An Investigation of the Determinants of Child Sexual Abuse in Tanzania: A Case of the Kilwa District-Lindi Region

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ABSTRACT

Child sexual abuse (CSA), which includes assault and rape, encompasses all sexual activities involving a child. Internationally, there has been a recent surge in reports of CSA and other forms of violence against children. This substantiates the global significance and gravity of the matter, given its magnitude and impact on children. The current study on assessing CSA determinants in Tanzania for the Kilwa–Lindi region is presented as a case study, intending to uncover the socioeconomic determinants of CSA. The primary data were collected from 32 parents/guardians, who were systematically selected from 384 individuals who had reported CSA to social welfare offices. The presented findings were based on the observed meanings and realities that family members and the community ascribed to CSA through the lens of social construction theory. The qualitative data were analysed using Atlas.ti, and the quantitative data was analysed using Microsoft Excel. The following factors influenced CSA in the study area of Kilwa district: the socioeconomic status of women; the belief of community members in witchcraft as a method of purging misfortune and acquiring wealth; the use of remedies for HIV and other incurable diseases; the excessive workload and passivity of parents or guardians; the apathy of community members; the prevalence of myths and sexual taboos among parents or guardians; the ignorance of parents or guardians regarding indicators of CSA; and the scarcity of parental competence. Having the presented findings, it is therefore timely for the government to consider investing in prevention measures such as the early warning signs of CSA among children and parents and the reporting points, among others. The study recommends a comprehensive study on the awareness of CSA warning signs among children and parents in Tanzania.

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INTRODUCTION

Infanticide, cruel and humiliating punishment, abandonment and neglect, sexual abuse, and other forms of violence against children have been documented on a global scale since ancient civilisations (WHO, 2006). Recent evidence regarding the extent and consequences of violence against children indicates that this is a significant and grave worldwide issue (Ibid). It manifests itself in diverse forms and contexts across all nations globally and is frequently ingrained in social, economic, and cultural norms. A multitude of strategies were implemented to combat child sexual abuse (CSA). The establishment of child law and the promulgating numerous international and national conventions are a few examples of these initiatives. Despite these endeavours, the incidence of CSA continues to rise (Buhori, 2019).

It is essential to highlight that the struggle to eliminate child sexual abuse predates the course of human history. The recognition and concern for children's rights became more prominent during the Age of Enlightenment in Europe. Before that, children were considered their parents' property (Chihambakwe & Chisaka, 2016). Cynthia & Brundige (2016) assert that a multitude of maltreatment was inflicted upon children before the Age of Enlightenment. An example of this would be the practice of exchanging girls for matrimony to a different state or clan to establish, maintain, and transmit tranquillity and peace. These practices were implemented without regard for children's well-being or legal rights. Child sexual abuse warning signs are often disregarded, as stated by Buhori (2019), leading to significant media coverage of the incident. On the contrary, the incidents are managed privately, disregarding the child's well-being. Disclosure procedures become even more intricate when the individual responsible for the offence is a family member or a breadwinner.

Banerjee (2017) argues that to safeguard the reputation of the perpetrator and their family among the general public, inadequate attention is often paid to the physiological and psychological welfare of the child. The phenomenon of child sexual abuse affects both male and female children, according to Yemisi (2020); earlier works on CSA portrayed girls as having a higher survival rate than boys (McCran, 2017). Moreover, Furthermore, in Europe, CSA has been reported to range between 2.8% and 18.5%. Cases of CSA in the European continent vary from one country to another. For instance, CSA associated with rape are high in Sweden, Scotland, Northern Ireland, England and Wales, and Belgium (Ferragut et al., 2022).

Similarly, some countries have reported the prevalence of CSA in the Asian countries. In India, only 53,874 cases of child sexual abuse were registered in 2021 under the Protection of Children from Sexual Offences Act of 2012. To enable the all-around protection of children, the Indian government administrated the "Protection of Children from Sexual Offences (POCSO)" Act of 2012 (Solehati et al., 2022). Different reasons for increasing child sexual violence in India include a lack of sex education for parents and children, a stagnant court system and a tendency to encourage rape victims to compromise with the perpetrator, especially when she is a member of the family.

It is noteworthy to mention that despite Africa having the highest incidence of child sexual abuse (Yemisi, 2020), there has been a shortage of research conducted on this particular subject. Work from South Africa has received little consideration (Badoe, 2017). Consequently, the body of research about child sexual abuse in
Africa is still in its nascent stages; Lalor (2004) & Badoe (2017) assert that records are scarce, specifically from the African region. It is generally acknowledged that any endeavours to address child sexual abuse must be informed by accessible records to allocate resources and facilitate planning. Although Africa has the highest prevalence rate of child sexual abuse, there are still numerous cases that remain undisclosed despite the detrimental impact they have on the well-being of the affected child. Therefore, the current study aims to investigate the determinants of child sexual abuse in Tanzania: a case of the Kilwa District-Lindi region.

**LITERATURE REVIEW**

Badoe (2017) conducted a study titled "A Critical Review of Child Abuse and its Management in Africa," with a specific focus on child abuse and its management in the African context. The research was guided by 2016 desk-reviewed Medline literature based in African nations. The review utilised a narrative approach rather than a systematic methodology to examine the existing body of research on child sexual abuse in Africa. In general, the research findings indicate that Africa has produced relatively few published works on child sexual abuse in comparison to other regions. Furthermore, child sexual abuse continues to be enforced through traditional practices, and poverty, both at the individual and household levels, significantly contributes to the vulnerability of children to such abuse. The research advises additional investigations into the prevention of CSA. Even though this study was conducted primarily in Africa and was based on a desk review, it is acknowledged that knowledge of CSA remains limited in Africa and Tanzania in particular.

In 2016, Mantula and Saloojee conducted a study titled "Child Sexual Abuse in Zimbabwe," which put forth strategies to eradicate CSA. A desk review was utilised to collect and analyse the study's data. Notwithstanding the ramifications of CSA not only on children but also on families and communities as a whole, the research findings indicate that the government continues to allocate inadequate resources towards expediting the prevention and management of CSA incidents. Furthermore, the study's results revealed a deficiency in applying the legal structure to safeguard children from CSA. Additional contributing factors included ineffective policies, financial limitations, insufficient personnel to tackle CSA prevention efforts, and insufficient material resources to aid CSA management and prevention. According to the study's recommendations, effective prevention should centre on primary prevention of CSA, which includes government funding for prevention strategies and community participation. Nonetheless, this study has disregarded the fact that knowledge of the determinants of CSA, which is the subject of the present investigation, forms the foundation of CSA prevention measures.

The objective of the research "Characteristics of Child Sexual Abuse in Zambia," which was carried out by Akani et al. (2015) in Zambia, was to identify the physiognomies associated with child sexual abuse (CSA) among University Hospital's sexually abused children. The research employed a cross-sectional methodology. Among the 192 participants, only three were of a specific age; the median age of these subjects was 13, while the mean age was 11. In general, the participants' ages ranged from four to fifteen years. The study's results revealed that CSA had both physical and psychosocial consequences. Additionally, ninety percent of CSA cases handled at the hospital were referred to the police; all CSA offenders were adult males who resided in the neighbourhood and were unrelated.

**Child Sexual Abuse in Tanzania**

Determining the impact of CSA in Tanzania, a study titled "Factors Affecting Child Sexual Abuse in Tanzania: A Case Study of Dodoma Municipality, Tanzania," Msangi (2017) utilised a sample size of 99 participants to collect data. The research process entailed the administration of questionnaires and conducting interviews. According to the results, the magnitude of CSA
increased in the area under study. CSA was also influenced in the study area by poverty, marital discord, family violence, inadequate child-rearing abilities, substance abuse within the community, and marital discord, according to the research. The study suggests that prioritising the prevention of violence and abuse against children should be a national agenda concern. Notably, this investigation was carried out in Dodoma, which is situated in the central region of Tanzania. It has not investigated the factors that determine CSA. Therefore, the present investigation centred on the factors that influence CSA in the Lindi region, situated in the southeastern part of Tanzania.

Abeid et al. (2014) conducted a qualitative study in rural Tanzania titled "Community Perceptions of Rape and Child Sexual Abuse" to investigate the community-level perception of rape among children and women, as well as the factors that hinder the reporting of rape and defilement incidents in Kilombero District. Poverty, globalisation, the erosion of social norms, substance and alcohol abuse, inadequate parental care, and the susceptibility of children were identified by community members as contributing factors to rape and child sexual abuse in the study area during focus group discussions. Based on the study's findings, it can be concluded that social norms significantly impede the reporting of child and female sexual abuse, thereby increasing their susceptibility to rape and defilement. As stated, the perception of the community was the focus of this investigation, which was additionally carried out in an eastern region of Tanzania. As a result, there is a need to undertake an additional investigation into the factors that influence CSA in the Lindi region.

Additionally, McCrann (2017) investigated titled "An Exploratory Study of Child Sexual Abuse in Tanzania." The purpose of the study was to ascertain the reporting rate, characteristics, and perpetrators of child sexual abuse in Tanzania. Data were collected through questionnaires, an interview guide, and a review of reported cases from the 487 subjects of the study. The results established females as a substantial group of CSA perpetrators. Poverty remains, however, a significant contributor to child sexual abuse in Tanzania; the transactional nature of sexual relations, the low status of children, and the avoidance of HIV were all elements that contributed to the patriarchal nature of society and the prevalence of CSA. Therefore, the present investigation into the factors that influence CSA is suggested as a contribution to the research on CSA prevention. It is crucial to acknowledge that this research was carried out among students enrolled at the University of Dar es Salaam; therefore, the Lindi region remained outside the study's purview. Therefore, it is imperative to undertake targeted research concentrating on the factors influencing CSA in the Lindi region.

Mangi et al. (2017) conducted a qualitative study titled "Factors Associated with Child Sexual Abuse in Tanzania: A Study of the Context, Forms, and Perpetrators of Child Sexual Abuse in the Following Regions: Dar es Salaam, Kagera, Manyara, Dodoma, Tabora, Ruvuma, Iringa, and Zanzibar." The study identified factors that are associated with CSA in Tanzania. The research used interviews with key informants, including children and adults who had survived the CSA in the regions above. The results of the study suggest that instances of anal and vaginal perpetration were recognised, albeit with low rates of reporting attributed to social stigma and shame. Inadequate parenting abilities, poverty, urbanisation, and exposure to foreign cultures were also identified as factors associated with CSA in the study. In addition, residential buildings, Muslim children's classes (madrassas), recreational areas, and unfinished structures were identified in areas where CSA is prevalent. In its conclusion, the study recommended that parents and survivors be incentivised to report instances of CSA. This study emphasises that Lindi was not included in the regions where the research was carried out. Additionally, the study identifies parental skills and poverty as factors associated with CSA. Therefore, this research study leaves an area of incomplete knowledge regarding the factors that influence CSA in the Lindi region.

Notwithstanding the challenges that have been identified, such as the scarcity of documentation
regarding the psychological and physiological effects of abuses on the surviving child, the African region has implemented specific initiatives to address the issue, according to the African Child Policy Forum (2016). An exceptional development in the area is the creation of the African Charter on the Rights and Welfare of the Child (African Union, 1990). Numerous nations have ratified the Charter, which incorporated the principles of the UNCRS while considering the circumstances and ambitions of children in Africa, rendering it domestic. The Charter, specifically in articles 21 and 29, designates state governments with the duty to ensure that children’s rights are suitably promoted and safeguarded and to ensure the general welfare of children. Child sexual exploitation is deemed illegal at the national level by subsections 1 to 3 of section 83 of the Law of the Child Act (2009), as amended in 2019.

By enacting the Law of the Child Act in 2009 and attempting to mainstream the UNCRC and the ACRWC, the Tanzanian government has demonstrated its commitment to advancing children’s rights and protecting them from all forms of exploitation and abuse, with a particular emphasis on child sexual abuse. However, despite the well-meaning intentions of the government to protect children, the alarming prevalence of child sexual abuse continues to persist. For example, the URT (2013) recorded 482 cases, whereas the NBS accumulated 530,238 cases in 2014, 2015, and 2016 and 6,985 cases in 2016, respectively. Thirteen thousand four hundred fifty-seven incidents of child sexual abuse were documented by USAID in 2016; the Legal Human Rights Centre tallied 3,709 incidents in 2019 and 6,376 incidents in 2018. McCrann (2017) cited poverty, the transactional nature of sexual relations, the devalued status of children, and the avoidance of HIV as contributing factors to CSA; Badoe (2017) substantiated this claim by linking CSA to traditional practices and poverty; Mangi et al. (2017) identified poverty, urbanisation, foreign culture, and inadequate parenting abilities as contributing factors to CSA. Moreover, Msangi (2017) emphasised the presence of poverty, marital discord, domestic violence, inadequate child-rearing abilities, and substance abuse within the community; Mantula & Saloojee (2016) disclosed that the government allocated insufficient funds to expedite the prevention and management of child sexual abuse incidents; inadequate human resources to address CSA.
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theory has provided support for the findings of this research, as parents continue to adhere to traditional practices that prevent them from discussing sexual relations with their children. Because of the connotation associated with sexuality, parents are unable to discuss it with their children; consequently, their children fall victim to CSA perpetrators.

METHODS AND MATERIALS

The research was conducted in Lindi, a district in the Kilwa region of southern Tanzania. Established as a result of interactions between Asia, Europe, and Tanzania inhabitants, this district is the oldest town along the Indian Ocean (URT, 2017). According to URT (2020), Kilwa district recorded a cumulative count of 617 CSA cases, compared to 1,554 CSA cases documented in 2019. In addition to other factors, the Kilwa district was chosen due to its significant CSA prevalence in 2021. In general, 1291 children were subjected to sexual abuse in 2021; 535 were boys, and 756 were girls. Furthermore, the following districts documented cases: 72 in Mtama district, 261 in Liwale, 121 in Ruangwa, 141 in Nachingwea, 384 in Kilwa, and 312 in Lindi municipal (URT, 2021).

The descriptive research design utilised in this study enabled data collection from key informants in their authentic environments (Campbell et al., 2017). Given that the names of the adolescents and their parents were kept by the Regional Social Welfare office, as pointed out by Thomas (2020), systematic sampling was ideal for this study to avoid bias. The determined interval was 12, which assisted in selecting systematically the 32 individuals from 384. Furthermore, throughout the process of gathering qualitative data, the principle of saturation was adhered to prevent the inclusion of redundant concepts (Campbell et al., 2017). The Atlas to software was utilised to analyse the qualitative data gathered (Version 10). After conducting each interview, the qualitative data were initially transcribed verbatim. The acquired qualitative data was translated into English after the completion of the transcription process. The codes were subsequently developed, and preliminary coding was performed with the software. Following that, themes and subthemes were generated using the encoded content. Finally, pertinent themes were chosen to be presented beneath each variable. Concurrently, the percentages for each demographic variable were derived from an Excel analysis of the demographic data.

RESULTS PRESENTATION

This section on the results has two subsections, namely, the presentation of demographical information and the assessment of the determinants of child sexual abuse among children in the Lindi region, in the district of Kilwa;

Demographic Information of the Research Subjects

Regarding demographic information, the study incorporated the subsequent variables: age group, marital status, parent-child relationship, and level of education. In general, 1291 children were subjected to sexual abuse in 2021; 535 were boys, and 756 were girls. Furthermore, the following districts documented cases: 72 in Mtama district, 261 in Liwale, 121 in Ruangwa, 141 in Nachingwea, 384 in Kilwa, and 312 in Lindi municipal (URT, 2021).

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Determinants of Child Sexual Abuse

The determinants of CSA in the Kilwa-Lindi region were identified in this study as follows: the socioeconomic status of women; participants' beliefs in witchcraft; purification of dire misfortune and the source of wealth; cures for HIV and other incurable diseases; the occupation of parents or guardians; community members' passivity; parental or guardian ignorance of CSA warning signs; and myths and sexual taboos among parents or guardians. Detailed information regarding each determinant are provided below:

The Socioeconomic Status of Women

In contrast to their counterparts, who are fearful of the future, mainly when the perpetrator is the head of the family and the breadwinner, women with a stable economic status are more likely to pursue CSA in court, according to the observations of the study participants. The essence of this was demonstrated through the interview with the key informant:

"Disclosing the CSA incident involving my spouse could potentially alienate my family; additionally, the community's perception of me could be negatively impacted if they learn that the child's father is responsible for the sexual abuse of his child. Considering the preceding, a woman should maintain silence, despite the pain it may cause."

Aligned with this observation, an additional woman demonstrated,

"I do not work or participate in any socioeconomic activities; I am concerned that my husband could be imprisoned if I report the CSA incident to the police. Additionally, they lack a support system for themselves and their other children. They must, therefore, maintain silence so that other children may develop while their sister endures excruciating pain."

The results regarding the influence of socioeconomic status on CSA indicate that the position of women within the household plays a substantial role in promoting and safeguarding the rights of children against CSA.

Witchcraft Beliefs among Community Members

Within the Sub-Saharan African context, misfortune and failure in all endeavours and pursuits are ascribed to witchcraft. It functions similarly to a displacement point where reasons beyond immediate resolution are attributed to witchcraft. Using two variables—purification from terrible adversity and the source of wealth and treatment for HIV and other incurable diseases—the results of this research have successfully identified determinants linked to witchcraft beliefs. Supplementary information is presented below:

Cleansing of Dire Misfortune and Source of Richness

Irrespective of an individual's level of education and experience in the field, there remains a prevalent inclination to believe that one must devise a solution to rectify any adverse occurrences. While this may not seem objectionable, within the framework of the CSA determinants, the results indicate that falling short of one's intended objectives is attributable to unfortunate circumstances; conversely, failing to amass wealth results from misfortune that necessitates resolution. The following was used to illustrate this to the participants:

"As individual and family poverty increases, some individuals conclude that their lack of success is attributable to bad luck that requires the assistance of a witch doctor."

An additional participant concurred with the depiction above while emphasising the prevalent strategies employed by witch doctors.

"Before regaining lost fortune and wealth, witch doctors typically advise their clients, who are typically men, to engage in sexual abuse of children."

As evidenced by the fact that, among other things, they are utilised to restore prosperity and good
fortune, children are utilised as a point of displacement, according to these findings.

**Cure of HIV and Other Incurable Diseases**

Some people, particularly men, continue to believe that child sexual abuse can cure HIV despite numerous efforts to raise awareness about the causes and prevention of the virus. One of the participants provided an example of this.

"Witch doctors are a major contributor to the rise in CSA victimisation; when certain men test positive for HIV, they are instructed to abuse a child as a cure sexually."

Another participant illustrated the substantial impact that witch doctors had on undermining the rights and livelihoods of children.

"Many individuals neglect to engage in introspection and consider the repercussions of their actions as a result of their unwavering reliance on the witch doctor's illustrations."

Evidence suggests that despite the decline in illiteracy in Tanzania, where enlightenment is prevalent, many religious individuals continue to seek consultations from witch doctors regarding the treatment of HIV and other incurable diseases through sexually abusing children.

**Over Occupation of Parents or Guardians**

Parents are compelled to work extended hours while away from home due to the demands imposed by globalisation. While the children are asleep late at night, they typically return home. Weary from lack of sleep, the parents cannot identify a challenge their children are facing or monitor any changes in behaviour. Children develop a coping mechanism to manage the separation from their parents. As a consequence, a considerable number of them become the property of CSA agents. The following serves to illustrate this.

"In contrast to the past, when women were expected to remain at home and care for the children, men and women are now required to support one another to earn sufficient income to provide for their families."

Another participant, concurring with this observation, disclosed the following:

"I "It is frequent for parents or guardians to arrive home late, exhausted. They cannot connect with their children or engage in conversation with them. The child ultimately misses the support that their parents provided."

As indicated by the findings, parents are preoccupied with providing for the needs of their families. They have, nevertheless, neglected their principal responsibility of safeguarding their children from violence and all types of abuse.

**The Passivity Practice among Community Members**

Certain community members hold the belief that their children are impervious to CSA, that it is irrelevant for them if the same thing were to occur to another child. Parents are held accountable for their children's lack of adequate protection. Adopting such a mindset prevents them from gaining insight into the locations where CSA occurs and the most prevalent perpetrators of CSA. As such, this was demonstrated:

"Ending CSA in a community where an incident involving your child is treated as a private matter while other members of the community continue with their daily activities is difficult."

Another participant concurred with the aforementioned and elaborated,

"This passivity contributes significantly to the reluctance of some community members to provide courtroom testimony because they believe the occurrence of CSA that must occur to a child is none of their business."

In general, the culture of passivity significantly contributes to the degradation of children's rights when members of the community fail to unite in opposition to the continuation of measures that harm the welfare and well-being of children.
**Myths and Sexual Taboos among Parents/Guardians**

Historically, it has been customary for parents or guardians to refrain from discussing matters about sexual intercourse with their children. This belief creates a knowledge gap in which children have no recourse to their parents concerning any sexuality-related misunderstandings. However, the perpetrators of the CSA are aware of the prevailing deficiency and exploit it. The participants were provided with the following illustration:

“Traditional beliefs continue to restrict elders from discussing matters of sexuality in the presence of their children. Discussing it with certain elders is akin to instructing them to carry it out before the appropriate moment.”

Constraint-free, an additional participant demonstrated,

“I "A widespread belief among parents is that discussing sexuality-related topics would be contrary to their culture and customs. As a result, they avoid discussing such matters. Children are not permitted to discuss sexual relations with adults, as doing so is considered impolite and inappropriate in the eyes of their parents and the larger community.”

In the context of parents who continue to adhere to the traditional belief that sexuality should not be discussed with their children, the results suggest that Tanzania's goal of having zero cases of CSA remains unattainable. So that the CSA perpetrators do not persist in exploiting this vulnerability to achieve their evil goals, it is necessary to address this substantial deficiency.

**Limited Knowledge of CSA Warning Signs among Parents/Guardians**

Comprehending CSA warning signs is necessary to respond to incidents of reporting CSA. In the absence of it, it is impossible to assert that one can safeguard a child from CSA incidents. For illustration,

"We must dispatch any children to the store in search of food because we work long hours and return home late. We presume the child is safe even though no one inquires whether anything has transpired when they return."

She elaborated on the CSA warning signs while supporting these views, stating,

"Parents or guardians in this area are not aware of CSA warning signs; many of us do not inquire about the child's current situation until she or he or she reports feeling unwell or becoming pregnant."

According to the findings, the parents/guardians of Kilwa continue to have a significant lack of awareness regarding CSA warning signs. Consequently, the same knowledge must be imparted to safeguard children.

**Lack of Parental Skills**

The findings indicate that the proportion of parents lacking parental skills is rising. They encounter difficulties in dedicating sufficient time to their children and establishing a connection with them on a personal level that would encourage them to share their struggles and difficulties. This was exemplified as follows:

"While some parents continue to adhere to the outdated belief that children should only communicate with their mothers, a child has two parents, and each is responsible for providing emotional support and affection. Moreover, some parents are uninformed about how to spend quality time with their children and how to encourage them to relax and open up to them."

In agreement with this remark, an additional participant stated,

"Many of us here were ignorant of children's rights; we cannot be good parents without this understanding."

Parenting abilities are critical for guaranteeing children's rights and providing affection, care, and sympathy from their guardians.
DISCUSSION

This section provided an in-depth discussion on the demographic information of participants and the determinants of CSA in Kilwa – Tanzania. More details are provided as follows;

Demographic Information of Participants

Age category, marital status, relationship with the child, and level of education constituted the four demographic variables that constituted the focus of this study. As these variables are associated with the conduct and customs of the populace, Thriven & Rama (2018) assert that they are significant. Moreover, Lyimo (2017) disclosed that children's welfare studies tend to have a higher proportion of female participants than male participants, a finding that is consistent with the present investigation. Additionally, a growing concern arises regarding the possibility that grandparents will take on the responsibility of caring for and instructing children while their biological parents are engaged in socioeconomic endeavours. This is the case because many children were identified in this study as residing with their grandparents or other relatives.

Furthermore, the educational attainment of women, a factor that impacts their socioeconomic standing, was inadequate. This deficiency could hinder their ability to obtain knowledge regarding household livelihood opportunities and parental care. Furthermore, without mandatory qualifications, individuals often settle for job offers that pay the bare minimum wage and require extended work hours for survival.

Determinants of Child Sexual Abuse in Kilwa - Tanzania

In light of their educational attainment, the results suggest that women from lower socioeconomic strata cannot reveal or document the prevalence of CSA. If the perpetrator is incarcerated, they are concerned for the family's future. When the breadwinner is involved, they also prioritise protecting the reputation of the family and the offender in the eyes of the community. Therefore, it can be argued that adequate socioeconomic status for women empowers them to advocate for the rights of children, specifically with regard to CSA, which is being considered as a potential solution to the escalating incidence of CSA in Kilwa. Consistent with the conclusions drawn by Buhori (2023) and Buhori (2019), the results of this study indicate that disclosing the disappearance of a family head or breadwinner requires more than mere bravery. Doing so engenders ire, tarnishes the family's reputation and integrity in the eyes of the community, and ultimately incitement among family members, particularly when the wife exposes the situation. Thus, whether the incidence of CSA decreases or increases is directly proportional to the socioeconomic status of women. In contrast to popular belief, women of higher socioeconomic status are more inclined to report such incidents due to their independent means of subsistence, which does not rely on men's income.

Moreover, the purification of ill fortune, the origin of wealth, the treatment of HIV, and other incurable illnesses were all identified in this study as beliefs and practices associated with witchcraft. These results indicate that children are subjected to sexual abuse due to their perceived ability to rectify bad luck or restore prosperity, as well as to cure incurable diseases like HIV. People continue to believe that the witch doctor can bestow wealth upon them; these individuals can achieve success in life and transform into anyone they choose. In other words, numerous Tanzanians continue to be influenced, instructed, and have their destinies predetermined by witch doctors, thereby perpetuating the influence of myths and superstitions in their culture. These results were consistent with the conclusions drawn by McCrann (2017), Lema (1997), and Oestigaard (2014), which stated that many Tanzanians are dominated in their thinking by myths and superstitions.

Furthermore, within the framework of Sub-Saharan Africa, misfortune and lack of success in life's pursuits and endeavours are ascribed to witchcraft. It is comparable to the point of displacement where any explanation for a predicament other than seeking an immediate
resolution is attributed to witchcraft. Diverse superstitions and myths may be concluded to be linked to the rise in CSA cases.

Furthermore, this research unveiled that an element contributing to CSA is the excessive involvement of parents or guardians in socioeconomic activities. As a result of globalisation-induced changes in family structure and increased financial obligations, both parents are required to work to provide for their families. Many parents from low socioeconomic backgrounds are labourers, enduring extended work hours for meagre compensation due to the formal sector's stringent educational requirements that preclude the acquisition of such skills through formal education. Typically, they depart their residences early in the morning while their children are still in bed and return late at night when exhausted and sound asleep. As a result of working seven days a week, they cannot listen to, counsel, or converse with their children.

Conversely, perpetrators of CSA exploit the situation, knowing that there is no one to relay or clarify information should the child have any doubts regarding it. These results are consistent with those of Buhori & Buyoya (2024), who acknowledged parents’ crucial role in assisting and safeguarding their children from CSA. The lack of parental presence hinders children from acquiring the essential knowledge required to decipher numerous uncertain matters.

As one of the determinants of CSA, this study also identified passivity practices among community members and the excessive concern of parents or guardians. Passivity is associated with several factors, including a reluctance to participate in giving testimony and writing reports to authority, the belief that one's child is safe and that inadequate parental protection is the cause of child abuse and the belief that community leaders and police officers are responsible for ensuring the safety of children. These determinants promote a state of passivity among members of the community. Consequently, these elements contribute to the passivity that results in the low reporting of CSA cases. The findings of this study were corroborated by Kisanga (2012), who demonstrated that passivity in the community continues to impede the government's efforts to safeguard children from CSA.

In Tanzania, specifically in Kilwa, parental or guardian misconceptions and sexual taboos were also identified as a factor in CSA by this study. It is customary for children to demonstrate reverence for their elders through non-destructive conduct, as per cultural norms. Preventing inquiries about sexual intercourse is a manner in which children can demonstrate respect, as doing so stigmatises them in the eyes of adults and the general public. Children are discouraged from inquiring about and discussing CSA with their parents or guardians despite the practice's incalculable repercussions regarding the elimination of CSA cases. By the research above, Plummer & Njuguna (2009), Wamoiy et al. (2010), Sika-Bright & Nnorom (2013), and Wamoiy et al. (2010) have noted that parental/guardian misconceptions and sexual taboos persistently contribute to the rise in CSA cases. Conversely, to what is the case, children are not permitted to inquire about or discuss sexual intercourse with their parents.

Moreover, this research acknowledged that awareness of CSA warning signs is crucial in eradicating CSA cases in Kilwa, Tanzania. Nevertheless, this research revealed that community members have a limited understanding of CSA warning signs, such as the earlier warning signs, perpetrators, locations where CSA occurs, reporting sites, preventative measures, deceptive techniques employed by perpetrators, and the immediate and long-term consequences of CSA. One can effectively mitigate the financial burden of subsequent remedial actions for CSA by utilising knowledge of warning signs to guide preventative measures. Therefore, It is necessary to equip community members with this information to safeguard children from CSA. Moreover, parents must acquire this information to be better equipped to assist their children with sexuality-related concerns. Consistent with these results, Buhori (2019) demonstrated that a lack of awareness...
regarding the warning signs of CSA is a direct cause of the rising incidence of the disease; thus, disseminating this information would effectively counteract the spread of CSA. Furthermore, according to Buhori (2023) and Buhori (2024), the initial step in problem mitigation is to identify the causes of the issue, followed by the indicators that enable the victims to be recognised and provided appropriate support. Consequently, the survivors cannot be assisted in continuing their lives in the absence of awareness regarding CSA symptoms.

CONCLUSION
The study findings have shown that the efforts to ensure child protection against CSA are perpetuated by socioeconomic factors, which are engulfed around human selfishness, especially among men who firmly stand for traditional norms. For a successful intervention to protect children against the determinants of CSA, the government has to invest in child protection efforts, where children and parents can be equipped with early warning signs of CSA symptoms.

Recommendations
The research indicates that to eradicate CSA, it is recommended that various actors—the government, stakeholders, communities, parents, and individuals—increase their financial investments in providing relevant information regarding CSA prevention, establishing transparent mechanisms to address each identified CSA determinant, and fostering an inclusive atmosphere where children feel comfortable sharing their intriguing anecdotes. Moreover, communities, parents, and individuals should invest more in disseminating pertinent information about the prevention of CSA, creating visible mechanisms to combat each identified determinant of CSA, and cultivating a welcoming environment where children can easily share their fascinating stories.

Further, comprehensive research on costs involved in handling investigation from the initial point when it is reported, the physiological treatment of the child, the psychological costs, and the court costs proceedings, have to be researched and disseminated to the government, particularly the planners and the community. This would support the planners and decision-makers in being informed and deciding to invest in prevention measures after becoming aware of the determinants of CSA in Tanzania.

REFERENCES


