


Prevention of online sexual abuse: What do Chilean adolescents propose?

Prevención del abuso sexual online: ¿Qué proponen los adolescentes chilenos?

Cristóbal Guerra  * Universidad Santo Tomás, Viña del Mar, Chile (cguerravio@yahoo.es)


Edgardo Toro  Escuela de Trabajo Social, Pontificia Universidad Católica de Valparaíso, Chile (edgardo.toro@pucv.cl)

Cristian Pinto-Cortez  Escuela de Psicología y Filosofía, Universidad de Tarapacá, Arica, Chile (cpinto@academicos.uta.cl)


Angelica Fernández  Escuela de Psicología, Universidad Santo Tomás, Viña del Mar, Chile
(a.fernandez5@alumnos.santotomas.cl)

Geraldine Martínez  Escuela de Psicología, Universidad Santo Tomás, Viña del Mar, Chile (geraldine.mart21@gmail.com)


Maira Ramirez  Escuela de Psicología, Universidad Santo Tomás, Viña del Mar, Chile (maira9noelia@gmail.com)

Elizabeth Swiergala  NHS Borders, Scotland, United Kingdom (e.swiergala@hotmail.co.uk)

Claudia Melo  Escuela de Psicología, Universidad Santo Tomás, Viña del Mar, Chile (c.melo2@alumnos.santotomas.cl)

Carolina Alcorce  Escuela de Psicología, Universidad Santo Tomás, Viña del Mar, Chile
(carolinaalcorce.tupsicologa@gmail.com)

Cherie González  Escuela de Psicología, Universidad Santo Tomás, Viña del Mar, Chile (psicologa.cherie@gmail.com)

Magaly Retamal  Colegio Nuestra Señora y Madre del Carmen, Melipilla, Chile (mretamal@colegionsv.cl)

*Autor para correspondencia.

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ABSTRACT

The prevalence of online sexual abuse (OSA) is high worldwide. In Chile, law No. 20,526 seeks to punish sexual harassment, virtual child pornography and possession of child pornographic material. The evidence shows that preventative strategies, aiming to combat OSA, are ineffective, mainly due to their adult-centric logic. For this reason, this study aims to describe the preventive strategies that adolescents are familiar with and which ones they propose. Eighty-two adolescents answered a qualitative online survey. The thematic analysis shows that adolescents propose to prevent OSA by fostering dialogue within the family -balancing supervision with support- instead of imposing rigid norms. The adolescents further suggest incorporating the school community into this dialogue and that the strategies be continuous, in interactive and motivating formats, rather than rigid and scholarly.

Keywords: online sexual abuse, parental supervision, prevention, social support

RESUMEN

La prevalencia del abuso sexual online (ASO) es alta en todo el mundo. En Chile, la Ley No. 20,526 busca castigar el acoso sexual, la pornografía infantil virtual y la posesión de material pornográfico infantil. La evidencia muestra que las estrategias preventivas suelen ser ineficaces, principalmente debido a su lógica adultocéntrica. Por ello, este estudio tiene como objetivo describir las estrategias preventivas que conocen los adolescentes y cuáles proponen. Ochenta y dos adolescentes respondieron una encuesta cualitativa online. El análisis temático muestra que los adolescentes proponen prevenir la ASO fomentando el diálogo en el seno de la familia -equilibrando la supervisión con el apoyo- en lugar de imponer normas rígidas. Los adolescentes sugieren además incorporar a la comunidad escolar en este diálogo y que las estrategias sean continuas, en formatos interactivos y motivadores, más que rígidos y escolarizantes.

Palabras clave: abuso sexual online, apoyo social, prevención, supervisión parental

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Information and communication technologies (ICTs), the internet, and particularly mobile phones, play an ever-increasing role in the lives of adolescents across the Globe (Livingstone & Smith, 2014). Based on a nationwide survey of 3600 Chilean households, an estimated 94% of students can access the Internet at home, and of those, 88% do so daily (Cabello-Cádiz et al., 2017; SUBTEL & Brújula, 2017).

As with any tool, the internet offers multifaceted benefits and associated risks. Internet is an arena in which adults and adolescents can interact without supervision, what has been associated with the risk of suffer sexual abuse given sexual perpetrators have adapted their methods to the online world (Koçturk & Yuksel, 2018; Livingstone & Smith, 2014).

Child sexual abuse (CSA) has been described by Finkelhor (1999) as a sexual interaction with a child where there is a large difference in age or maturity. By extension, online sexual abuse (OSA) has been defined as an instance of sexual abuse mediated by technology (Quayle & Sinclair, 2012). OSA is also termed a “technology-facilitated child sexual exploitation and abuse” and encompasses all kinds of sexual abuse or exploitation against minors under 18 years of age that is totally or partially facilitated by technology, through the Internet or other wireless communications (UNICEF, 2021). Such forms of OSA can vary from the level of being unwillingly exposed to pornography, to online sexual harassment, online sexual solicitation, online sexual exploitation, and child grooming (Ramiro et al., 2019). It is also the case that children and/or adolescents themselves can create sexually explicit content with the aim of sharing it with their peers, and that this material can be uploaded to the Internet. In doing so it can then be used for more illicit purposes associated with, for example, child pornography or the commercial sexual exploitation of children through online networks. In turn, it is internationally recognized that every time this content is then downloaded or disseminated, the sexual victimization of the young person, or persons, involved can be spread across the Internet (UNICEF, 2021).

Internationally, the prevalence of OSA is estimated to be between 13% and 61% (Dahlqvist & Gådin, 2018). Within Chile, the prevalence of OSA lies between 8% and 20% (Pinto & Venegas, 2015; Arias Cerón et al., 2018), although a recent study shows that 38.4% of the adolescents surveyed indicated that adults have sent them messages through social networks to initiate contact of a sexual nature, or flirt, and 15.3% indicate that these adults have pretended to be underage (Guerra et al., 2021).

Regarding the characteristics of the aggressor, another recent Chilean study involving 3,063 adolescents who had suffered online sexual harassment across their lifetime reported that in 37.6% of the cases the offender was a male under 18, in 22.4% an adult male, in 14.5% a female under 18, and in 2.9% an adult female. In 22.5% of cases the offender could not be identified (Guerra, Pinto-Cortez et al., 2021).

In addition to the high prevalence already described, it must be considered that the consequences of OSA are similar to the consequences of offline CSA, including depression, post-traumatic stress disorder, externalizing behaviour and substance use (Guerra et al., 2020; Say et al., 2015). The consequences of OSA for the victim can include an inherent feeling of helplessness, this is especially so when there are pictures or videos with sexual content of the child or adolescent that are being made available on the Internet. In these cases, the victims can then inherently feel as though anyone could potentially access the material, creating a perpetual feeling of fear. A fear that, for example, the material will continue to spread further, and without end, among social networks. If this happens, the victims involved can in turn experience and suffer from symptoms associated with re-victimization, potentially increasing post-traumatic symptoms (Guerra, & Pereda, 2015).

For this reason, it is necessary to develop prevention and early detection strategies for OSA. These strategies can be aimed at both preventing aggressors from acting, or allowing early detection of their crimes, through legal and police actions. For example, in Chile there is the law number 20,526, which seeks to punish sexual harassment, virtual child pornography and possession of child pornographic material. Furthermore, there is a Police department specialized in Cybercrime, who investigates crimes

associated with OSA (Abarca-Arévalo & Conde-Abeliuk, 2019). There are also technology-based measures to block online attackers, for example, parental control applications and software that allow parents to block inappropriate websites (NetClean, 2018).

It has also been suggested the develop of prevention strategies aimed directly at the children. These strategies are oriented to improve the education and awareness of OSA, in order to reduce online risk behaviours in children and adolescents. Evidence reveals that, just as with offline CSA, online risky behavior can increase the likelihood of OSA (Aljuboori et al., 2021; Guerra et al., 2019). For example, seeking contact with strangers in online chatrooms, giving out personal information (Livingstone et al., 2011), creating and reproducing online images of oneself in a sexy or provocative attitude (Cooper et al., 2016), as well as the burgeoning phenomenon of internet addiction (Dönmez, 2020) have all been shown to increase OSA. These risky behaviors may be due to the child's ignorance of the dangers in the online world or to reckless behavior, so it is important that prevention programs help children to know what online risk behaviors are and how avoid taking part in them. This will allow adolescents themselves to prevent online risk behaviors and encourage them to disclose OSA earlier if it occurs (Katz et al., 2021).

Unfortunately, the evidence shows that prevention-oriented strategies based on improving education and awareness are not entirely effective. Patterson et al. (2022) searched the existing literature on prevention methods for OCSA. This search revealed ten prevention programs carried out between 2009 and 2020 across Australia, Europe and the United States, however, studies were not found within Latin America. Such programs sought to increase children and adolescents' knowledge, both about OSA and how to prevent it, mainly by reducing risky behaviors and promoting early disclosure. The authors concluded that while the interventions seemed to improve knowledge retention of online safety, there was no significant change in risky online behavior. Among the reasons analyzed to explain the lack of effectiveness, the authors mention that such strategies have been designed by adults, without involving young people, and as such the strategies can be considered boring or are not fully understood by the younger participants. The authors go on to suggest that it is important that, going forward, strategies are co-designed along with adolescents, so that they employ more relevant language, and be more age-appropriate, in the hope of achieving optimal engagement. The findings also highlight the importance of educating not only the children involved, but also peers, the parents and other adults who work with them as well.

This identified need, to involve adolescents in co-designing preventive OSA strategies, can be justified from different points of view. First, we can consider that participation is a fundamental right enshrined in the international convention on the rights of children and adolescents (United Nations Organization (UNO), 1989). In line with this, within Chile, the Ministry of Health shows a keen interest in promoting the participation of adolescents in health policy, especially in relation to the design of prevention strategies and promotion of healthy habits. It is also estimated that by using such a collaborative approach, the strategies will be made more effective to this age group (MINSAL, 2021). Second, it is important to consider the generation gap between adolescents and adults and their use of the Internet, and how this affects their knowledge of what happens on the Internet, and in turn how to prevent the associated risks of being online. Adolescents have been described as digital natives, with a much greater knowledge of the dynamics and functioning of the Internet than adults. Adults can therefore be considered digital immigrants, with less knowledge of what is happening in the online world (Lobos-Sucarrat, 2021). For this reason, the recommendation to listen to adolescents, who are more expert in the online world, and work to generate a dialogue, serves the aim of designing more effective strategies to promote the appropriate use of technology and to prevent OSA (Toro & Guerra, 2021). Third, the mentioned generation gap between adults and adolescents has to do with more than just their differing approaches to using technology. Young people have a better grasp of the most current, and relevant, language of other young people. In this way, they can make a great contribution in designing strategies that can exhibit a more persuasive language, form, and as such more influential content for their peers (Shalaby, & Agyapong, 2020). In fact, the importance of peer-support is further relevant within the

domain of OSA, as it has been found that adolescents tend to trust their peers with a disclosure of OSA more than their parents (Manrai et al., 2021).

Co-designing preventive strategies and interventions with young people is widely recommended within healthcare (Thabrew et al., 2018), however, to our knowledge, there are no successful experiences of co-design preventive strategies to prevent OSA. For this reason, the central question this paper asks is: What do Chilean adolescents suggest could improve the design of OSA prevention strategies?

This study aims to describe the evaluation that Chilean adolescents make of traditional preventive strategies and make visible their suggestions on how to design more effective strategies. However, this study does not intend to carry out the specific design of suggested strategies, it intends to make the opinions of adolescents more visible. In the hope of creating an essential first step towards a future that incorporates more co-designed preventive strategies. It is expected that this information will be used for the generation of new plans or programs for the prevention of online sexual abuse in the national and international context.

Method

Design

This is an exploratory qualitative cross-sectional study, collecting primary source data through a survey in Google forms. As this paper aims to best harness and describe the opinion of the participants, a thematic analysis has been chosen as the most appropriate analysis strategy, rather than other more interpretative qualitative analysis strategies.

Participants

Students ($N= 290$) from a private subsidized school in the Metropolitan Region of Chile were invited to participate in this study. The only inclusion criteria being that the students wanted to participate and that their parents or guardians authorized their participation. Participants were 82 (65.9% female, 13.4% non-binary gender, 12.2% prefer not to say their gender, and 8.5% male). The ages of the participants fluctuated between 12 and 17 years ($M = 14.00$; $SD = 1.05$) and they were from the eighth grade of basic education, (this can be considered equivalent to second year of secondary school in the UK) to the fourth grade of secondary education (equivalent to sixth year of secondary school in the UK).

Instruments

Open question questionnaire on experiences of prevention of online sexual abuse and on proposals for effective prevention. This survey was created by the research team and then subjected to content validation by two expert judges on adolescent OSA. This includes 6 open questions that seek to explore what type of preventive strategy adolescents know and how they evaluate them (*How do your parents / guardians help you to prevent internet risks and prevent online sexual victimization? How effective do you think they are? In your current school (or in other schools you have been), what has been done to prevent internet risks and prevent online sexual victimization? How effective do you think it is? What preventive measures of online sexual victimization have you seen in the media, on the Internet or elsewhere? How effective do you think it is?*). There are three additional questions that seek to understand the recommendations that the adolescents make regarding future preventive strategies for online sexual abuse (*What parents or adults should do to prevent adolescents from experiencing online sexual victimization? What would you suggest preventing online sexual victimization in your school? How should be the prevention campaigns against online sexual victimization?*).

Procedure

The participation of an educational establishment in the Metropolitan region was requested. Given that this study addresses sensitive issues, a research protocol was developed in coordination with the director of the school, the secondary education coordinator and the school' social worker, in order to: i) Agree

on a mechanism to do the recruitment, to request the informed consents and assents, and to apply the instrument; ii) Generate a support protocol for adolescents who may eventually require additional guidance on the subject. The research protocol was evaluated and approved by the North Central Zone ethics committee of the Universidad Santo Tomás.

This study was carried out during the COVID-19 pandemic, and as such, due to the impact of lockdown policies, it was agreed carrying out an online survey would be the best and most efficient research strategy. To help make the participation process easier, and to prevent the adolescents from having direct contact with researchers (adults who are unknown to them) recruitment of the adolescent participants was mediated by the head teachers of each course. This involved the researchers' sending information about the study to the headteachers, so that they could in turn send this information on to the parents of all the students (from the 8th grade of basic education up to the 4th grade of secondary education). The following material was sent via this method: an information sheet, an audio explaining the study and a link to the informed consent form for the parents. The informed consent included details of the study, potential risks, and the contact email and telephone number of the principal investigator. Then, and only in those cases in which the parents had given their consent, the head teachers were asked to send the link with the informed assent and with the online survey to the students by their formally registered school email address.

Both in the informed consent and in the informed assent it was pointed out and made apparent that the survey was about issues surrounding OSA. It was stressed that participation would be voluntary, anonymous and that the adolescents could stop answering the survey if they wanted to. A recommendation was also made, that if the adolescents felt that answering these topics could affect them emotionally, it was better that they do not proceed. Both documents included the telephone number and email address of the school counsellor, whom it was previously arranged would be available to be contacted in case there were adolescents who required individual guidance associated with OSA. It was also explained that the adolescents could go to the school counsellor to receive guidance or be referred to specialized care if necessary. The main researcher -a clinical psychologist specializing in the care of victims of CSA- remained available to be contacted and help manage referrals if necessary.

Finally, to make the collected data most useful to the participants, it was agreed that after data collection, a report would be sent to the school. In this report, the adolescents' opinions about appropriate ways to prevent OSA were described, ensuring it wasn't possible to identify any individual, as the application process was itself anonymous. The findings of the report were then explained to the school counsellor, who would be able to use it with both students and parents, as a way of reflecting on the risks of using the Internet, and of preventing OSA.

Data analysis

The participants' responses were then analysed using thematic analysis (Braun & Clarke, 2006), the questions themselves being previously described in the instrument's section of this paper. Following Braun & Clarke (2006), the thematic analysis followed six steps that allow for accurate collection of the participant's opinions: 1. familiarization with the data set by reading participant responses several times; 2. generation of initial codes; 3. collation of codes into potential themes; 4. revision of the themes; 5. definition and nomination of the themes; and 6. selection of quotes from the data set. These verbatim quotes -originally in Spanish-, were then translated into English. In this way an exploration of the OSA prevention methods that the adolescents were familiar with was carried out, in addition to gathering information about their suggestions for increasing the effectiveness of OSA prevention methods.

To reduce personal biases, the categorization of different segments of the data set was carried out by at least two researchers. Triangulation was performed between them, in such a way that significant differences in the analysis criteria were resolved with the help of a third researcher (Aguilar-Gavira & Barroso-Osuna, 2015).

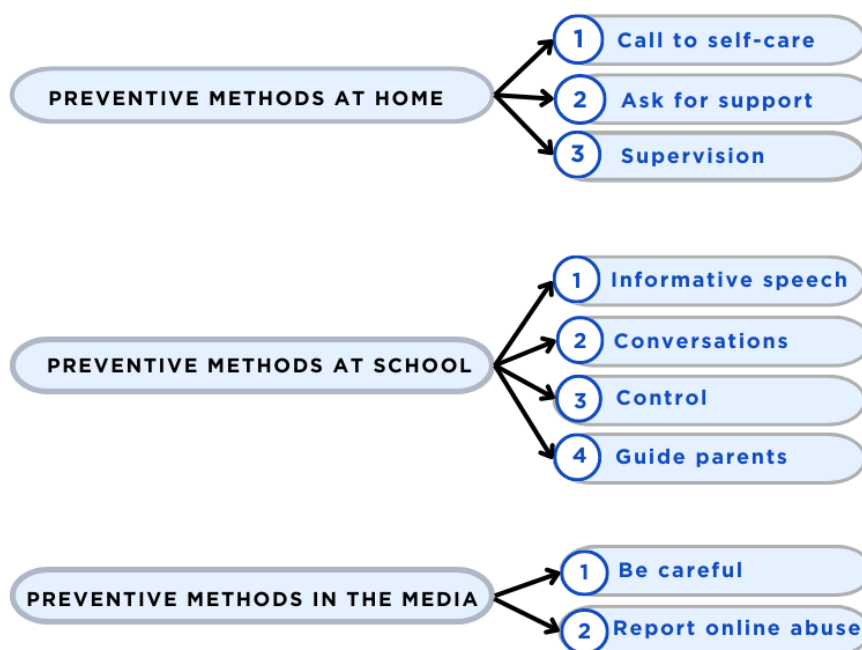
Results

This thematic analysis aimed to identify preventive methods, as recognised by adolescents (see figure 1) in addition to preventive methods more specifically recognised by adolescents in the context of the home, at school and in the media (see Figure 2). These results are further elaborated below.

Preventive methods at home

Preventive methods at home refers to the prevention strategies commonly used by parents, or adults more generally, in the home. It is necessary to point out that 8.5% of the participants reported that there are no preventive measures at home and 91,5% described some preventive measures at home. The identified preventive measures can be organised into three broad themes: 1) Call to self-care; 2) Ask for support; 3) Supervision.

Figure 1
Preventive strategies at home, school and media



We can understand the ‘Preventive methods at home’ theme “call to self-care”, as involving those instances when parents more explicitly advise adolescents to take care of themselves online in order to prevent OSA. Such directive self-care measures, recommended by parents, are orientated towards ensuring the adolescents be cautious on the Internet and remain wary of strangers. This theme is recognised in 88.96% of the answers of participants who indicate that their parents suggest them to avoid contact with people on social networks that they do not know in person, warning about probable false profiles of potential aggressors. Adolescents also note that their parents’ advice a cautious use of Internet, not sharing compromising photos, not giving personal information, and maintaining an attitude of general distrust regarding the pages or content reviewed. For example:

Que no le hable a gente que yo no conozca y que si me llegan a mandar mensajes no los conteste y trate de bloquearlos para que no me sigan mandando mensajes. Y que no me crea todo lo que aparece en las redes sociales [That I do not have speak to people that I do not know and that if they send me

messages, do not answer them and try to block them so that they do not continue to send me messages. And, I do not should believe everything that appears on social networks]. (Participant 25, 15 years old, Female).

In terms of the second theme “ask for support”, the adolescents indicate that their parents tell them that they should inform them what they do on internet and report any unpleasant or risky experiences. This theme is recognised in the answers of 8.5% of participants. For example: “Tengo que cuidar con las personas que hablo, y si veo algo extraño decirles o simplemente tengo que bloquearlos y reportarlos” [“I have to be careful with the people I talk to, and if I see something strange tell my parents or I just have to block and report them”] (Participant 17, 14 years old, female).

Within the third theme, “supervision”, participants indicated that their parents tended to supervise their activities on the Internet, for example, by checking their cell phones or their social networks. In contrast to the previous two themes, “supervision” was recognised in only the answers of 4.1% of the participants. For example: “solo puedo tener whatsapp y me revisan constantemente el celular y están pendientes cuando me ocurre algo” [“I can only have whatsapp and -my parents- constantly check my cell phone and are attentive when something happens to me”] (Participant 39, 13 years old, female).

Preventive methods at school

Among the participants, 19.4% indicated that preventive measures are not carried out within their schools. The remaining 80.6% describe prevention strategies within schools as being grouped into four themes: 1) informative speech; 2) conversations; 3) control; 4) guide to parents.

The first theme is “informative speech”. The participants reported that these strategies are face to face, in the form of informative talks where a large group of students meet to listen to an expert with a low level of interaction with him, or directly through the exhibition of informative videos. This is observed in the answers of 52.3% of participants. Example: “Se ha hecho una que otra charla que suelen siempre decir lo mismo” [“there has been just few talks that usually always say the same thing”] (Participant 37, 16 years old, female).

The second theme is “conversations”. This refers to more interactive conversational spaces in which teachers and students can talk about online risks and OSA prevention. In these conversations students have a more active role and can give their opinion, ask questions, reflect, and share experiences. These strategies are reported by 10.4% of the participants. Example: “Sí, lo hemos trabajado en el taller de orientación” [“Yes, we have worked on it in a workshop about orientation”] (Participant 69, 13 years old, female).

The analysis recognized a third theme nominated as “control”. This theme is represented in the 6% of the answers of participants and indicate that there are concrete measures to prohibit or regulate the use of mobile phones within the school. For example: “No nos dejas abrir las redes sociales en los computadores” [“They don't let us open social networks on computers”] (Participant 64, 13 years old, female).

Finally, only 1.5% of the participants realize that preventive activities are directed to “guide parents” (or guardians) in order to give them skills to be able to support their children in the responsible use of the internet. Example: “Hablar con nuestros padres” [“Talk to our parents”] (Participant 79, 13 years old, LGBT+).

Preventive methods seen in the media

From the total of participants, 36.7% indicate that they have not seen any preventive measures or formal campaign prevention in the media. The 63.3% have seen preventive strategies in the media (mainly videos, guidance or reports in the news and social networks). The analysis shows two themes: 1) Be careful; 2) Report online abuse.

The first theme -“Be careful”- is observed in the responses of 44.9% of the participants. This theme captures the impact of mass media (radio and/or television) prevention campaigns as understood by the participant adolescents. For the participants, these campaigns were understood to communicate the message that the Internet is dangerous and that adolescents should be wary of potential online criminals. For example: “He visto en la televisión que no hablemos con extraños y que nos cuidemos” [“I have seen on television that we should not talk to strangers and that we take care of ourselves”] (Participant 82, 13 years old, LGBT+).

The second theme is concerns “report online abuse”. This theme is present in the answers of 18.3% of participants and is captures the idea that cases of OSA should be communicated to law enforcement to not only protect the victim, but to more broadly prevent further victimization in future: “En internet me he encontrado imágenes que ayudan... son como guías de lo qué debes hacer en caso de sufrir acoso sexual cibernético, de como reportarlo a la policía” [“On the internet I have found images that help..., they are guidelines to what should you do in case of cyber sexual harassment. How report it to the police”] (Participant 8. 15 years old, female).

Preventive methods suggested by adolescents at home

Although most (89%) of the participants consider the strategies at home effective, they also provided recommendations on how such strategies could be improved. Participants note that prevention at the family level should be improved on three themes: 1) Greater supervision; 2) Deep dialogue; 3) Promote relationship of trust.

First, most of them (62.6%) point to “greater supervision”, that is referred to concrete actions that allow parents or responsible adults to regulate the use of the Internet and to know what adolescents do on the web, what pages they visit, what type of material they send or exchange and with whom to speak: “...mejorar la seguridad, estar al tanto de lo que hacen los niños en los celulares, computador etc.” [“...improve children safety, be aware of what children are doing on cell phones, computers...”]. (Participant 49, 15 years old, Male).

In addition, 25.3% of the participants propose to complement this supervision with instances of “deep dialogue” that allow them to go beyond the simple adult discourse, allowing the adolescent to share experiences, ask questions, give opinions and debate: “Yo creo que hablar con los hijos y preguntarles que opinan de estas cosas...” [“I think that it is necessary talk with the children and ask them their opinion about these things...”] (Participant 2, 15 years old, female).

Finally, a 25.3% highlights the need for parents to “promote relationship of trust” with their children. The participants explained that the parental control or parental supervision is highly necessary, but without invading the privacy of adolescents. Instead, parents should promote relationship of trust that make the adolescent not feel threatened by their parents and have the confidence to ask for advice or tell them when something bad happens:

Hablar del tema, no evitarlo, es importante hablar de ciertos temas. Hacerle sentir a tu hijo o hija confianza y seguridad de que puede contarte las cosas... [Talk about the topic, not avoid it, it is important to talk about certain topics. Make your child feel confident and secure that he can talk to you about these things... (Participant 4, 14 years old, prefers not to say his/her gender).

Preventive methods suggested by adolescents at School

The majority, (68.4%) of participants consider preventive strategies used by schools to be effective and went on to suggest four broad categories of measures used within this setting. 1) Permanent measures; 2) Possibility of expressing own ideas; 3) Increasing supervision and control; 4) Integrate the entire educational community

First, 45.8% suggest that informative talks, videos, or brochures should be “permanent measures”. Adolescents proposed these strategies should be done more frequently, as permanent school activities:

Charlas más profundizadas y recurrentes en todos los cursos, no sólo en cursos mayores, porque niños de 3o. o 4o. básico ya usan actualmente el Internet y redes sociales [More in-depth and frequent talks in all courses, not only in older courses because smaller children also use the Internet and social networks”]. (Participant 27, 16 years old, female)

Likewise, 40.9% indicate that informative talks should be complemented with spaces for “deeper dialogue” where students also have the possibility of expressing their own ideas and emotions regarding OSA, as well as having the opportunity to feel the support of the educational community. These instances of deep dialogue could take the format of workshops, group dynamics, games, reflective work in small groups, orientation sessions or individual work with a school psychologist, or have access to a web page where adolescents can make consultations anonymously: “No estoy segura, quizá hacer talleres grupales para poder explicar a fondo lo qué es, y hacer una actividad participativa en la que todos den su opinión o sus experiencias libremente” [“I’m not sure, maybe doing group workshops to explain in depth what is OSA, and doing participatory activities in which everyone can give their opinion or share their experiences freely”] (Participant 7, 15 years old, female).

A smaller proportion (14.8%) of the participants suggest “increasing the measures of control” and supervision of the use of social networks. For example: “Tener mayor control sobre todo, de los ‘chats’ con los que se pueden comunicar los estudiantes...” [“Have more control over all, the chat rooms with which students can communicate...”] (Participant 6, 14 years old male).

The fourth theme, “integrate the entire educational community” was seen in 14.8% of participant answers, and refers to the need to improve efforts by schools to integrate the entire educational community behind preventive measures – including not only adolescents, but also young children, teachers, parents, and guardians: “Mantener talleres a todas las personas, no solo a los estudiantes... dando charlas también a los padres, profesores...” [“Hold workshops for everyone, not just students... also giving talks to parents, teachers...”] (Participant 71, 13 years old, female).

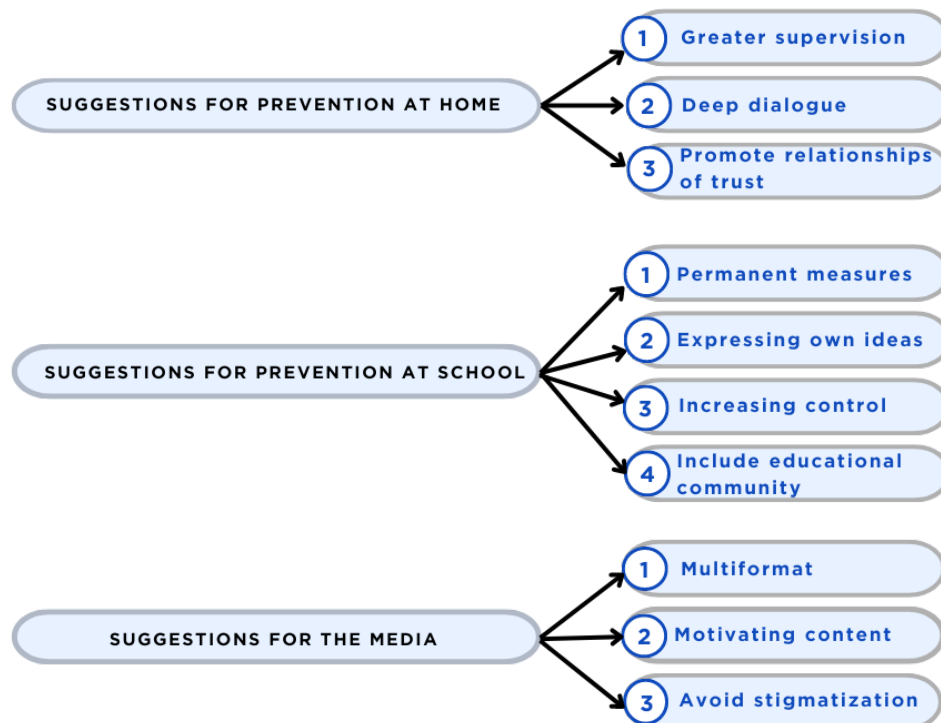
Suggestions to preventions at the media

In terms of preventive strategies employed by the media, 62.8% of participants consider these to be effective. With participants going on to offer suggestions for improvement that can be grouped into three themes: 1) Multiformat; 2) Motivating content; 3) Avoid stigmatization. Regarding the first theme, 65% of the participants emphasize that prevention by the media should have a “multiformat” that combines different modalities (videos, posters, audios, reflective proposals, documentaries) and that they are aimed at different audiences (youth, children, adults) and not only to adolescents: “En todo tipo de medios comunicativos... revistas, redes sociales, televisión, videos” [“In all types of media... magazines, social networks, television, videos”] (Participant 16, 15 years old, male).

In the second theme, 40% of the participants indicate that the preventive campaigns must have a “motivating content”. This implies that it has a concrete content, and instead of delivering evasive and abstract messages, the subject of the OSA is discussed directly, with real examples or testimonies from people who suffered OSA. At this point, for participants it seems important that the preventive strategies within the media refer both to how to prevent OSA and the actions to take in the event that a person has been a victim: “Con hechos reales y con apoyo para las personas que sufren o sufrieron por victimización sexual online” [“With real examples and with support for people who suffer or suffered from online sexual victimization”] (Participant 46, 14 years old, female).

Finally, a small proportion of participant (6%) highlight the media should “avoid that the adolescents feel stigmatized” or ashamed of the issue, so that if it happens to them, they dare to ask for help: “Deben dar información, consejos y no juzgar a nadie por lo que le pase, incluso si la persona dio consentimiento y luego se arrepintió” [“They should give information, advice and not judge anyone by what happened, even if the person gave consent and later regret] (Participant 81, 13 years old, female).

Figure 2
Preventive methods suggested by adolescents



Discussion

The objective of this study was to learn about the evaluation made by Chilean adolescents of OSA prevention strategies in Chile and to identify suggestions on how to carry out more effective prevention strategies. In this regard, we have found that adolescents report a greater presence of preventive strategies in the family context (91.5%), followed by the presence of preventive strategies in the school context (80.6%) and finally less presence of preventive strategies in the mass media or large-scale formal campaigns in the media (63.3%). The fact that preventive strategies exist more frequently within the family is a positive aspect, since it has been shown in other studies that family support is a protective factor against OSA and online risk behaviors (Aljuboori et al., 2021). The same happens with the school context, since it has also been shown that school connectivity can have a significant influence in reducing online sexual victimization (Kim et al., 2020).

The importance of carrying out preventive activities that integrate the family and adult members of the school community has been highlighted as an effective strategy for OSA prevention (Patterson et al., 2022), and in fact it is something that the same participants of this study suggest. The participants in this study suggest that preventive strategies should encompass the school community, including children from the first grades up to the oldest pupils, in addition to including teachers and parents. The idea of including parents, teachers and other adults in preventive strategies is coherent with suggestions made

by previous authors, and links to the idea of there being a generational gap between parents (digital immigrants) and children (digital natives) in the use of technology (Lobos-Sucarrat, 2021). This gap could negatively affect the protective role of parents against the risks of Internet (Lobos-Sucarrat, 2021), and as such it is vitally important that preventive strategies allow people from different generations, and with different backgrounds to have a common understanding about online risks and OSA, that promotes an effective conversation about prevention (Toro & Guerra, 2021).

In the case of prevention strategies through mass media campaigns, 36.7% of the participants indicated that they have not seen any preventive measures or formal campaign prevention in the media. This is concerning given that the mass media have a high impact on the community and can play a positive role in the prevention of OSA, as has been shown by evaluating their impact on offline abuse (Kitzingern & Skidmore, 1995). The mass media also have a responsibility to educate society about what OSA is and its consequences (Saunders and Goddard, 2002).

It is necessary to remember that it is still common for society to be unaware of how harmful OSA is, and that part of the population continues to believe that if there is no physical contact, it may not be something serious (Whittle et al., 2013). Such beliefs then decrease the probability that OSA victims will report what happened to them and ask for help (Manrai et al., 2021), which is why it is important that the mass media contribute to educating the population on these sensitive issues.

Considering the above, the mass media should increase their efforts to prevent and promote safe use of the Internet, as suggested by other authors (Chawki, 2009). The participants of this study suggest that these campaigns should be permanent and that they should address the problem with clear and direct language in order to capture the attention of different audiences -children, youth and adults- through different forms of influence (e.g., posters, documentaries, videos) and different media platforms (internet, tv, radio).

Regarding the specific prevention strategies that they receive from the adults around them (family, school, and the media), adolescents report that these are oriented towards messages related to the need to take care of oneself, to remain beware of strangers, and to avoid risky behaviors (not sharing photos and reporting unpleasant people and encounters). These results are in line with what was previously stated regarding the importance of avoiding risky behaviors on the internet (Aljuboore et al., 2021; Guerra et al., 2019; Livingstone et al., 2011). However, the adolescents in this study indicate that their parents and adults in general only deliver the message in form of speeches (or sermons) and that there is little parental supervision. In addition, they report that there is an absence of dialogue between parents and adolescents so that they understand the reasons for preventive and self-care measures.

The evidence shows that the simple speech (or sermon) would be effective only for children and adolescents to increase their knowledge about the risks, but without dialogue and greater reflection on their part, this speech does not prove as effective in generating real behavioral change and a consequent decrease in risk behaviors (Patterson et al., 2022). Consistent with this, Chawki (2009) indicates that it is necessary to generate instances for children and adolescents to reflect, debate and understand the reasons and meaning of preventive measures. In fact, the same participants in this study advocate that adults continue prevention using informative discourse, but also complement it with more concrete supervision and with more dialogue that allows adolescents to better understand the meaning of the preventive measure and also participate in its design. In this sense, Toro and Guerra (2021) suggest maintaining a balance between control (active supervision) and support (empathizing with the needs of adolescents in social networks), and that it varies according to the age of the child, following the principle of progressive autonomy. That is, greater active control in young children (e.g., review of mobile devices, review of contact lists on social networks, rigorous limitation of internet hours per day) and a gradual transition to autonomy and greater confidence in adolescents (with less invasive monitoring).

On the other hand, it is noteworthy that both in the evaluation of family, school and mass media prevention measures, there is a tendency to prevent interaction with strangers, mainly adults, without considering that online violence can be committed also by known people or peers (Guerra, Pinto-Cortez et al., 2021). This trend has already been observed in offline abuse prevention strategies and shows how little knowledge Chilean society still has of the context in which sexual abuse occurs (Mella & Rebolledo 2020). In this sense, it is important that researchers are able to deliver evidence-based information to the community (including families, schools and the media) about the forms that OSA takes, the profiles and strategies of the aggressors, that this information can be used in the prevention of OSA with a multiple focus. An example of a positive experience in this regard is the “Guía foto-respeto” (a guide for a respectfully use of images, Pincheira et al., 2021), which systematizes information based on evidence in a series of recommendations for the media, parents, and young people to make responsible use of images in the media and prevent experiences of abuse.

Although this study is carried out with a non-representative sample of Chilean adolescents -so the results cannot be generalized to the population- the information is also useful for designing preventive strategies. It is concluded that prevention strategies should target multiple audiences (children, adolescents, parents, school community), which leads to the challenge of differentiating the language and format of the strategy in order to better impact each specific audience. In addition, the strategies should be -as far as possible- designed while taking into account (or even co-designed with) the opinions of children and adolescents in order to generate more motivating content for them, this would in turn help to counter the generation gap with parents or adults, in particular more autocentric adult strategies of prevention. Likewise, adults (parents and teachers) should maintain a balance between supervision, trust, and support in order to generate spaces for in-depth conversation with adolescents regarding the risks and prevention strategies of OSA. Future studies should focus on the design and evaluation of these strategies in order to create an evidence-based prevention policy.

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