "touching or attempting to touch a child's private body parts or forcing a child to touch another person's private body parts" (p. 12)	Only five cases CSV reported in the study. Adult self-reports higher (28%) than reports by neighbors (5%)	CSV considered a private issue in Indonesia, especially if perpetrated by a partner

(continued)

**Table 5.** (continued)

Author (Year; Quality Appraisal Score)	Geographic Area	Sample	Research Method	Definition of CSV	CSV Prevalence	Key Findings
Indonesia Ministry of Health et al. (2015; 10)	National	11,110 (no disaggregated data) 13–19 years (some discrepancies in total number of respondents reported in the report)	School-based self-administered questionnaire	Forced sexual intercourse	3% (females); 5% (males)	N/A
Iskander (2016; 9)	Papua and West Papua provinces	N/A	Institutional capacity assessment; no instruments cited	N/A	N/A	Few services for victims. In Manokwari, no specialized legal aid services available for child victims. In Sorong, no cases of sexual or other forms of violence brought to the courts CSV critical threat to children, although few child victims ever report or seek support.
Stark, Bancroft, Cholid, Sustikarini, and Mellala (2012; 12)	Aceh province	40 Adults and adolescents (14–19 years)	Interviews and focus group discussions	N/A	N/A	Reasons for nondisclosure: shame; fear of escalating the problem; lack of agency to change their situation. Certain cultural and social forces condone violence
UNDP et al. (2016; 13)	Papua and West Papua provinces	1,931 (960 females; 971 males) aged 14–64 years	In-person interviews and self-administered questionnaires	Forced/coerced intercourse, forced to perform sexually humiliating acts, unwanted sexual touching	14% (females); 13% anonymous disclosure; 6% by interview) 6% (males) lifetime prevalence.	Reasons for perpetration: entitlement (66%); boredom (47%). Disclosure uncommon

Note. CSV = childhood sexual violence.

one of the school-based studies (Bhatla et al., 2015) reported that most perpetrators were male students. In this study, 10% of students said they had reported this to a teacher or principal and 14% had told their parents. The researchers argued that social norms may generate violence, or possibly a high social tolerance of violence in schools, where few victims seek support (Bhatla et al., 2015).

Similarly, in the Statistics Indonesia study (UNDP et al., 2016), most male respondents who had ever perpetrated rape (65%) in one of the studies from Papua admitted they did so as teenagers (aged between 15 and 19 years) and cited reasons for these acts as sexual entitlement (66%) or boredom (47%). Male perpetrators (67%) reported no legal consequences from these acts (UNDP et al., 2016).

A secondary analysis of the Multi-Country Study undertaken by Fulu, Warner, et al. (2013) found that experiences of CSV and other traumatic events in childhood (such as witnessing the abuse of a mother) were strongly associated with adult perpetration of sexual violence (Fulu, Jewkes, et al., 2013). Poverty was not found to be a risk factor. Alcohol and/or substance abuse was also not a strong risk factor. The authors attributed this to the strictly enforced religious bans on drinking and severe penalties for illicit drug use in Indonesia and noted this was consistent with other local studies (Hayati, Högberg, Hakimi, Ellsberg, & Emmelin, 2011).

In all sites, including studies that took place in other countries, perpetration was associated with gender inequality and was measured by controlling behavior by men and sexual practices that objectify women. Other investigators in Indonesia reported similar findings in smaller localized studies (Diarsvitri et al., 2011; Hayati, Emmelin, & Eriksson, 2014; Nilan, Demartoto, Broom, & Germov, 2014; Rowe, Fakhri, Sutan, & Dulka, 2006; Syukur & Bagshaw, 2013).

Similarly, the researchers from the study in Nusa Tenggara Barat did not find that age, urban versus rural residence, or number of children were predictors of sexual violence (Bennett et al., 2011). It is notable that adult women's education level was a protective factor for sexual violence by a partner in adulthood, with girls and women who completed secondary school being less likely to report experiencing physical violence by a partner (Bennett et al., 2011).

### Other Related Findings

Across all of the studies included in this review, it was found that children tended not to disclose incidents of CSV to service providers, family members, neighbors, or peers. These low disclosure rates may perpetuate and "normalize" the perpetration of sexual violence. A small study from Aceh province with 40 adults and children identified a general reluctance to disclose or to intervene in family violence as "*nafsi*," which roughly translates as "your business is yours and you have your own solution" (Stark, Bancroft, Cholid, Sustikarini, & Meliala, 2012, p. 233). Children in this study also reported dissatisfaction with social response mechanisms, as well as shame and

fear as barriers to disclosure, for any form of violence (Stark et al., 2012).

A qualitative study that included focus group discussions with adult community members found that large numbers of children at risk of CSV may not be identified as in need of assistance (Boothby & Stark, 2011). It was suggested that this may be due to a lack of awareness about children's rights in communities, fear of reporting cases to the police or judicial system, and a lack of awareness about available support mechanisms for children (Boothby & Stark, 2011).

Limited access to services for victims of sexual and other forms of violence affecting reporting and possibly disclosure was also identified in Iskandar's (2016) assessment of social services in Papua and West Papua. Few crisis centers were available for women and children and most abuse cases were handled using traditional justice mechanisms. In one district, Sorong, there was no record of any case of CSV reaching the courts (Iskandar, 2016). The absence of support mechanisms for child victims among children and adults was also noted in another study from South Sulawesi (Center for Child Protection, 2013).

## Discussion

Empirical research on the prevalence of CSV and of its risks and protective factors in Indonesia remains limited.

The available studies about prevalence are very heterogeneous in terms of sampling, definitions of CSV, and survey methods. Studies using narrow definitions of CSV limited to forced sexual intercourse have revealed lower prevalence (Indonesia Ministry of Health, Ministry of Education, World Health Organization, & Centers for Disease Control and Prevention, 2015) than studies using definitions inclusive of verbal and nonpenetrative physical contact acts (Bhatla et al., 2015).

The somewhat disparate findings across the studies in this review may also be due to variations in research settings, mode, and content, as has been found in other countries in Southeast Asia (Finkelhor, Ji, Mikton, & Dunne, 2013). Research design may affect the recruitment and participation of children and subsequent disclosure to interviewers in Indonesia's cultural context (Rumble, Ramly, Nuryana, & Dunne, 2017). The studies used in this review varied in terms of the quality of research management and procedures. It is notable that the publications that described ethics protocols and a strong investment in training of interviewers had the highest response rates (>90%) and generally yielded much higher estimates of CSV in Indonesia (Bennett et al., 2011; Fulu, Jewkes, et al., 2013; Fulu, Warner, et al., 2013). Studies from other countries in Southeast Asia and elsewhere have discussed the difficulties respondents face in openly disclosing during personal interviews (Chan, 2011; Radford, Corral, Bradley, & Fisher, 2013) and emphasized the importance of creating a warm and supportive environment to encourage disclosure (Fontes & Plummer, 2010). Matching interviewer and respondent characteristics, such as the use of

married female interviewers in one study (Bennett et al., 2011), may also affect disclosure in the Indonesian context.

In addition, studies that used methods to protect respondents' anonymity tended to report higher prevalence estimates (UNDP et al., 2016). Researchers from other LMICs have argued that self-administered questionnaires or similar methods that protect the confidentiality of participants are preferable to personal interviews because they are more comfortable for children, reduce social desirability bias, have good internal consistency, and are associated with higher prevalence estimates (Barr et al., 2017).

A common theme across Indonesian research was the reluctance of children (and adults) to disclose sexual violence to family members, peers, or service providers, possibly due to feelings of fear and shame, cultural, or societal barriers to official reporting. This is consistent with a large body of research worldwide (Collin-Vézina, De La Sablonnière-Griffin, Palmer, & Milne, 2015; Fontes & Plummer, 2010; McElvaney, 2015; Paine & Hansen, 2002; Watts & Zimmerman, 2002), and there is little reason to assume barrier to disclosure elsewhere is different from the factors that influence disclosure in Indonesia. Nevertheless, there is a need for researchers to consider whether any particular barriers have more influence in Indonesia, particularly for children, compared to other settings.

Most studies identified for this review were confined to single settings such as schools. Many studies were limited in age and sample characteristics, for example, including only married women and girls aged 16 and above (Bennett et al., 2011), which limits the generalizability of the findings. None included all of the four main types of child maltreatment (physical violence, sexual violence, emotional violence, and neglect), despite evidence in Southeast Asia and globally that many children experience multiple types of maltreatment (Choo et al., 2011; Finkelhor et al., 2007; Nguyen, Dunne, & Le, 2010).

Only one study in Indonesia provided nationally representative prevalence estimates for CSV (Indonesia Ministry of Health et al., 2015); however, its findings were narrow in scope and did not provide an adequate picture of the contexts in which sexual violence occurs including the perpetrators, locations, or associated risk and protective factors. Considering the size of the sample and the support from the Indonesian Government for that study, it represents a missed opportunity to gain deeper insight into multiple forms of violence and maltreatment in childhood. A significant gap in knowledge internationally is that community- and school-based violence surveys are not conducted regularly. It is not yet possible to estimate change over time in relation to the risk of violence in Indonesia or elsewhere in Southeast Asia.

What then can be concluded from the available evidence? First, recent research from Indonesia appears to confirm that sexual violence is widespread. The preliminary findings from the Indonesian Government's first population survey on violence against women indicates that one in three girls

and women aged between 15 and 64 years have experienced sexual violence in their lifetimes (Statistics Indonesia, 2017, unpublished report). Thus, the problem is nationally significant and not particular to Papua and West Papua, where studies reported in this review were concentrated. However, the findings must be interpreted cautiously, as disaggregated data by age are not yet available, and at the time of writing, access to a description of the study methods, including the definitions used, was also not available. Indonesia like many countries in Southeast Asia remains underrepresented in the global literature about childhood violence (Devries et al., 2018).

Second, multiple studies have indicated higher rates of CSV among boys than girls, which is contrary to trends in affluent Western countries and in Africa (Jewkes & Dartnell, 2017; Stoltenborgh et al., 2011), while clearly evident in CSV studies from Southeast Asia (Choo et al., 2011; Nguyen et al., 2010; Tran, Dunne, Vo, & Luu, 2015). Researchers have debated whether these estimates reflect real differences in the risk of sexual violence across cultures and regions (Finkelhor et al., 2013; Ji et al., 2013; Jirapramukpitak, Abas, Harpham, & Prince, 2011). Thus, this complex issue is unresolved and requires further research. Qualitative inquiry to understand how gender, language, religiosity, education, and other cultural factors may affect disclosure would be especially useful.

Third, several qualitative and quantitative studies in this review suggested that social norms may limit women and girls' decision-making powers in the household, allow for male controlling behavior over women, and create conditions where violence may be likely to arise (Center for Child Protection, 2013; Fulu, Jewkes, et al., 2013; Fulu, Warner, et al., 2013; Hayati et al., 2014; UNDP et al., 2016). In relationships, women and girls, as well as men and boys, may also lack awareness about a partner's right to refuse sex in marriage, resulting in the high reports of sexual violence by a partner among older adolescents and women found in this review (Bennett et al., 2011). As in other studies globally (Fergusson, Boden, & Horwood, 2008), and in the region (Fry et al., 2012; Fulu et al., 2017), this review shows that exposure to partner violence places boys and girls at risk of future victimization and perpetration when they are adults.

### *Limitations*

This review has several limitations. First, due to the paucity of published data from Indonesia on this subject and the lack of quantitative studies, it was not possible to apply rigorous guidelines (Higgins & Green, 2011; Murray, Farrington, & Eisner, 2009; Stroup et al., 2000) that other systematic reviews of this kind have used (Meinck et al., 2015; Moore et al., 2015). As described above, it is likely that most of the studies included in this review would not have qualified, had these criteria been applied. Thus, this limits comparison of this review with other systematic reviews conducted in Southeast Asia and beyond.

However, it is possible that the recent *National Survey on Women's Life Experiences* (Statistics Indonesia, 2017, unpublished report) would meet these criteria when the full report is available. It is also possible that the quality of childhood violence research is improving in Indonesia. The findings and subsequent analysis of the methods used in this study, once published, may yield important insights into sexual violence in Indonesia as well as lessons learned for future research. Nevertheless, few data on CSV exist on other age groups, especially children younger than 15 years, or for boys.

Second, the review is limited because there were insufficient studies to undertake systematic comparisons between subgroups of studies with different designs, samples, or measures; it was only possible to make thematic observations and identify obvious strengths and weaknesses in the available literature.

Third, interrater reliability metrics for the scores assigned by members of the expert review panel were not calculated; thus, systematic error cannot be discounted.

Despite these limitations, this systematic search and review has identified several patterns pertaining to CSV that merit further investigation and justify more investment in research, especially into contextually appropriate and child-sensitive research methods that assist children to overcome barriers to disclosure. In addition, the practical quality appraisal tool developed and used in this study may be useful in other countries where there is a similar scarcity in data and where the capacity to conduct systematic reviews is limited (Oliver, Bangpan, Sansfield, & Stewart, 2015).

## Conclusions

The existing evidence suggests possibly substantial, but underestimated, CSV experiences among girls and boys in Indonesia. The problem is difficult to research due to the sensitivity of the subject matter and the difficulties children face in disclosing incidents. This review suggests that the study design, including research definitions, mode, and setting, as well as broader societal and contextual factors, influences children's willingness to report. As part of a broad study of risk and protective factors, it is recommended that further qualitative inquiry is undertaken to improve understanding of how gender, language, religiosity, education, and other cultural factors may affect disclosure, building on the findings of global reviews (Alaggia, Collin-Vézina, & Lateef, 2017).

As calls to address CSV and other forms of childhood violence have become prominent in the international research and policy agenda, including the Sustainable Development Goals, the need for rigorous evidence has increased (Mikton et al., 2016; Zimmerman et al., 2016). This study provides an overview of the current literature in Indonesia about CSV and confirms that CSV is a serious concern that contributes to an ongoing cycle of violence that persists into adulthood. Unfortunately, current research quality and quantity are insufficient for policy and program development. A more robust evidence based about CVS and other forms of childhood violence is urgently required to reduce barriers for disclosure, improve the

delivery of victim support services and inform prevention efforts.

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## Supplemental Material

Supplementary material for this article is available online.

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**Carolyn Hamilton**, LLB, Barrister of the Supreme Court, DBE is a Professor Emeritus of Law at the University of Essex, a fellow of the Human Rights Centre, and the director of International Programmes and Research at Coram Children's Legal Centre. She was the senior legal adviser to the Children's Commissioner and served as the children and families commissioner to the Legal Services Commission. She has practiced in the English courts as a child lawyer, taking cases on children's rights to the Supreme Court. She has worked as a consultant to United Nations Children's Fund (UNICEF) and other UN bodies for the last 20 years. She specializes in analytical research and has published numerous study papers on subjects ranging from children and counterterrorism to violence against children in and around educational settings. Her work on a range of children's rights has been widely published and includes "Family, Law and Religion;" "Family Law in Europe;" Guidance for Legislative Reform on Juvenile Justice

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**Ben Mathews** is a professor in the School of Law at the Queensland University of Technology (QUT) in Brisbane, Australia, and is a senior research fellow in the QUT Faculty of Law. His research focuses on multidisciplinary and empirical research at the interface of law and child maltreatment, with an emphasis on the prevention, detection, and response to child abuse and neglect by legal and social systems. He has published 15 government reports, 65 refereed scholarly articles and book chapters, and over 20 law reform submissions. He is an adjunct professor in the Bloomberg School of Public Health at Johns Hopkins University, a professorial fellow to the Australian Government Royal Commission Into Institutional Responses to Child Sexual Abuse, and the member of two World Health Organization Guideline Development Groups on child maltreatment.

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