

# CHILD SEXUAL ABUSE IN CROATIA: A SYSTEMATIC REVIEW OF RESEARCH

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**Popović, Stjepka**

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# CHILD SEXUAL ABUSE IN CROATIA: A SYSTEMATIC REVIEW OF RESEARCH

## ABSTRACT

*A systematic review of child sexual abuse (CSA) research in Croatia is conducted in order to detect CSA studies published since 1990 and research trends, to develop a framework of CSA research, to identify seminal studies, authors, dominant research focus, perspective and participants, to evaluate methodological approaches, research design, CSA conceptualisation, instruments, sampling methods, and to establish what we know so far about CSA in Croatia. International and Croatian databases were searched using keywords in the following order: WOS, Scopus, EBSCO Discovery Service, Hrčak and Croatian scientific bibliography. The search was done in April 2017 on the basis of a priori study selection criteria for the time period 1990 to 2016. In order to estimate the quality of the existing CSA research, different types of studies are evaluated according to research methods. The systematic review included 26 CSA research projects in Croatia published in English and Croatian language that meet the eligibility criteria, or 23 unique ones when validation studies are excluded. The framework of CSA research in Croatia is developed and the main findings highlighted: (1) CSA prevalence research in the population using anonymous self-reports (n = 7); (2) CSA research with helping professionals working with children (n = 9); (3) research of reported and confirmed CSA cases (n = 7). Research gaps and recommendations for further research and practice are emphasised.*

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<sup>1</sup> Stjepka Popović, sociologinja, e-mail: stjepka.popovic@medri.uniri.hr

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Stjepka Popović<sup>1</sup>

University of Rijeka

School of Medicine

Department of Social

Sciences and Medical

Humanities

Faculty of Health Studies

Department of Public Health

orcid.org/0000-0001-5072-1103

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CSA prevalence, CSA  
characteristics, attitudes  
towards CSA.

## INTRODUCTION

Data on prevalence, trends, and characteristics of child sexual abuse (CSA) play a critical role in defining child sexual abuse as a social problem which implies societal level solutions in order to develop effective prevention policies and relocation of funding to child protection services. Although CSA can be found in all societies throughout history, recognition of CSA as a serious social problem is a recent achievement and has undergone all stages of what Fuller and Myers (1941, as cited in Ajduković, 2008) defined as a »life-cycle of social problems«. Before the 1970s, the general perception was that CSA prevalence is low, therefore scepticism about the existence of CSA resulted in labelling children as »liars« or as »perverted« (Bonnet, 2000). Kempe et al. (1962, as cited in Melchert, 2000) were the first to draw the attention of professionals to the problem of CSA - in 1965 they introduced the concept of »child abuse« in practice, although Ambroise Tardieu a century earlier had studied and described almost every type of abuse, including sexual abuse, but he was largely ignored (Labbé, 2005; Roche et al., 2005). Perception of child sexual abuse as a social problem begins at the end of the 70s when the first retrospective studies conducted in the population dramatically changed the face of CSA, confirming that it is much more widespread than it was once thought (Harrison and Morris, 1996). The first media reports on high prevalence rates and the problem of underreporting played a key role in alerting the public and policymakers (Painter, 1986). The shift of media attention towards the most brutal cases of abuse during the 80s caused growing public concern (Nelson, 1984, as cited in apud. Beckett, 1996). Weisberg (1984, as cited in Beckett, 1996) claims that inclusion of sexual abuse in the definition of child abuse was the achievement of feminist efforts, psychologists and social workers, while Finkelhor's (1990, as cited in Beckett, 1996) increased number of CSA reports attributes to new legislation being passed mandating that teachers, doctors, and other professionals report suspected child abuse (Beckett, 1996).

In order to achieve further implementation of the *Convention on the Protection of Children against Sexual Exploitation and Sexual abuse*, the Council of Europe (2010) started campaign »1 in 5« which is based on available estimates that 1 in 5 children in Europe today experience some form of sexual violence (contact or non-contact), and usually from an adult person they know and trust (70% to 85%). Besides individual level risks like age and disabilities, a number of social risks can contribute to CSA including family constellations, socioeconomic status, race and ethnicity (Putnam, 2001), social isolation and fragmentation of neighbourhood, political oscillations, war and conflicts (May-Chahal and Herczog, 2004), or lack of preventive programmes in school settings (Bilić, Buljan-Flander and Hrpka, 2012).

A review of meta-analyses confirmed the association between child sexual abuse and adult mental health difficulties (Hillberg, Hamilton-Giachritsis and Dixon, 2011). Recent systematic review and meta-analysis (2002-2012) confirmed a link between the experience of sexual abuse in childhood and high levels of depression, anxiety and distress in adults (Lindert et al., 2014). Besides victim's mental health, intrafamilial CSA can lead to the separation of children from their families (Sladović Franz and Mujkanović, 2003) or parental divorce which significantly contributes to poor mental health outcomes especially when in combination with child abuse (Afifi et al., 2009). The total social costs in dealing with the consequences of child sexual abuse cannot be determined because they involve costs in health, social and judicial systems. Reviews of disclosure research indicate that two-thirds of adults who have been abused as children reported that they did not disclose the abuse during childhood (London et al., 2005), so CSA costs remain obscure in those sectors and probably erroneously attributed to the other problems and issues which are a direct or indirect outcome of CSA. Hankivsky and Draker (2003) in their study of economic costs attributable to CSA in Canada for the fiscal year 1997-98 found preliminary cost estimate to exceed \$3.6 billion dollars annually in different policy areas. Since more than half of the children delay disclosure for 1 week to 2 years, and over 40% do not disclose unless they are prompted (Hershkowitz, Lanes and Lamb, 2007), many victims suffer undisclosed long-term abuse and not getting proper help.

## **DATA ON CHILD SEXUAL ABUSE IN CROATIA**

High-quality data on child sexual abuse (CSA) helps us understand CSA as a serious social problem which is crucial for improving prevention and policy efforts (Ajduković, Ogresta and Rimac, 2012). The available data on the prevalence and trends of CSA in Croatia are coming from two different sources: the scientific community and the institutions responsible for tackling abuse. Therefore, it is possible to identify two basic methodological approaches in the existing Croatian research of child sexual abuse, which differ in the type of research, purpose and certain methodological aspects: (1) scientific research in which data sources are children, students, parents/caregivers or professionals who work with children; (2) analysis of documentation of reported CSA cases (Ajduković, Ogresta and Rimac, 2012: 424). The aforementioned data differ significantly. The statistics of the competent authorities give an insight into the »known« cases (which are reported, regardless of whether CSA is confirmed or not). On the contrary, the epidemiological retrospective prevalence studies conducted on the population reveal a completely different face of CSA, they confirm that official data underestimate the real scope of the problem and that most cases of CSA never get officially reported. Moreover, institutions

responsible for collecting data are placed within different sectors that use different perspectives: (1) judicial perspective which deals with CSA as a crime in order to identify illegal behaviour and sanction the perpetrator; (2) health perspective which deals with CSA in terms of medical aspects of different forms of injuries which are usually absent in child sexual abuse cases; (3) social perspective which acknowledges CSA as a social problem that needs to be dealt with in collaboration with other sectors, consequences of the acts are considered to be as important as the act themselves, and professionals are interested in early prevention and detection (ChildONEurope, 2009: 16-18). Units of documenting differ in these three systems: judicial system registers a CSA incident, health system registers medical procedures and CSA victims, while social welfare system registers incidents of abuse, but since they work with victims, perpetrators and families, use of the term »CSA case« often obscures what is implied and makes it difficult to reach firm conclusions (Ogresta et al., 2012). Accordingly, judicial and health approaches are more focused on a curative level and tertiary prevention, while the social approach is interested in the creation of more comprehensive prevention, policies. In order to consider CSA as a serious social problem in Croatia, and not as a problem of »a few unfortunate children«, it is crucial to evaluate existing research data in order to establish what is known about CSA and to identify research weaknesses and gaps.

## **A SYSTEMATIC REVIEW OF CHILD SEXUAL ABUSE RESEARCH IN CROATIA AIMS AND METHOD**

Since the analysis in systematic reviews usually includes what is (un)known, uncertainty around findings and recommendations for further research and practice (Grant and Booth, 2009: 95), this systematic review of CSA research in Croatia had several specific goals: (1) to detect CSA studies published in Croatia and research trends since 1990; (2) to develop a framework of CSA research in Croatia; (3) to identify dominant research focus and research perspective; (4) to identify seminal studies and authors who contributed the most to CSA knowledge in Croatia; (5) to identify dominant methodological approaches and evaluate research designs; (6) to evaluate CSA conceptualisation and identify commonly used CSA instruments; (7) to identify study participants and evaluate sampling methods; (8) to establish what we know so far about CSA in Croatia. The main purpose was to assess the quality of existing CSA studies in Croatia and identify research gaps in order to develop recommendations for future research.

International and Croatian databases were searched in the following order: »Web of Science«, »Scopus«, »EBSCO Discovery Service«, »Hrčak database of Croatian

scientific journals« and »Croatian scientific bibliography«. The research included a search of titles, abstracts, full texts and the use of equivalent terms for the period 1990 to 2016. 1990 was chosen as the first year because it was the year of the first democratic elections in Croatia, and a year when the Convention on the Rights of the Child was adopted. Also, in 1989 the first systematic review of sexual criminal acts against children was conducted which had a big influence on professionals working in this area (Ajduković and Ogresta, 2010). Key words search included the terms: »child sexual abuse«, »sexual violence against children« and »Croatia«. Since Croatian databases include a smaller number of papers, additional keywords were used (»child abuse«). The search was done in April 2017.

The first phase of the search excluded duplicate articles that appeared in databases. The second phase included a screening of the titles and abstracts to exclude items that do not deal with CSA (papers dealing with other forms of abuse or violence against children or peer violence). The systematic review does not include: a) conference abstracts; b) papers which are not research of CSA or which systematise or describe existing knowledge about CSA; c) research of CSA not conducted in Croatia (e.g., research of CSA in Bosnia and Herzegovina are excluded); d) research in which the data on CSA were not separated from child abuse data in general or in which the data on rape were not separated for adults and children. The systematic review includes papers that are not categorised as original scientific papers, but they did have an analysis of reported cases of CSA. Finally, the systematic review included additional research found in the bibliography of research that entered the systematic review by the process here described and by contacting experts in the field of CSA in Croatia. The decision was made that the review would include only those additional references that would be found by keyword search, which means that some of the research publications were excluded if it was not obvious from their titles that they are research on child (sexual) abuse (e.g. the analysis of parental care or books dealing with criminal child protection). Documents from the Bureau of Statistics are not included in the review because they are not an authorship contribution.

The following categories are defined as the units of analysis: year, publisher, scientific field, authors and co-authors, research focus and perspective, research question, type of research (quantitative or qualitative; retrospective, present or prospective; cross sectional or longitudinal), time and population, sample (method and size), CSA conceptualisation, instrument and CSA items, CSA results.

## RESULTS AND DISCUSSION

### Number of published CSA studies and research trends in Croatia

The systematic review included 26 CSA research publications in Croatia in the time period of 1990 – 2016 that meet eligibility criteria (Figure 1.), published in English and Croatian: 20 journal articles, 3 books, 1 research report and 2 conference proceedings. Since three different papers address the same research (separately published validation of questionnaires), a total of 23 unique studies are included in a systematic review. Six of them were indexed in the »Web of Science«, two in »Scopus«, three in »Hrčak«, four in »Croatian scientific bibliography«, eight were identified through bibliography lists of included studies, while three were suggestions from CSA experts in Croatia. Figure 2. shows an increase of interest for CSA research in the second decade (2000 – 2009) when the largest number of papers was published (n = 16).

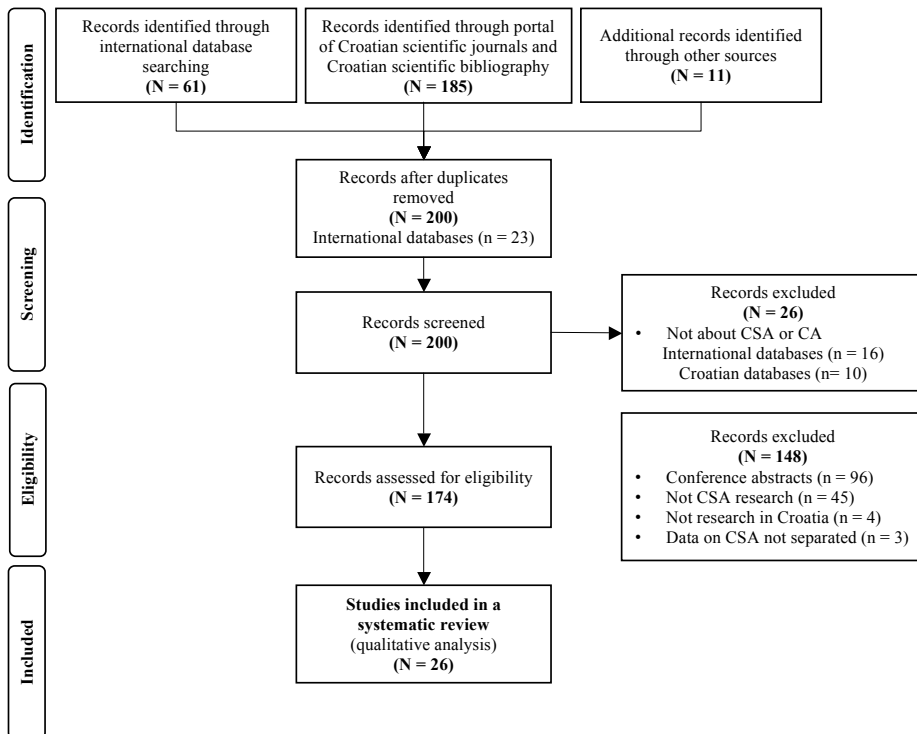
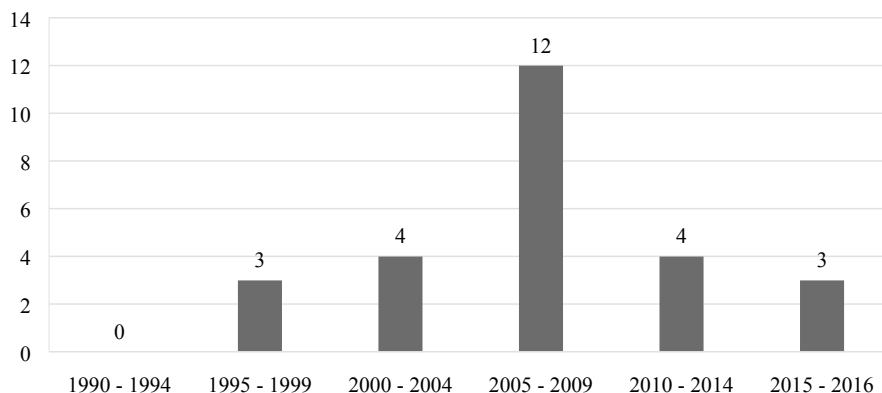


Figure 1. Study selection flow diagram<sup>1</sup>

<sup>1</sup> Presented according to the PRISMA guidelines (Moher et al., 2009).



**Figure 2.** Number of published CSA research projects in Croatia, 1990 – 2016 (N = 26)

Only three research papers were published during the 1990s which is not surprising since it was the time period of the Croatian War of Independence when professionals were mostly dealing with war casualties. The largest number of research studies was published in a five year period from 2005 to 2009, a total of 12 studies, the period after the five year period when the largest number of publications in Croatia about violence against children was published (Ajduković and Ogresta, 2010). The subsequent decline in interest in CSA research is consistent with findings in Ajduković and Ogresta (2010) research. In an analysis of publications in the field of violence against children, they found that the interest of Croatian professionals in child abuse is declining due to a growing interest in peer violence and cyberbullying.

## Framework model of CSA research in Croatia

A framework model of CSA research in Croatia was developed. The body of research is categorised into three main categories: 1) CSA prevalence research in the population using anonymous self-reports (unknown cases of CSA); 2) CSA research with helping professionals working with children or students studying for helping professions (known but unreported cases of CSA); 3) research of reported and confirmed CSA cases. Within each category, research is chronologically organised (from the most recent) and alphabetically sorted according to the author's last name (Table 1.). CSA research with professionals or students studying for helping professions was the most prevalent research category (n = 9), while the other two research categories were equally represented (n = 7). Three different papers addressing the same research are described within the same row (Ajduković, Sladović and Buško, 1999; Karlović, Buljan-Flander and Vranić, 2001; Sladović, 1999). Separately published validations of questionnaires are marked differently (\*).



**Table 1.** Child sexual abuse research in Croatia (1990 – 2016)

| Author(s), (year), publisher and scientific field  | Main research question  | Type of research                                 | Time period and population                                     | Sampling method and sample size   | Instrument and CSA items  | CSA conceptualisation   | CSA prevalence and incidence results  | Socio-demographic characteristics of CSA victims and perpetrators   |
|--|---|--|--|---|---|---|---|---|
| <b>1. CSA PREVALENCE RESEARCH IN THE POPULATION USING ANONYMOUS SELF-REPORTS (n=7)</b>       |   |  |  |   |   |   |   |   |
| Ajduković, Sušac and Rajter (2013) <i>Croatian Medical Journal</i><br>Public Health          | Gender and age differences in CSA and CSA incidence in Croatia  | Quantitative<br>Retrospective<br>Cross-sectional | February – May, 2011<br>Children aged 11, 13 and 16 in Croatia | Probabilistic stratified cluster sample<br>N= 3 644 children<br>National representative sample          | ISPCAN Child Abuse Screening Tool, Children's Version (modified in 2 pre-testing stages)<br>5 specific CSA items                      | Contact and non-contact CSA/ sexual victimisation<br>Uncomfortable sexual acts, penetration not included, no distinction between peer and adolescent perpetrators | 10.8% lifetime prevalence of CSA (4.8% to 16.5% depending on the age group)<br>7.7% prevalence in the previous year               | No difference in contact CSA based on victim's gender (in 11-year-old group no difference)<br>Girls experienced more non-contact CSA (in 13 & 16-year-old group)  |
| Buljan-Flander, Corić-Špoljar and Štimac (2009) <i>Contemporary psychology</i><br>Psychology | Correlation between child abuse in the family and parental perception and behaviour difficulties in Croatia | Quantitative<br>Retrospective<br>Cross-sectional | Spring, 2006<br>Graduates in Croatia                           | Probabilistic sample of graduate students<br>N= 4 191<br>graduates (average age 18.13)                  | Child Abuse Questionnaire (Karlović, 2001)<br>12 specific CSA items   | Contact and non-contact CSA   | 13.7% prevalence of contact CSA<br>18.1% prevalence of contact and non-contact CSA (published in Buljan-Flander, 2006)            | Risk behaviour of one of the parents is a risk factor for CSA within a family   |
| Buljan-Flander, Čosić and Profaca (2009) <i>Child Abuse &amp; Neglect</i><br>Psychology      | Exposure of children to sexual content on the Internet in Croatia   | Quantitative<br>Retrospective<br>Cross-sectional | April – June 2004<br>Children and youths in Croatia            | Children and youths »Internet users« in 17 elementary and 2 high schools<br>N=2 880<br>(average age 12) | Questionnaire on Child Experiences in Internet Use (habits, experiences, content and reactions)<br>6 specific items on sexual content | Exposure to sexual material and inappropriate questions and comments during chat sessions<br>Non-contact CSA<br>No distinction of voluntary and unwanted exposure | 27% exposed to messages of sexual content, 4% to violence in addition to nudity and sexual activity, 1% images including children | ¼ of children and youths had disturbing emotional reactions, girls and younger more frequently than boys and older children: feelings of distress, shame and fear |

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|---|---|--|--|--|---|---|--|--|
| Aberle et al. (2007)<br><i>Croatian Medical Journal</i><br>Public Health  | Prevalence of different forms of child abuse in family among high school pupils in SlavonSKI Brod           | Quantitative Retrospective Cross-sectional | February, 2005<br>High school pupils in the city of SlavonSKI Brod       | 1st and 4th year pupils<br>N = 2 140 pupils                                  | 1 nonexplicit item about sexual harassment  | Sexual harassment in family (nonexplicit statement, Appendix not available) | 6% boys possible sexual harassment in family<br>3.3% girls possible sexual harassment in family  | Significantly higher among first-year pupils (11% boys and 3.9% girls) than among fourth year pupils (3.2% boys and 2.9% girls)  |
| Fabijanić, Buijan-Flander and Karlović (2007)<br><i>Pediatrics Croatia</i><br>Paediatrics   | Incidence of childhood abuse experiences among high school pupils of Sisacko-Moslavačka county              | Quantitative Retrospective Cross-sectional | March and April, 2001<br>High school pupils of Sisacko-Moslavačka County | Pupils from 10 schools in the Sisacko-Moslavačka County<br>N = 310           | The Child Abuse Experience Inventory (Karlović, 2001)<br>14 specific CSA items  | Child sexual abuse Contact and non-contact CSA                              | 11% experienced some form of CSA<br>9% contact CSA   | 18% of the girls in the sample<br>5% of the boys in the sample   |
| Pećnik (2003)<br><i>Naklada Slap</i><br>Social work   | Prevalence of childhood abuse in family among students at University of Zagreb                              | Quantitative Retrospective Cross-sectional | Time period not specified<br>Students at University of Zagreb            | Non-probability convenience sample<br>N = 1 146 students                     | Attitude Scale Towards Child Sexual Abuse (Sladović, 1998)<br>4 +1 specific CSA items   | Child sexual abuse in family<br>Contact and non-contact CSA                 | 7.3% students experienced CSA in childhood<br>8.6% female students<br>3.5% male students         | 96% sexually abused students experienced some other form of child abuse or neglect in family   |
| Vranić, Karlović and Gabelica (2002)<br>Karlović, Buijan-Flander and Vranić (2001)*<br><i>Contemporary psychology</i><br>Psychology | Incidence of child abuse among students at University of Zagreb<br>Validation of Child Abuse Questionnaire* | Quantitative Retrospective Cross-sectional | 2000 – 2001<br>Students at University of Zagreb                          | Non-probability convenience sample<br>N = 505 students (validation N = 328*) | The Child Abuse Experience Inventory based on the Comprehensive Child Maltreatment Scale for Adults (Higgins & McCabe, 2000)<br>14 specific CSA items | Child sexual abuse<br>Contact and non-contact CSA                           | 19.3% students experienced CSA<br>25.2% female students<br>11% male students<br>1.4% penetration | 52% aware of the CSA<br>25% disclosed to a friend,<br>21.8% to mother,<br>2% help of the psychologist,<br>27.6% shame is the reason not to search for help,<br>57.5% don't need professional help today<br>Perpetrators - strangers and male members of the family |

| 2. CSA RESEARCH WITH HELPING PROFESSIONALS WORKING WITH CHILDREN (n = 9)   |  |   |   |   |   |  |   |  |
|--|--|---|---|---|---|--|---|--|
| Author(s), (year), publisher and scientific field  | Main research question   | Type of research  | Time period and population  | Sampling method and size of sample  | Instrument and CSA items  | CSA conceptualisation and content of items regarding knowledge/attitudes   | CSA prevalence and incidence results  | Attitudes/knowledge/experience   |
| Buljan-Flander, Tarabić and Čuković-Bagić (2015)<br><i>Alcoholism and Psychiatry Research</i><br>Dental Medicine | Experience and knowledge regarding child abuse and neglect (CAN) amongst Croatian dental practitioners   | Quantitative<br>Retrospective<br>+ Present<br>Cross-sectional | Time period not defined<br>Dental practitioners in Croatia  | Random sample of 500 dental practitioners<br>N = 82 dental practitioners<br>(Response rate 16.4%)   | Modified questionnaire from Buljan-Flander, Čoric and Štimac (2008)<br>3 specific CSA items | Sexual assault and child sexual abuse<br>Usage of physical force<br>Child's sexualised behaviour<br>Perpetrators - strangers   | 52 (63.41%) never, 25 (30.48%) rarely and 5 (6.09%) sometimes encounter CA in their practice<br>(data for CSA are not separated from child abuse)                             | 93.9% believe that the perpetrators are usually strangers, 36.6% that the physical force is present during every sexual assault, 13.4% it can be provoked by child's sexualised behaviour                              |
| Trbus, Rajčić and Rajter (2015)<br><i>Parents Association</i><br>»Step by step«<br>Social policy and social work | Prevalence estimates of sexual harassment experience among youth in immediate environment<br>Knowledge regarding CSA of pre-school and elementary school employees | Quantitative<br>Retrospective<br>Cross-sectional              | February to May 2014<br>Youths in Croatia (age 15 and 18)<br>Pre-school and elementary school employees | Probabilistic stratified cluster sample<br>N = 2 339 students;<br>N = 209 pre-school employees, N = 303 elementary school employees<br>National representative sample | 2 CSA items regarding sexual harassment<br>2 CSA items regarding knowledge                  | Sexual harassment and sexual violence<br>Contact and non-contact CSA<br>Children's estimates of sexual harassment (in person and online)<br>General knowledge of CSA indicators and protocol | 31.10% girls and 4.80% boys estimate that almost all or most youths experienced sexual harassment, 30.70% girls and 5.10% boys estimate the same for online sexual harassment | Knowledge of the Protocol on the Treatment of Sexual Violence (school M = 2.79; pre-school M = 3.17)<br>Knowledge of CSA indicators (school M = 2.58, pre-school 2.94)   |
| Jordan et al. (2012)<br><i>International Dental Education</i><br>Dental Medicine                                 | Croatian dental students' knowledge regarding child abuse and procedures of reporting abuse  | Quantitative<br>Present<br>Cross-sectional                    | January, March and April, 2011<br>Dental students at the University of Zagreb                           | Students of Dental medicine at the University of Zagreb<br>N = 544<br>(Response rate 74.9%)   | 5 items assessing knowledge about CSA<br>(based on previous studies on CSA knowledge)       | Child sexual abuse<br>Psychosomatic complaints<br>Perpetrators - strangers<br>Child's seductive behaviour<br>Child's failure to respond<br>Physical indicators of CSA                        | Research on knowledge, not prevalence.  | 33.1% know that seductive behaviour by a child may be indicative of prior CSA<br>Less than half know that psychosomatic complaints by the child and injuries and lesions on the child's oral membrane can point to CSA |

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|---|--|--|--|---|---|---|---|---|
| Šarić (2011)<br><i>Croatian Journal for Public Health</i><br>Public Health              | Attitudes and knowledge of health-care workers regarding child abuse and neglect   | Quantitative<br>Retrospective and present<br>Cross-sectional | June and July 2010<br>Health care workers at the Clinical Hospital Centre in the City of Split   | Probabilistic random sample (details not specified)<br>N = 97   | Attitude Scale Towards Child Sexual Abuse (Šladović, 1998)<br>7 specific CSA items                        | Child sexual abuse<br>Vaginal/anal intercourse<br>Watching sexual organs of adults<br>Touching genitalia<br>Therapy of CSA victims<br>Parental responsibility<br>Reporting CSA<br>Sanctioning not-reporting | 0 physicians and paediatricians experienced CSA in their childhood                                  | 4% believe that CSA is only vaginal or anal sexual intercourse<br>1% believe that touching a child's genitals is not CSA<br>88% agree with sanctioning physicians who failed to report CSA                |
| Buljan Flander, Čorić and Štamac (2008)<br><i>Contemporary psychology</i><br>Psychology | Experience, knowledge and attitudes of physicians in Croatia towards child abuse and neglect                                       | Quantitative<br>Retrospective and present<br>Cross-sectional | November 2007 – May 2008<br>Primary health care physicians and paediatricians in Croatia         | Population of all physicians and paediatricians in Croatia<br>N = 512 physicians (response rate 20.3%)<br>N = 78 paediatricians (response rate 30.8%) | Attitudes towards CA developed according to Ajduković, Šladović and Buško (1999)<br>5 items regarding CSA | Child sexual abuse<br>Vaginal/anal intercourse<br>Use of physical force<br>Child's sexualised behaviour<br>Consequences of CSA<br>Perpetrators - strangers  | 47% physicians reported CA towards authorities<br>(data for CSA are not separated from child abuse) | 42.4% physicians and 55.2% paediatricians believe that CSA is only vaginal or anal sexual intercourse<br>24.8% physicians and 23.1% paediatricians believe that CSA always includes use of physical force |
| Sindik and Veselinović (2008)<br>Conference proceedings<br>Education                    | Characteristics of violence against and among children of pre-school age from the perspective of kindergarten teachers and parents | Quantitative<br>Retrospective<br>Cross-sectional             | Time period not defined<br>Population of parents and kindergarten teachers in the city of Zagreb | Non-probability convenience sample of kindergarten teachers and parents<br>N = not-specified  | Questionnaire for parents & Questionnaire for kindergarten teachers (Štarc)<br>1 item regarding CSA       | Sexual violence/child sexual abuse<br>Frequency of CSA cases in their career  | 8% of kindergarten teachers met with CSA in their career  | -   |

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|--|---|--|--|---|--|---|---|---|
| Sindik and Veselinović (2007) Conference proceedings Psychology  | Prevalence estimates and CSA perception of kindergarten teachers in a population of pre-school children   | Quantitative Retrospective Cross-sectional             | Time period not defined Kindergarten teachers (prevalence estimates) in Kindergarten »Maslačak« Zaprešić                 | Non-probability convenience sample of kindergarten teachers N = 38  | 1 CSA item: number of CSA cases in their professional career   | Sexual violence/child sexual abuse Frequency of CSA cases in their career   | 2 cases Prevalence estimates for pre-school children  | CSA in older kindergarten groups<br>More than two-thirds need more education in the field of child abuse  |
| Sunko and Židić (2007) <i>Journal for Pedagogic Theory and Practice</i> Education  | Teachers estimation of frequency of domestic violence and neglect of children in elementary school junior years   | Quantitative Present Cross-sectional                   | End of 2005 Estimates for population of 1 298 children in elementary school junior years in the city of Split and suburb | Probability random sample of schools and junior year teachers N = 58 teachers (Response rate 72.5%)             | 5 criminal acts according to the Croatian Criminal Justice Act   | Child sexual abuse in family Contact and non-contact CSA Frequency of CSA cases in their class  | N = 3 or 0.23% of children sexually abused in a family CSA 3.3% of all CA cases   | 36.2% not qualified enough for CA prevention activities   |
| Sladović (1998) <i>Annual of social work</i><br>Sladović (1999) <i>Društvena istraživanja; journal for general social research</i><br>Ajduković, Sladović and Buško (1999)* <i>Croatian review of rehabilitation research</i> Psychology | Attitudes of helping professionals towards CSA correlates and their need for education Experience of CSA among helping professionals Validation of scale* | Quantitative Retrospective and present Cross-sectional | Time period not stated Croatian helping professionals  | Non-probability convenience sample N = 253 professionals in social care, health care and schools (87.4% female) | Scale of professionals' attitudes towards child sexual abuse developed and validated* 4 factors: General Beliefs about CSA, Beliefs about CSA indicators and Beliefs about treatment* 32 items | Child sexual abuse Own experience of CSA in childhood General beliefs about child sexual abuse General reactions to the notion of child sexual abuse Beliefs about child sexual abuse Reactions to treatment alternatives | 15.01% of professionals experienced CSA in their childhood (they don't differ in attitudes from others) 0 reported their own CSA to the authorities, N = 15 disclosed to a private person Those who experienced CSA on average suspect more and estimate higher prevalence of CSA | 26.5% helping professionals do not know anything or know very little about CSA 4.7% professional role completely unclear 96.8% would like interdisciplinary education |

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| 3. RESEARCH OF REPORTED AND/OR CONFIRMED CSA CASES (n = 7)                         |   |   |  |  |  |  |  |   |
|--|---|---|--|--|--|--|--|---|
| Author(s), (year), publisher and scientific field                                  | Main research question  | Type of research  | Time period and population   | Sampling method and size of sample   | Instrument and CSA items   | CSA conceptualisation  | CSA prevalence and incidence results   | Characteristics of CSA  |
| Štimac, Profáca and Buljan-Flander (2015)<br><i>Social/Psychiatry Psihijatrija</i> | Age differences in some family functioning aspects and psychosocial characteristics of sexually abused children | Quantitative Retrospective Longitudinal Mixed method: analysis of documentation & questionnaire | Time period not stated (Centre established in 2002)<br>Sexually abused children processed in the Child Protection Centre of Zagreb | Victims of CSA included in multidisciplinary treatment at the Centre (suspicion of CSA)<br>N = 326 sexually abused children (81.6% girls, 18.4% boys, average age 11.8; SD = 2.64) | Family characteristics from the documentation<br>Personality questionnaire for children, Eysenck (1993)<br>Traumatisation symptoms scale for children, Briere (2011) | Child sexual abuse   | N = 326 sexually abused children in treatment<br>No differences in the family structure, except that more older children experienced a loss of at least one parent | Older children poorer academic achievement, emotionally less stable and more indicators of being traumatised<br>Perpetrator - most often a family member or a neighbour (older children: some other known person) |
| Ogrresta et al. (2012)<br><i>Annual of social work</i><br>Social work              | Characteristics of incidents of child abuse cases registered in social care centres                             | Quantitative Retrospective Cross-sectional Analysis of documentation                            | 2010<br>Social care centres in Croatia   | Two stage probability sample<br>N = 368 incidents in 37 social care centres  | Case-based Surveillance study Protocol for extraction CAN information from archives/ databases & Extraction forms (2010)   | Child sexual abuse cases recorded in the social care centres | N = 2 CSA (0.5%)<br>CSA data not separated from the data for economic violence   | Social care centres fail to systematically register a series of important data  |

|   |   |   |   |  |   |   |   |   |
|---|---|---|---|--|---|---|---|---|
| Rittossa (2007)<br>Book<br>Criminology          | Characteristics of the most serious sexual criminal acts against children in court practice | Quantitative and qualitative Retrospective Longitudinal Analysis of documentation | 1993 – 2004<br>Final court decisions in the most serious cases of CSA in Croatia (County Courts in Zagreb, Rijeka, Split & Supreme Court) | Census of all cases from 1993 – 2004<br>N = 42 final court decisions in the most serious cases of CSA in Croatia | Documentation based information and qualitative analysis  | Legal definition of child sexual abuse according to Criminal Law<br>Contact CSA | 42 most serious sexual criminal acts from 1993 to 2004  | 90% victims female<br>57% pre-school age<br>43% long-term abuse to a child<br>90% perpetrators - known to a child<br>63% perpetrators - members of the immediate family<br>47.5% disturbed relationships in family<br>40% parents emotionally cold  |
| Singer and Uzelac (2005)<br>Book<br>Criminology | Characteristics of the sexual criminal acts against children                                | Quantitative Retrospective Longitudinal Analysis of documentation                 | 1992 – 2002<br>Reported perpetrators of sexual contact abuse against children convicted in Zagreb   | Census of all cases in Zagreb 1992 – 2002<br>N = 86 perpetrators   | Questionnaire based on the information available in documentation<br>2 criminal acts according to the Croatian Criminal Justice Act (sexual contact acts) | Legal definition of child sexual abuse according to Criminal Law<br>Contact CSA | N = 86 perpetrators<br>16.3% family member<br>57% acquaintance<br>26.7% stranger<br>16.3% more than 1<br>52.3% older than 30 years of age | 81.4% female victims<br>18.6% male victims<br>26.7% younger than 10<br>25.6% 10 to 14 years old<br>73.3% without consent<br>50% penetration<br>86% committed crime<br>41.9% with use of threat and force<br>47.7% psychiatric diagnosis<br>32.6% married<br>52.6% single<br>19.8% earlier conviction for violence |

## S. Popović: Child sexual abuse in Croatia: A systematic review of research

|   |   |   |  |  |  |   |  |   |
|---|---|---|--|--|--|---|--|---|
| Stošević and Ropac (2005)<br><i>Društvena istraživanja: journal for general social research</i><br>Criminal Law | Incidence of confirmed CSA cases in Croatia                         | Quantitative Retrospective Longitudinal Analysis of documentation | 1993 – 2002<br>Child sexual abuse penalised according to the Croatian Criminal Justice Act                 | Census of all cases from 1993 – 2002   | 5 criminal acts according to the Croatian Criminal Justice Act           | Legal definition of child sexual abuse according to Criminal Law<br>Contact and non-contact CSA<br>Confirmed cases (penalised)                | The mean annual incidence during the 10-year period was 7.4 per 100 000 children, showing a statistically significant increase   | Acts of indecency involving a child were most common with a mean annual incidence of 3.5 per 100 000 children aged < 18 years, followed by sexual act with a child (2.5/100 000), and lascivious acts in the presence of a child (1.0/100 000). |
| Stošević, Ropac and Čujetko (2005)<br><i>Police and Security</i><br>Criminal Law                                | Analysis of criminal charges, accusations and verdicts in CSA cases | Quantitative Retrospective Longitudinal Analysis of documentation | 1998 – 2003<br>Criminal charges, accusations and verdicts in CSA cases, State Attorney's Office in Croatia | Census of all cases from 1998 – 2003 documented at the State Attorney's Office | 5 criminal acts according to the Croatian Criminal Justice Act           | Legal definition of child sexual abuse according to Criminal Law<br>Contact and non-contact CSA   | Number of charges and accusations for sexual intercourse with a child increases through whole period, double increase (N = 44 in 1998, N = 86 in 2003)<br>Exploiting children for pornography increases through period | Number of verdicts increased 3.6 times (N = 10 in 1998, N = 36 in 2003)   |
| Sladović and Družić (2000)<br><i>Child and Society</i><br>Social work   | Characteristics of CSA cases reported to police                     | Quantitative Retrospective Longitudinal Analysis of documentation | 1990 – 1998<br>Cases reported to police in Croatia   | Census of all CSA cases reported to police from 1990 – 1998                    | Questionnaire based on the information available in police documentation | Child sexual abuse reported to the police<br>Contact and non-contact CSA categories developed based on the changes in legal definition of CSA | Significant increase of reported cases (N = 42 in 1990, N = 147 in 1998)<br>84.2% female victims<br>average age of victims 9.7 years old   | 96.8% male perpetrators<br>Average age of perpetrators - 37 years old<br>29.5% in family home, 14.2% building, 72.5% perpetrators committed one CSA criminal act  |



## **Dominant research focus and perspective**

The analysis confirms that researchers more often investigate CSA only as a form of child abuse. Of 23 unique research projects, the majority of studies (n = 13) were focused on child abuse and neglect and studied CSA only as a type of child abuse, often dedicating only a smaller number of research items to CSA. Among different categories of research, CSA was dominantly an exclusive subject of research studies of reported and confirmed cases. Only one research paper assessing attitudes was interested solely in the subject of CSA. Population prevalence research and research assessing professionals' attitudes were mostly concerned with child abuse in general. A possible explanation is the cost effectiveness since it is cheaper to conduct a representative longitudinal analysis of documentation than representative population research, so it is a reasonable decision to investigate all types of child abuse when financial resources are obtained for a nationally representative study. Nevertheless, it is possible that there is a general reluctance among Croatian scientists and professionals in investigating the most serious and tabooed form of abuse which is burdened by a series of ethical and methodological considerations.

Most CSA research can be categorised as research within a social perspective (n = 12), specifically research in the field of psychology (n = 6), social work and/or social policy (n = 4), and education (n = 2). Seven research projects have been conducted within a health perspective, with the most common being public health research (n = 4), followed by studies in dental medicine, paediatrics and psychiatry. Among journals, the most common publisher of CSA research were the journals - »Contemporary psychology« (n = 4), »Annual of social work« (n = 2), »Croatian Medical Journal« (n = 2), and »Društvena istraživanja: journal for general social research« (n = 2)

## **Most significant authors and seminal studies**

The most significant authors and co-authors that contributed the most to our knowledge of CSA in Croatia are: (1) Gordana Buljan-Flander (7 research publications), (2) Marina Ajduković (3 research publications) and Branka Sladović-Franz (3 research publications). While Buljan-Flander and Ajduković, both psychologists, made the most significant contribution to the overall knowledge of CSA prevalence in Croatia conducting research on national representative samples of children. Branka Sladović Franz, a social worker, conducted the first study of professionals' attitudes towards child sexual abuse in 1998, which is also the first research about CSA in Croatia. Buljan-Flander, Čorić and Štimac (2008) in their research on physicians' attitudes towards CSA attempted to cover the whole population of primary health care physicians and paediatricians in Croatia. Among studies of cases reported, two scientists in

legal science stand out - Mladen Singer and Dalida Rittossa - with their studies on characteristics of confirmed CSA cases. Sladović and Družić (2000) conducted the only analysis so far of cases reported to Croatian police, while Ogresta et al. (2012) conducted the first analysis of cases registered at social care centres. The only clinical research with sexually abused children was conducted by Štimac, Profaca and Buljan-Flander in 2015, and it is currently one of the most recent studies in this field.

## **Methodological approaches in CSA studies and research designs**

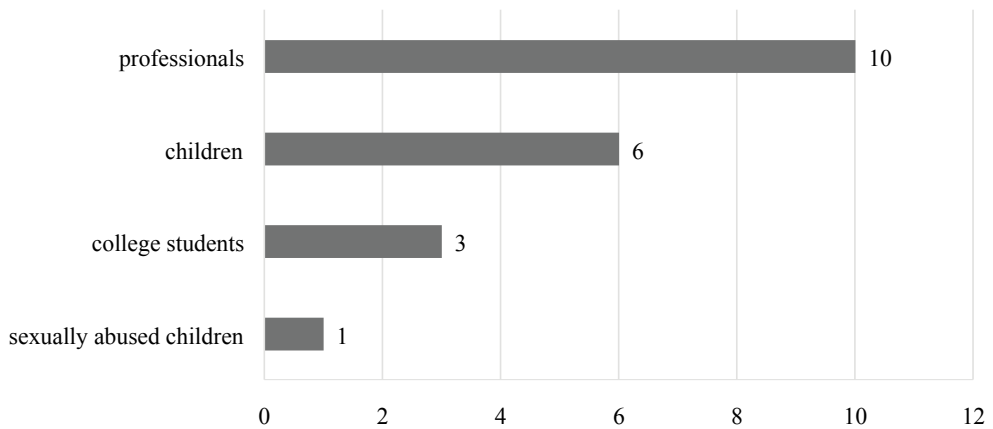
Two methodological approaches in CSA research were not equally prevalent in the body of research, almost three times more population research in which data sources are children, students and helping professionals were conducted ( $n = 17$ ) in comparison to the analysis of documentation ( $n = 6$ ). One research employed a mixed method approach combining analysis of documentation and sexually abused children as respondents (Štimac, Profaca and Buljan-Flander, 2015), but in this review it is included in the category of studies on reported/confirmed cases. In the second methodological approach, analysis of documentation, two studies were conducted with the aim of assessing socio-demographic characteristics of reported cases using court data, and one using police data, clinical data and social welfare centre data. Two studies, which employed analysis of documentation, were conducted aiming to analyse trends and incidence of reported and confirmed CSA cases using data from the Ministry of the Interior and State Attorney's office. Although it seems that all sectors are covered, these are only preliminary research efforts which should be continued since there is no analysis of official data in the recent decade with the exception of Ogresta et al. (2012) who analysed data from social care centres in 2010.

All research employed quantitative data analysis, and most of them were retrospective ( $n = 17$ ), two studies were concerned with present knowledge in order to assess estimates of current CSA prevalence (research of professionals' attitudes and experience), and four were a combination of the two. There are no prospective CSA studies in Croatia so far, which is probably due to the difficulties inherent to their design. The gap in qualitative CSA research is almost surprising because data retrieved in that way could contribute to a better understanding of a child's reasons for not disclosing CSA, attitudes towards victims and perpetrators, and perpetrators' cognitive distortions and abusive methods. The importance of qualitative research is even greater since the analysis has shown that most of the existing CSA research treats CSA only as a type of child abuse. Most of the studies were cross-sectional

(73.9%), which is an expected result. A total of 6 longitudinal studies were exclusively conducted as a part of the analysis of the documentation since it is quite easy to access data for a large time period within this methodological approach. The lack of longitudinal population research prevents conclusions about CSA effects and intergenerational transmission of abuse.

## Participants, sampling methods and sample size

As presented in Figure 3. in population research the most prevalent respondents were professionals, children (or pupils) and college students. Not one research was conducted with adults, parents or perpetrators of CSA.

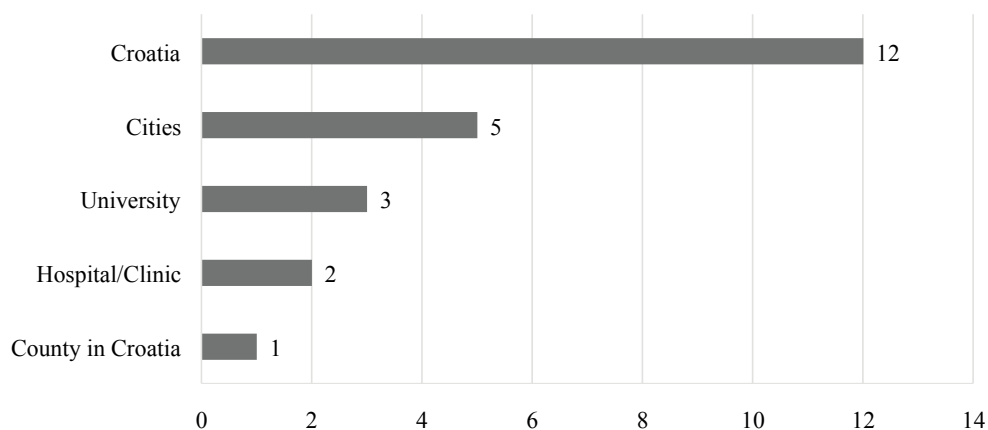


**Figure 3.** Respondents in CSA population research

Although two most significant prevalence research projects in Croatia were conducted on a sample of children, which imposes much more methodological effort on researchers than researching adults, surprisingly, there is no research on child sexual abuse prevalence among Croatian adults. Methodological difficulties of sampling Croatian adults could be a possible explanation for this gap. Although there is a body of research assessing attitudes of professionals towards CSA, there is still no research on attitudes of the general Croatian public, a gap probably caused by the same methodological constraints and lack of research funding. The knowledge that we have on Croatian perpetrators is based on some general socio-demographic characteristics of reported and confirmed (often most serious) cases which are maybe not representative of all CSA cases. Moreover, it is possible that our knowledge of characteristics of the perpetrators based on those findings

completely obscures the characteristics of perpetrators which remain unidentified and unreported. This research gap is not surprising given that the access to the perpetrators of sexual abuse is limited. But using perpetrators as respondents could increase our knowledge about their motivation, abusive methods and even support development of guidelines for CSA prevention.

Most of the research was conducted using non-probability convenience samples which limit generalisations of data on the population and prevents firm conclusions about CSA prevalence. Most studies were conducted on a sample smaller than 500 respondents or cases. In an analysis of reported cases, smaller samples are justified since they are based on suspected or known cases of CSA. Nevertheless, in population research convenient and small samples prevent conclusions on territorial prevalence. Figure 4. shows the territorial orientation of the research.



**Figure 4.** Territorial orientation of the studies (N = 23)

Studies are almost equally focused on a national and local level, whether cities or counties or universities and hospitals. Twelve population and documentation research projects are focused on a national level. While documentation studies are usually conducted on a census of cases and allow conclusions about trends of reported cases, among population studies concerned with prevalence and CSA characteristics or knowledge/attitudes towards CSA, only five provided enough sampling details to assess quality of sampling method and employed a sampling method which allowed conclusions regarding the Croatian population of children or helping professionals.

## Conceptualisation of CSA and CSA instruments

Studies retrieved used different concepts to describe sexual abuse: »child sexual abuse«, »sexual violence«, »sexual harassment«, »sexual victimisation«, »sexual assault« which may be confusing. Moreover, studies differ in the definition of the CSA construct, specifically, in the definition of childhood, consent, sexual acts and relationship between the child and a perpetrator.

First, the defined upper age of childhood varies. In prevalence studies it was set at 16, 18 or studies used the unspecified term »childhood« when conducting retrospective prevalence studies with faculty students. Higher upper age results in higher prevalence rates which prevent comparisons of retrieved data. Although broader definitions may result in raising public awareness about the issue, it is possible that those prevalence rates include cases of persons who are not only above the legal age of consent but are also classified developmentally as adults. In research on reported and confirmed cases (police or court data), the upper age is set as the legal age of consent since institutions record data according to the legal definition. However, this prevents not only comparisons of prevalence studies and studies of the reported cases, but also may fail to include cases which constitute child sexual abuse when the victim is older than legal age, although developmentally unable to give true consent.

Second, consent to sexual activities also varies in nature, so some studies dealt with only »unwanted« or »uncomfortable« sexual activities while some did not make distinctions between voluntary and involuntary activities. Therefore, it is possible that prevalence rates do not include cases of child sexual abuse when child younger than legal age does not label sexual acts as »unwanted«. On the other hand, it is possible that prevalence rates of studies which set higher upper age and do not define the relationship between victim and perpetrator include voluntary sexual activities of youths.

Third, the definition of sexual acts varies, some studies included long lists of sexual activities, while some studies included only one sexual act. Sexual acts also differ in nature so some studies assess contact and non-contact CSA, while others assessed only one. Moreover, some studies did not employ explicit statements of activities or even excluded questions regarding penetration which is important to assess true prevalence rates, while others do not agree regarding the sexual nature of some acts (e.g. kiss on a mouth). Therefore, prevalence rates of studies with long lists of sexual activities which assessed contact and non-contact CSA are higher than in studies which dealt only with contact CSA or excluded some types of activities which definitely constitute abuse, or which may constitute abuse if they are experienced by the child as unwanted. Moreover, population studies and

studies of reported/confirmed cases define sexual activities differently making comparisons impossible.

Finally, relationships assessed between child and a perpetrator differ, so some studies defined perpetrators as anyone of any age, some dealt only with parents or family members, and some set the legal age difference between the child and the perpetrator. This prevents comparisons of retrieved prevalence data and prevalence rates are lower when the relationship is strictly limited. On the other hand, studies which do not assess consent and do not define relationship may prevent distinction between child sexual abuse and developmentally normal peer to peer play.

Such conceptual variances prevent CSA knowledge formation, complicate identification and responses to CSA, prevention efforts, policy developments, and the establishment of social norms of acceptable behaviour (Mathews and Collin-Vezina, 2017: 2-3). Acknowledging the challenge of defining child sexual abuse, efforts should be made at least to exclude clear cases: (1) when the person is developmentally adult, above legal age of adulthood and considered by the society's norms as adult; (2) 17 year old with capacity and provides true consent (full, free, voluntary and uncoerced); (3) genuine therapeutic medical procedures done without an element of sexual gratification; (4) not in meaningful position of inequality, and not genuinely exploited (Mathews and Collin-Vezina, 2017: 12).

In 14 population research papers, 9 used validated questionnaires, while 5 research papers dedicated only a few or one item to CSA. Among questionnaires, 4 studies used the »Attitude Scale Towards Child Sexual Abuse« (Sladović, 1998) and 3 studies used the »Child Abuse Questionnaire« (Karlović, 2001). The most recent prevalence research used the »International Society for the Prevention of Child Abuse and Neglect (ISPCAN) Questionnaire« which allows international comparisons of CSA prevalence and differences (Ajduković, Sušac and Rajter, 2013). The questionnaires are sometimes used inconsistently and the response scale is changed even when using the same questionnaire. Studies of attitudes towards CSA with professionals usually assessed beliefs about the nature of the CSA (e.g., usage of physical force, only vaginal/anal intercourse), indicators (psychosocial, e.g., seductive or sexualised behaviour of a child, and physical, e.g., lesions on oral membrane), perpetrators (»stranger danger« myth), and consequences of CSA (e.g. severity of consequences in general), while some studies dealt with only »general knowledge« assessment of e.g., CSA indicators. Future studies should assess attitudes and knowledge more comprehensively and with more details, including a range of different indicators (e.g., perpetrator centred indicators), consequences, and beliefs towards different prevention and treatment options.

## Most important child sexual abuse research findings in Croatia

### 1. Prevalence of child sexual abuse in Croatia

The prevalence rates of contact CSA in Croatia range from 8.5% to 13.7%, depending on how researchers define the age limit for childhood. Only two studies on CSA prevalence in Croatia were conducted on a nationally representative sample. The most recent research studies on the prevalence and incidence of child sexual abuse were conducted as a part of a Balkan Epidemiological Study of Child Abuse and Neglect (BECAN) in 2011 (Ajduković, Sušac and Rajter, 2013). This is the only study conducted on a national representative stratified cluster of children in Croatia (children aged 11 (n = 1 223), 13 (n = 1 188) and 16 years old (n = 1 233), revealing the lifetime prevalence of CSA of 10.8% (4.8% to 16.5% depending on the age group), and prevalence of 7.7% in the previous year. No difference was found in contact CSA based on victim's gender in the 11-year-old group, although girls experienced more non-contact CSA in the 13 and 16-year old groups (Ajduković, Sušac and Rajter, 2013).

The Child and Youth Protection Center of Zagreb (2006) conducted research on the national representative sample of graduates (average age 18.13) and established a prevalence of 13.7% using a more restrictive definition of CSA, and 18.1% when non-contact abuse is included in the definition. Risk behaviour of one of the parents is determined as a risk factor for CSA within the family (Buljan-Flander, Ćosić and Profaca, 2009). A somewhat higher prevalence in comparison to the BECAN study is most likely due to the upper age limit since prevalence increases with the age of respondents, although it can reflect an actual decline in CSA cases which has been already noted in the USA, possibly as a result of prevention, treatment and criminal justice activity (Finkelhor and Jones, 2004). On the other hand, it is possible that there is no real decline in CSA cases, and that lower rates in the BECAN study reflect methodological limitations of self-report questionnaires, parental consent for a child's participation in a study, small number of items considering CSA, exclusion of penetration question, and inclusion of only uncomfortable sexual activity, which means that any sexual activity which a child would describe as voluntary with an adult more than 3 years older remained undetected (Ajduković, Sušac and Rajter, 2013). A recent systematic review of prevalence research (2002-2009) from 24 countries using meta-analytical methods estimated prevalence from 8%-31% for girls, and 3%-17% for boys depending on the definition of CSA, more specifically 9% females and 3% males experience most serious forms of CSA (forced intercourse) during childhood (Barth et al., 2013). Similar rates of CSA prevalence for girls (18%

– 19.7%) and boys (7.6% – 7.9%) prior to the age of 18 were found in the previous meta-analysis of worldwide prevalence research (Pereda et al., 2009; Stoltenborgh et al., 2011). In comparison to these results, CSA prevalence in Croatia is somewhat lower than in other countries, but far from negligible. Also, no significant differences were found by gender in experience of contact child sexual abuse in the 11-year-old group, although girls in Croatia did experience more non-contact CSA in older age groups (Ajduković, Sušac and Rajter, 2013).

Other studies interested in determining the CSA prevalence were using convenience samples of college students at University of Zagreb (Karlović, Buljan-Flander and Vranić, 2001; Pećnik, 2003; Vranić, Karlović and Gabelica, 2002) or have been carried out on the population of pupils in specific Croatian towns (Aberle et al., 2007; Fabijanić, Buljan-Flander and Karlović, 2007), so the results cannot be generalised to the entire population of Croatian students or pupils.

## **2. Croatian helping professionals attitudes and experience with child sexual abuse**

The second category of scientific research about CSA deals with the attitudes, experience, and needs of professionals working with children (or students who will work with children) in order to assess the prevalence, examine circumstances and the criteria for reporting and identifying special education needs for professionals. Few studies have been conducted on a national sample. A study of the experience, knowledge, and attitudes of doctors and paediatricians in Croatia towards CSA was carried out by Buljan-Flander, Čorić and Štimac (2008), while Sladović (1999) included other experts (social workers, psychologists, defectologists, teachers, and lawyers) using the non-probabilistic sampling method. Research has revealed not only that a lot of professionals working with children believe in common CSA myths and do not know enough about the issue, but also that 15.01% of experts were victims of sexual abuse in their childhood (Sladović, 1999). Although this prevalence result cannot be generalised in the population of Croatian professionals, it is similar to the results from studies abroad on CSA prevalence among helping professionals. Nuttall and Jackson (1994) found that 13% of the men and 20% of the women in the representative sample of USA clinicians reported a personal history of childhood sexual abuse. Most recent research on the national sample found that a somewhat higher number of pre-school teachers in Croatia evaluate their knowledge on CSA indicators and the Protocol on the Treatment of Sexual Violence than elementary school teachers, although they both emphasise a need to enhance their knowledge and skills (Trbus, Rajčić and Rajter, 2015). Although most studies in this category do not allow making firm and generalisable conclusions due to the sampling method,



or due to a very low response rate, they do indicate that professionals working with children in Croatia believe in common CSA stereotypes (Sladović, 1999; Šarić, 2011; Buljan-Flander, Tarabić and Čuković-Bagić, 2015), need interdisciplinary education and skills to recognise a sexually abused child (Sladović, 1999; Sunko and Židić, 2007; Buljan-Flander et al, 2008; Jordan et al., 2012; ), a better explanation of their role and protection in cases when they report suspicion of CSA (Sladović, 1999; Buljan-Flander, Čorić and Štimac, 2008; Šarić, 2011). Marquez-Flores, Marquez-Hernandez and Grandos-Gamez (2016) found similar results in Malaga, Spain. They studied teachers' knowledge and beliefs about CSA and determined that over half of the teachers had never received any type of training and that the majority were not familiar with methods of identifying CSA. Also, their research confirmed that teachers believe in some common CSA myths.

### **3. Reported and confirmed cases of CSA in Croatia**

Research on reported and confirmed cases of CSA in Croatia are interested in incidence and characteristics of CSA cases in three different sectors: health, social welfare, and judicial sectors. Dominant methodological approach is an analysis of the official documentation. Only one research in a systematic review used a mixed-method approach and it is the only research conducted on a clinical sample of sexually abused children in Croatia (Štimac, Profaca and Buljan-Flander, 2015). No differences were found in the family structure based on age, except that older children had experienced a loss of at least one parent. Older victims reported poorer academic achievement, emotionally less stable and more indicators of being traumatised. The perpetrator was most often a person known to a child or a family member which is in accordance with clinical studies from abroad (Faller, 1989).

Only retrospective research of police data in Croatia was carried out by Sladović and Družić (2000), focusing on the period from 1990 to 1998 during which a statistically significant increase in the number of CSA cases was reported and a total of 589 known victims, majority female, with an average age of 9.7. The majority of perpetrators were male with average age of 37. Kucuk (2016) conducted the analysis of CSA cases in Turkey and found the higher average age of victims (13.7 years of age), and lower average age of perpetrators (25.6). Moreover, all perpetrators in Kucuk's study were male. It is possible that his results reflect a broader cultural pattern of a patriarchal society in which it may be harder to disclose, detect and report abuse against younger children perpetrated by an older man or woman.

Stašević, Ropac and Cvjetko (2005) focus on criminal justice indicators and establish double the number of criminal charges and accusations and an increase of 3.6 times the number of verdicts in the period 1998 – 2003. Most frequent criminal

charges were regarding acts of indecency involving a child, followed by a sexual act with a child, and lascivious acts in the presence of a child. The average annual incidence of sexually abused children was 7.4 per 100 000 children and was calculated on the basis of the data of the Central Bureau of Statistics and Population Census 2001. Although official data cannot be compared to prevalence data gathered, having in mind that 8.5% to 13.7% children in Croatia experience contact CSA (Ajduković, Sušac and Rajter, 2013), it is obvious that the majority of CSA cases never get reported to authorities. There were no analyses of criminal justice indicators after 2003 in Croatia.

Singer and Uzelac (2005) in their analysis of characteristics of sexual criminal acts against children in Croatia (1992 – 2002) found that the majority of victims were female, 26.7% younger than 10, 50% experienced penetration, and in 41.9% use of threat of force was reported. The majority of perpetrators were persons known to a child and more than half older than 30 years of age. Almost half of the perpetrators had a psychiatric diagnosis, 32.6% were married, and 19.8% had an earlier conviction for violence. Rittossa (2007) described the characteristics of perpetrators and victims of the most severe child sexual abuse cases recorded in court practice, and determined that 90% victims are female, 57% pre-school age, 43% suffered long term abuse, 90% perpetrators were male, and 63% perpetrators members of the immediate family. Characteristics of confirmed CSA cases might reflect juror's tendency to convict offenders so these results have to be taken with caution since it is possible that they do not reflect characteristics of undisclosed and not prosecuted CSA cases.

## **CONCLUSIONS AND RECOMMENDATIONS**

A systematic review of CSA research confirmed that CSA in Croatia is still mostly researched as a type of child abuse and as a means of alarming public and changing public awareness about prevalence rates. If the current research in Croatia is compared to foreign, it becomes clear that Croatia is a country with a lower prevalence of CSA, but far from negligible. Obtained prevalence research, although retrospective and cross-sectional, represents a significant contribution to our understanding of the CSA distribution in Croatia. Data from the institutions in authority allow conclusions about reported and confirmed CSA, on the other hand, the results of relevant scientific research conducted in the general population reveal that most cases of CSA never get reported to the authorities. That is why the characteristics of the victims and perpetrators obtained on the basis of documentation should be interpreted with great caution - it is possible not only that they do not reflect the true image of CSA in Croatia, but also that characteristics of

unknown perpetrators and victims might differ from those revealed and disclosed. Research interest is still mostly focused on child abuse in general, and it is possible that reluctance of Croatian scientists to deal exclusively with CSA is due to a lack of research funds and methodological issues that researchers face when dealing with this most severe type of abuse.

A systematic review showed that, although limited, research interest has increased in the past decade, and methods and sample sizes are more complex and bigger. Nevertheless, there are still some weaknesses in CSA research which usually prevent firm conclusions on CSA prevalence, characteristics and comparisons of retrieved data:

1. Dominance of retrospective research which prevents firm conclusions on true CSA prevalence;
2. Dominance of cross-sectional designs which prevent conclusions on effects of CSA on children and intergenerational transmission;
3. It is not possible to compare results from prevalence retrospective studies and studies of official data;
4. Definitions of CSA differ from research study to research study which prevents comparisons of retrieved data;
5. Questionnaires are used inconsistently, response scale is sometimes changed or only a few items are dedicated to CSA while researching child abuse in general;
6. Samples are mostly non-probabilistic convenience samples which prevent conclusions on CSA prevalence, territorial CSA distribution, and characteristics of victims and perpetrators;
7. Research designs are mostly quantitative, while qualitative research designs could help towards a better understanding of CSA in order to develop effective prevention and treatment programmes.

Future systematic reviews should develop a clear framework for the analysis using more specific research questions. Systematic review allowed the identification of gaps in CSA research and what remains unknown about CSA in Croatia. There is no prospective, longitudinal study of CSA in Croatia, moreover, there is still no consensus on the CSA definition. Not one qualitative research was conducted and research focus is still on child abuse in general, treating CSA only as a form of child abuse. That is why we still do not have answers on CSA factors, consequences, effective and culturally sensitive prevention and treatment solutions. Future research should also consider adult respondents when researching prevalence and socio-demographic CSA characteristics, family members of victims and perpetrators, parents and the general Croatian public in order to assess their attitudes. Studies with sexually abused children as respondents are critical in order to understand

survivors' experiences and reasons for not disclosing CSA, while research with perpetrators could contribute to better understanding of abusive methods and could help develop guidelines for CSA prevention.

Data from official institutions are still gathered and evidenced inconsistently and methods of collecting data are changing along the years which prevents comparisons of CSA trends not only among different sectors but also within the same sector. Data on CSA in official institutions should be more comprehensive and informative so that they could allow conclusions on CSA causes at the individual, familial, community and society level, disclosing and reporting CSA, undertaking interventions and sanctions, and short and long term consequences of CSA. Research data also suggest that experts in Croatia need knowledge and skills in this area, so child sexual abuse should be embedded in curricula at universities which educate future helping professionals, and a mandatory part of sexual education in Croatian schools.

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Stjepka Popović  
Sveučilište u Rijeci  
Medicinski fakultet  
Katedra za društvene i humanističke znanosti u medicini  
Fakultet zdravstvenih studija  
Katedra za javno zdravstvo

## SEKSUALNO ZLOSTAVLJANJE DJECE U HRVATSKOJ: SUSTAVAN PREGLED ISTRAŽIVANJA

### SAŽETAK

Proveden je sustavan pregled istraživanja na temu seksualnog zlostavljanja djece (SZD) u Hrvatskoj kako bi se pronašle sve studije o SZD-u objavljene nakon 1990. i utvrdili istraživački trendovi, razvio okvir za istraživanje SZD-a, utvrdile utjecajne studije, autori, dominantna žarišta istraživanja, perspektive i sudionici, te kako bi se ocijenio metodološki pristup, plan istraživanja, konceptualizacija SZD-a, instrumenti i metode uzorkovanja te kako bi se utvrdilo što je dosad poznato o SZD-u u Hrvatskoj. Pretražene su međunarodne i hrvatske baze podataka s pomoću ključnih riječi kako slijedi: WOS, Scopus, EBSCO Discovery Service, Hrčak i Hrvatska znanstvena bibliografija. Pretraživanje je provedeno u travnju 2017. na temelju prethodno postavljenih kriterija za odabir studija u razdoblju od 1990. do 2016. Kako bi se procijenila kvaliteta postojećih istraživanja o SZD-u, ocijenjeni su različiti tipovi studija prema metodologiji istraživanja. U sustavan pregled uključeno je 26 istraživanja o SZD-u u Hrvatskoj objavljenih na engleskom i hrvatskom jeziku koja su zadovoljila kriterije za odabir, odnosno njih 23 ako se isključe validacijska istraživanja. Razvijen je okvir za istraživanje SZD-a u Hrvatskoj te su istaknuti glavni rezultati: 1. istraživanja o prevalenciji SZD-a u populaciji s anonimnim upitnicima samoiskaza ( $n = 7$ ); 2. istraživanja SZD-a sa stručnjacima pomagačkih zanimanja koji rade s djecom ( $n = 9$ ); 3. istraživanja o prijavljenim i potvrđenim slučajevima SZD-a ( $n = 7$ ). Naglašeni su nedostaci u istraživanjima i preporuke za buduća istraživanja i praksu.

**Ključne riječi:** sustavan pregled istraživanja o seksualnom zlostavljanju djece, podaci o SZD-u, prevalencija SZD-a, obilježja SZD-a, stavovi o SZD-u.



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