

## CHILD SEXUAL EXPLOITATION AND ABUSE: CULTURAL, SOCIAL, AND INSTITUTIONAL FACTORS OF RISK IN ARMENIA

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**Abstract:** Child Sexual Exploitation and Abuse (CSEA) remains a critical yet underreported issue in Armenia due to deeply rooted cultural, social, and legal barriers to reveal potential risks. This study explores the challenges surrounding the disclosure of CSEA cases, examining the roles of victims, families, professionals, and legal institutions in addressing this form of violence. Using a multidisciplinary approach, the research highlights how stigma, fear of social repercussions, and distrust in authorities contribute to the silence surrounding CSEA. The paper also investigates the role of gatekeepers in facilitating or hindering disclosure and research efforts involving child victims. Furthermore, the study emphasizes the need for culturally sensitive methodologies that align with local traditions while maintaining scientific rigor and ethical integrity. Findings suggest that improving legal frameworks, strengthening victim support services, and fostering public awareness are essential steps toward breaking the silence and ensuring child protection in Armenia.

**Keywords:** *Child Sexual Exploitation and Abuse (CSEA), Armenia, Expert Interviews, Child Protection, Public Health, Disclosure Barriers and Facilitators, Cultural Sensitivity, Social Stigma.*

### Introduction: Legal and Social Aspects of the Issue

Child sexual exploitation and abuse (CSEA) is a grave violation of children's rights and a significant public health concern worldwide. Despite growing global awareness and



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research on CSEA, understanding of the issue remains limited in certain regions, including Armenia, where cultural norms, societal taboos, and insufficient data collection hinder efforts to address the problem. In many societies, including Armenia, discussing sexual abuse, particularly involving children, is often stigmatized, leading to underreporting and a lack of comprehensive strategies for prevention and intervention.

Sexual exploitation and sexual violence against children are serious and often hidden issues that directly affect children's well-being. Combating sexual exploitation and sexual violence against children is a priority in Armenia, especially since the ratification of the Lanzarote Convention in 2020, which aims to protect children from sexual exploitation and abuse (Council of Europe, 2007). To develop effective prevention programs and support services, it is essential to conduct surveys among children to understand their level of awareness, attitudes, and experiences regarding sexual exploitation and sexual violence.

The United Nations Children's Fund (2023) provides a comprehensive international definition of violence against children, describing it as "any deliberate, unwanted, and non-essential act of a sexual nature, either completed or attempted, that is perpetrated against a child, including for exploitative purposes, and that results in or has a high likelihood of resulting in injury, pain, or psychological suffering." For the purpose of generating global and regional estimates, sexual violence is broadly classified into two main categories: contact sexual violence (including rape and sexual assault) and non-contact sexual violence. These categories align with the framework established in the *International Classification of Violence against Children* (United Nations Children's Fund, 2023).

In the Armenian legal context, it is essential to differentiate between three terms that can be identified as CSEA when the subject is a child. **Sexual harassment** is defined in Article 3.3, "Prohibition of violence or sexual harassment at work (in the workplace)," of the Labor Code of the Republic of Armenia (Government of RA, 2023). **Sexual violence in the context of domestic violence** is addressed in the *Law on Prevention of Domestic Violence and Protection of Persons Subjected to Domestic Violence* (Government of RA, 2017). **Sexual crimes** are defined in Articles 198-199 of Chapter 18, "Crimes Against Sexual Inviolability and Sexual Freedom," in the Criminal Code of the Republic of Armenia, with Articles 200-202 specifically addressing offenses against children (Government of RA, 2021). Furthermore, protection of children from violence is subject to number of legal acts. In general, the regulations under the "Law on Child Rights" (RA National Assembly, 1996), Article 9, defines the right of every child to be protected from any kind of violence, including protection from the parents and legal representatives.

Understanding the real scope of CSEA on national level presents significant theoretical and practical challenges. These difficulties and lack of data hinder the development and implementation of effective measures to protect this vulnerable population. Over the past century, global interest in researching CSEA has steadily increased. However, a critical question remains regarding the correlation between heightened research interest and the level of case disclosure. The prevalence of sexual violence varies considerably across regions and countries, with factors such as older age, lower national income, and school-based survey methodologies linked to higher reported rates (Piolanti et al., 2025). In certain countries where CSEA remains a taboo,

disclosure rates are relatively low. This is often due to societal pressures that encourage concealing such incidents to avoid punishment, shame, and victim-blaming. Conversely, in countries that offer more robust protection and support for victims, disclosure rates tend to be higher (Alaggia, Collin-Vézina, & Lateef, 2019).

Catton, Dorahy, and Yogeeswaran (2023) provide empirical evidence that the fear of experiencing shame plays a significant role in individuals' decisions regarding disclosure (Catton, Dorahy, & Yogeeswaran, 2023). A systematic review of quantitative studies conducted by Latiff, Fang, Goh, and Tan (2024) between 2000 and 2022 identified 17 significant factors influencing sexual abuse disclosure barriers to disclosure were linked to intellectual disabilities, avoidant coping strategies, romantic involvement with the perpetrator, family criminality, domestic violence, adherence to traditional values, and ethnic minority status (Latiff, Fang, Goh, & Tan, 2024).

Alaggia, Collin-Vézina, and Lateef (2017) highlight that obstacles to disclosure of CSEA remain more significant than factors that facilitate it. These barriers include younger age, being male and the related stigma, familial ties to the perpetrator, internal struggles such as shame, self-blame, and fear, as well as family dynamics like dysfunction and abuse. Additionally, environmental and cultural factors, such as limited support from neighbors and schools and societal stigma, further hinder disclosure (Alaggia, Collin-Vézina, & Lateef, 2017). The results of the analysis of the situational factors of child sexual abuse conducted by Eritsyan, Odinokova, and Rusakova (2023) also support the idea, that the environment plays a significant role in preventing or enabling sexual violence against children. That is, public awareness and attitudes towards these issues, as well as the capacity to recognize and address risk of abuse, are of substantial importance in regards to preventing or adequately addressing the cases of sexual abuse against children (Eritsyan, Odinokova, and Rusakova, 2023).

Researchers in societies where issues related to sexuality are heavily stigmatized often refrain from pursuing this line of study. Factors such as limited research viability, insufficient funding, and the risk of social ostracization contribute to the scarcity of scholarly work on this critical issue in such regions.

These research findings indicate that reported cases of violence—those registered within the justice system—represent only a small fraction of the total incidents, as many children do not disclose their experiences to adults.

## Global Statistics on CSEA Prevalence

The United Nations Children's Fund (2024) underscores the alarming global prevalence of sexual violence against children. According to their findings, 650 million girls and women worldwide (or 1 in 5) have experienced sexual violence during childhood. Among boys and men, the estimated number ranges between 410 and 530 million, representing approximately 1 in 7 individuals who faced sexual violence as children (United Nations Children's Fund, 2024).

A recent systematic review and meta-analysis by Piolanti et al. (2025) explored the prevalence of sexual violence against children, analyzing data from 165 studies that included 958,182 children across 80 countries, with a primary focus on girls (58.2%). The studies had sample sizes ranging from 330 to 132,948, and the mean age of participants varied from 10.5 to 19.4 years. Lifetime sexual harassment emerged as the most prevalent form of sexual violence, affecting 11.4% of children, followed by any

contact sexual violence at 8.7%. Additionally, 6.1% of children reported experiencing completed forced sexual intercourse in their lifetime, while 1.3% reported such experiences within the past year. Girls reported higher rates of lifetime completed forced sexual intercourse (6.8%) compared to boys (3.3%) (Piolanti et al., 2025).

Statistics on CSEA across the globe indicate a rising trend in sexual violence cases, largely driven by the widespread proliferation of internet-facilitated sexual crimes. According to the Prosecutor General's Office of Russia, 16,887 sexual offenses against children were recorded in 2021, marking a 44% increase compared to 2010 (Mamikonyan, 2022). Similarly, the German Federal Criminal Police Office reports an approximately 20% increase in the number of registered cases of sexual abuse against children over a five-year period since 2019 (Bundeskriminalamt, 2024).

### **Research on CSEA in Armenia**

Among national population-based surveys on violence, Armenia conducts the Demographic and Health Survey (DHS). However, other key surveys, such as the Multiple Indicator Cluster Survey (MICS), Violence Against Children Survey (VACS), Global School-based Student Health Survey (GSHS), and Adverse Childhood Experiences Survey (ACES), are not utilized (World Health Organization, 2020).

On one hand, there are intense discussions in Armenian media outlets and on social media regarding disclosed cases of sexual violence against children. On the other hand, there is a noticeable absence of population-based surveys or research providing estimated prevalence rates or analyzing the dynamics of sexual violence against children in Armenia. Antonyan (2016) in her study of violence against children in the context of child safeguarding, notices that the risk of violence is mainly correlated with the environmental factors existing in the family setting, including parents' attitudes towards children, which can significantly raise the probability of violence (Antonyan, 2016).

In the study conducted by Azatyan, Azizian, and Hakobyan (2022), 10% of adult respondents reported having been sexually abused during childhood (Azatyan, Azizian, & Hakobyan, 2022). Yacoubian (2022) discusses Armenia's residential childcare institutions in the context of international child protection. According to his research only a small minority (31%) of children reported having had an educational seminar on sexual abuse or having had discussions with facility staff about sexual abuse (23%), suggesting that the problem is either ignored or that it is such a non-issue that formal processes to educate on the potential dangers of sexual abuse are perceived as unnecessary. A high majority (97%) reported never having been touched or been asked to touch someone else in a sexual way, and no children had ever been offered money to do sexual things. The few incidents of "inappropriate touching" were between children (Yacoubian, 2022).

There is a lack of survey data on CSEA in Armenia, and no mechanisms are in place for the periodic measurement and reporting of this issue by state institutions or NGOs. The only available data comes regularly from the Investigative Committee of the Republic of Armenia, which compiles statistics on crimes against minors, including CSEA.

## Official Statistics on Criminal Proceedings and Cases of CSEA in Armenia

The statistics published on the official website of the Investigative Committee of the Republic of Armenia reveal a significant increase in the number of criminal proceedings concerning crimes committed against minors. In 2022, 545 proceedings were initiated, which rose to 1,159 in 2023. Remarkably, during just the first six months of 2024, 1,032 proceedings were already recorded (Investigative Committee of the Republic of Armenia, 2022, 2023, 2024). Of these cases, 66 were referred to court in 2022, 78 in 2023, and 64 during the first half of 2024, accounting for 12.1% in 2022, 6.7% in 2023, and 6.2% during the first six months of 2024. Crimes related to the sexual exploitation and abuse of minors accounted for 27.3% of all cases sent to court in 2022, 17.9% in 2023, and 25% during the first six months of 2024.

Statistics on defendants indicate that, in cases of crimes committed against minors, the largest group of defendants consists of the minor victims' family members, which aligns with global trends. Notably, the percentage of family members involved as defendants decreased significantly from 45.2% in 2022 to 26.9% in the first half of 2024 (see table 1).

**Table 1. Statistics on Defendants in Cases of Crimes Committed Against Minors Sent to Court**

(Investigative Committee of the Republic of Armenia, 2022, 2023, 2024)

Category	2022 (Jan–Dec)		2023 (Jan–Dec)		2024 (Jan–June)	
	Number	%	Number	%	Number	%
Other persons	36	49.3	50	61	44	65.7
A family member of the minor victim	33	45.2	29	35.4	18	26.9
Employee of an educational or childcare facility	4	5.5	-	-	4	6
Guardian or trustee	-	-	2	2.4	1	1.5
Employee of a healthcare facility	-	-	1	1.2	-	-
<b>Total number of defendants</b>	<b>73</b>	<b>100</b>	<b>82</b>	<b>100</b>	<b>67</b>	<b>100</b>

The statistics on victims of CSEA indicate that the percentage of victims younger than 12 years old remains notably high, though it has decreased from 38.5% in 2023 to 34.5% in the first half of 2024. Data on victims by sex is not available.

**Table 2. Statistics on Minor Victims in Cases Sent to the Court**

(Investigative Committee of the Republic of Armenia, 2022, 2023, 2024)

Age Group	2023 (January–December)		2024 (January–June)	
	Number	%	Number	%
Younger than 12 years old	35	38.5	27	34.5

Age Group	2023 (January–December)		2024 (January–June)	
12–14 years old		17	18.7	16
14–16 years old		19	20.9	16
16–18 years old		20	21.9	19
<b>Total number of minor victims</b>	<b>91</b>	<b>100</b>		<b>78</b>
				<b>100</b>

The number of registered cases in Armenia equals 1 out of 10,000 children experiencing sexual violence per year, which is a very low indicator compared to the global statistics discussed above. While official statistics provide an important reference for understanding CSEA trends in Armenia, it offers an incomplete picture of the problem. The statistics do not provide a breakdown by gender, making it impossible to determine whether boys or girls are more affected. There is no classification based on perpetrator relationships beyond broad categories (family, non-family). More detailed information about offenders (e.g., neighbors, peers, strangers) and the circumstances of abuse—such as whether it occurred at home, outdoors, in an institution, or involved the use of the internet and digital technology—could provide deeper insights into patterns of victimization. Finally, given the challenges in crime disclosure, the official statistics represent only the “tip of the iceberg”.

This lack of comprehensive, systematically collected data on CSEA leads to gaps in policy development and intervention strategies.

## Method

This study seeks to gather insights into the legal, social, and contextual factors contributing to the vulnerability of children to CSEA in Armenia. The objective of the expert interviews was to gain insight into the professional experiences of specialists in Armenia regarding the study, detection, and prevention of sexual violence against children. Given the sensitive nature of CSEA and the high rates of underreporting in Armenia, expert interviews served as a **safe, ethical, and indirect approach** to gathering data on **prevalence, risk factors, best research practices, and institutional responses** to CSEA.

The **semi-structured expert interviews** addressed the following research questions:

1. How is child sexual exploitation and abuse perceived and addressed within the Armenian context?
2. What social, institutional, and cultural barriers exist to the disclosure of CSEA cases in Armenia?
3. What potential impact does the disclosure of CSEA have on Armenian children, their parents, and helping professionals?
4. What roles do different gatekeepers play in research involving children, particularly in facilitating or hindering research efforts?

Interviews were conducted both online and in person. In-person interviews were audio-recorded using a dictaphone, while online interviews were recorded through a videoconferencing platform.

### *Participant Selection and Recruitment*

A combined **purposive and snowball sampling** approach was employed to recruit professionals from education, child protection, public health, and various governmental and nongovernmental agencies. The sampling process began by mapping all potential respondents with experience relevant to the research questions. Recruitment strategies included utilizing the pre-existing professional networks and contacts of the research team members. Participants were drawn from the following professional groups:

1. Gatekeepers from the education system/social care system (i.e. local government, director of organization, head teacher), i.e. people sanctioning the research in their domain and being a conduit or advocate for the research to parents and children.
2. Psychologists and social workers working with children in education and child protection systems (both the general population and children at risk or victims of CSEA) with experience managing CSEA cases.
3. Researchers from the academia and NGOs with experience conducting research with children on sensitive topics, including child abuse.
4. Lawyers with experience in child protection, response to child abuse and legal regulations regarding the duties of the research team to respond to child abuse disclosure.
5. NGO workers with expertise in prevention and response to child abuse.

A research information sheet was provided to potential respondents to inform them about the study and the conditions for participation. Following initial contact with the study researchers and preliminary agreement to participate, the research information sheet and a participant consent form were sent to respondents via email.

A total of **25 semi-structured expert interviews** were conducted to ensure information saturation. The sample included 8 social workers, 5 psychologists, 4 lawyers, 4 researchers, 2 doctors, and 2 pedagogues, each with 5 to 25 years of experience working with or researching child victims of sexual violence. Among the participants, 13 were affiliated with local and international NGOs, 4 represented local self-government bodies, 3 were from universities, 3 worked with research companies, and 2 were forensic experts.

#### *Ethical Considerations*

The interviews were preceded by obtaining verbal voluntary informed consent from all participants. The audio recordings were transcribed by a professional transcription service operating under a confidentiality agreement. Transcripts were assigned participant identification numbers, which were linked solely to basic demographic details, such as profession, geographic region (marz), gender, and years of experience. Each participant was recorded in a password-protected database, with access restricted exclusively to members of the research team.

Transcripts were saved with password protection and labeled with the corresponding participant ID. Audio recordings were deleted after the completion of the analysis.

Collecting data on children's experiences of violence is a complex process, presenting substantial ethical and methodological challenges (Melkonyan, Melkumyan, Karapetyan, & Hakobyan, 2024). To mitigate the risk of disclosing identifying information about children who have been sexually abused or exploited, or mentioning the names of other professionals working in the field during the expert interviews,

participants were reminded to share only non-identifiable information in the context of CSEA prevention and response. Interviewers intervened during any potential disclosures, reiterating the importance of maintaining confidentiality. Additionally, to address the possibility of discomfort when answering questions about their experiences, participants were reminded that they could choose not to answer any question they felt uncomfortable with and were provided with the option to opt out of the research at any point.

#### *Data Analysis Approach*

A base dataset was established in Atlas.ti, and a pragmatic approach to thematic analysis was applied, balancing both deductive and inductive processes (Ramanadhan, Revette, Lee, & Aveling, 2021). Researchers analyzed the interview data to determine the key requirements for surveying the prevalence of child sexual exploitation and abuse (CSEA) among 12–17-year-old teenagers in Armenia, as well as to identify optimal data collection and ethical procedures for research involving children.

## **Results**

### **Availability of Evidence about CSEA in Armenia**

According to expert interviews, research data on sexual violence against children play a critical role in understanding the prevalence, patterns, and underlying dynamics of this serious issue in Armenia. Such data are essential to accurately measure the scope of sexual violence, identify its distribution across different demographics—such as the child's gender—and analyze trends related to the profile of perpetrators. However, various factors hinder the study of this phenomenon for the subsequent safeguarding of minors in the realm of sexual integrity. These include the high level of crime latency, the taboo nature of the topic for broad public discussion, and the specific image of the perpetrator in the media. There are also additional challenges related to researching the characteristics of perpetrators and victims of sexual violence, who are likewise involved in the situation.

All experts emphasized that the issue of sexual violence against children is significantly underresearched in Armenia. Moreover, none of the researchers had access to reliable data on the prevalence of sexual violence against children in the country. Medical professionals highlight the lack of comprehensive data, with one doctor stating, *“We have data on the increase in cases of gonorrhea and syphilis among children under 13, but we don't have data on the causes. We can only assume that violence could be a factor.”* (Doctor, YSMU) Similarly, social workers and psychologists report concerning cases but acknowledge the absence of systematic data collection. As one social worker from an NGO noted, *“We know cases of 5-6 pregnant 15-16-year-old girls in our community. There are a lot of gossip and stigmatization, but we do not have data on the prevalence of violence in our community, region, or country”* (Social worker, NGO). This critical gap in academic knowledge compels professionals to rely more on intuition than on evidence-based practices when addressing practical cases, which significantly hampers the development of effective prevention and intervention strategies.

Gatekeeper experts, including social workers, physicians, and psychologists, who reported that they encounter cases of CSEA two to four times a year, echoed this concern. They reported a lack of comprehensive information on how to manage case

disclosure and the subsequent procedures involving physicians, law enforcement, and other institutions. A social worker from Regional Government illustrated this complexity through a case study: *"Schools and polyclinics avoid the disclosure of CSEA cases, especially if it involves domestic violence. It is perceived as a familiar issue. We had a case involving technology-facilitated sexual exploitation of an eighth-grade female student by 16 years old male student, who used digital recordings and threats of online distribution to coerce oral sexual acts. Despite initial law enforcement involvement, the boy's parents were so powerful that they were able to silence the girl, the girl's mother withdrew the complaint and moved out of town. I also faced personal safety concerns for advocating on behalf of the victim."* (Social worker, Regional Government) This deficiency creates significant challenges in ensuring the proper protection and support of affected children, highlighting the urgent need for standardized guidelines and inter-agency collaboration.

By providing a comprehensive evidence base, CSEA research enables policymakers, child protection agencies, and stakeholders to develop targeted strategies to address the issue effectively. It supports the creation of evidence-based standards of procedure (SOPs) and frameworks that prioritize the protection and well-being of children. Furthermore, reliable data empower initiatives aimed at enhancing the efficiency of prevention mechanisms, improving intervention programs, and fostering a stronger, more resilient system of child protection.

Ultimately, investing in research on sexual violence against children serves as a foundation for driving systemic change, building public awareness, and ensuring the safety and dignity of every child in Armenia.

### **The Barriers to Disclosure of CSEA Cases in Armenia**

Most experts interviewed report that cases of sexual violence against children in Armenia are predominantly uncovered through professional networks, such as social workers, psychologists, and law enforcement professionals, as well as through reports on social media platforms (Vardanyan, 2024). These cases typically come to public attention only after a serious harm has already been inflicted on the child, highlighting a reactive rather than proactive approach to addressing CSEA. Early disclosure of CSEA is rare in Armenia, often due to societal stigma, fear of retaliation, lack of awareness, or insufficient support systems that would enable children or their caregivers to report abuse at an earlier stage. This is also conditioned by the lack of trust towards the support systems. The main concerns are related to the confidentiality issues, as well as not being sure that the response process will be carried out properly. As one of the interlocutors noted, *"Last year our NGO worked with 4 cases of CSEA. All the cases were referred to us by the police. Parents avoid the disclosure, being afraid of stigmatization and discrimination in the community."* (Social worker, NGO).

If a child reports or discloses an incident of sexual violence to a parent or teacher but is met with disbelief or mistrust, it can have severe consequences. When a child's courage to speak out is dismissed or ignored, it undermines their confidence and sense of safety. Consequently, the child is less likely to report any future incidents, leaving them more vulnerable to repeated abuse. This lack of trust and support increases the risk of the child becoming a recurring victim of sexual violence, as they may feel isolated and powerless to seek help. While all children are vulnerable to the risk of

sexual violence, empirical evidence and expert analysis indicate that children whose parents have limited education and inadequate parenting skills face a disproportionately higher level of risk (Sahakyan, Voskanyan, Mkrtchyan, 2024). As one social worker noted, *“We are often taught that education doesn’t matter, but it does. Children of parents with low education are more frequently subjected to CSEA due to a lack of awareness, information, and parenting skills. Furthermore, if the family situation is filled with conflicts and parents attempt to shift the responsibility of child-rearing onto the other parent, children may be pushed to the streets, where they become vulnerable to various perpetrators.”* (Social worker, NGO)

Children often lack essential knowledge about their bodies, including the concept of intimate body parts and personal boundaries. They may not fully understand which parts of their bodies are considered private or the importance of safeguarding these boundaries. Additionally, many children are not equipped with the language or skills to express discomfort or assert themselves when they experience unwanted physical contact. One of the interlocutors mentioned, *“It is extremely difficult to formulate questions during forensic interview with a child. They often lack the words to describe their body parts and usually show them on their own bodies.”* (Psychologist, NGO) This gap in understanding also extends to discussing their intimate body parts, as societal taboos and a lack of education may discourage open conversations about these topics. Consequently, children may struggle to recognize inappropriate behavior or communicate their concerns effectively, leaving them more vulnerable to potential harm.

Parents often avoid addressing the issue of sexual violence with their children, driven by fears of societal judgment, shame, and the potential for victim-blaming. This reluctance is frequently rooted in cultural stigmas and a lack of awareness about how to approach these sensitive topics effectively. Parental reactions can hinder the exposure of abuse and allow perpetrators to continue victimizing children, as illustrated in the case narrated by the social worker: *“A child disclosed to his mother that a man had asked him to kiss his penis. However, the mother dismissed the claim, believing it to be a product of the child’s imagination. Later, it was revealed that the same individual had committed similar acts of sexual violence against multiple children. While some children reported these incidents to their parents, many parents, unfortunately, chose to remain silent, further contributing to the lack of disclosure.”* (Social worker, NGO)

As a result, crucial conversations that could empower children to recognize and report inappropriate behavior are often neglected, further perpetuating silence around the issue. This avoidance contributes significantly to the underreporting of cases of sexual violence against children. When parents refrain from discussing these topics, children may lack the knowledge and confidence to identify and disclose instances of abuse. Additionally, societal stigmas and fears of judgment create an environment where both children and parents are hesitant to report such cases, perpetuating a cycle of silence and hindering efforts to address and prevent sexual violence.

According to expert interviews, in many cases, the perpetrators of sexual violence against children are family members, relatives, neighbors, or family friends who have established close connections with the family, for example: *“There was a documented case of sexual violence against a child in which the perpetrator was the grandmother. The child, however, lacked awareness that her actions constituted violence.”* (Social

*worker, NGO)* These individuals are often perceived as trustworthy, which can lead to a reluctance on the part of parents to believe a child's disclosure of abuse, thereby further complicating detection and intervention efforts. Children usually trust the perpetrator as well.

According to the experts, to be able to enhance the level of disclosure of the cases of sexual violence against children the following measures are needed. Firstly, specially trained professionals play a crucial role in identifying changes in a child's behavior that may indicate potential violence or abuse. These experts are equipped to recognize subtle signs and provide early intervention. Secondly, effective responses require a collaborative, multidisciplinary approach involving law enforcement, schools, and healthcare institutions such as polyclinics. Teamwork among these entities ensures that cases are addressed promptly and comprehensively, prioritizing the child's safety and well-being. Finally, parental skill training programs are essential for preventing cases of sexual violence. These programs educate parents about what constitutes sexual violence, its profound impact on a child's physical and psychological well-being, and strategies to protect their children from potential abuse. By equipping parents with knowledge and practical tools, such training fosters open communication, raises awareness of warning signs, and empowers parents to create a safe and supportive environment for their children.

### **Ethical Considerations and Potential Risks of CSEA disclosure in Armenian Society**

In Armenia family honor, modesty, and community reputation play a significant role in shaping societal attitudes to CSEA. Discussing issues related to sexual abuse and exploitation can be highly stigmatized, making it crucial for researchers to adopt methods that ensure both ethical integrity and cultural sensitivity. Topics related to sexuality, especially child sexual abuse, are often considered shameful and inappropriate for public discussion. In many cases, Armenian families may avoid disclosure of abuse due to fear of damaging their social standing within the community.

Cultural narratives sometimes place shame both on victims and perpetrators, making it difficult for survivors and their families to come forward. One of the social workers reports, "*Children often remain silent due to feelings of shame and guilt. The perpetrator, who is often a family member (father, brother, uncle, or mother's partner) can instill fear and guilt in the child, convincing them that the abuse is an expression of love. Families are afraid to speak out, because they worry, they will be seen as 'contaminated,' 'damaged,' or viewed as 'material.' They fear losing their dignity, and the general fear of being blamed. Living in the same environment becomes very difficult after such events are revealed. In many cases, parents move, sometimes even leaving the country, especially in rural areas and small towns. I remember a case where a mother offered her child to an electrician in exchange for paying their electricity bill. When the story came out, they left the country. Sadly, the child was very young and attached to the mother, but the child should have been separated, as the mother was essentially trafficking her.*" (Social worker, YSU)

Another expert shared the following case: "*A case of sexual abuse in Gavar became public after a hospital nurse, instead of ensuring confidentiality, spread the*

information. This led to gossip and stigmatization of the child. As a result, if another child experiences CSEA, they may avoid seeking medical help." (Social worker, NGO). To navigate these challenges, methods of working with children must be adapted to the Armenian cultural context: using culturally appropriate and non-triggering language; engaging with community, governmental and non-governmental organizations, religious leaders, and social workers to gain community trust; ensuring strict confidentiality to encourage open and honest participation; using local trained professionals who understand cultural sensitivities and can navigate difficult conversations without causing distress. As one of our interlocutors stated, "*To avoid cultural and political interpretations of the issue, like it was in case of signing the Istanbul Convention, there should be cultural adaptations by local researchers and interviewers. I believe we constantly misinterpret how society should approach the issue of CSEA. I don't think anyone in our country would oppose their child being knowledgeable about their body and boundaries to protect themselves from abuse.*" (Researcher, YSU)

Culturally sensitive research on CSEA in Armenia requires balancing scientific rigor with cultural awareness to break the silence around the issue. By aligning methodologies with local traditions and social structures while ensuring respect, safety, and ethical integrity, researchers can foster meaningful dialogue and drive positive change.

### **Using Age-Appropriate Vocabulary When Discussing CSEA with Children in Armenia**

Simple, clear, and relatable language should be employed to ensure the child can easily understand and engage with the discussion. It is necessary to avoid complex terms, abstract concepts, scientific terminology or ambiguous phrasing that may confuse or overwhelm the child.

Accessing children is crucial to ensure that their voices are not silenced in favor of those who claim to act in their "best interests" or by the policy and practice that shape their experiences of support.

The absence of a common vernacular for such topics also exacerbates cultural taboos, making discussions about sexual education, consent, or bodily autonomy even more challenging. Without accessible and normalized terminology, individuals may resort to euphemisms, vague descriptions, or avoid discussions altogether, which can lead to misunderstandings, misinformation, and missed opportunities for education and prevention. Addressing this gap through public awareness campaigns and education could foster better communication and understanding within Armenian society.

In Armenia, discussions about sexual topics are highly taboo. As a result, parents and teachers often avoid addressing sexual education, leaving children unprepared for their sexual lives and vulnerable to sexual violence. As a result, there is a notable lack of commonly used terms to describe intimate body parts and sexual acts.

The usage of **medical terminology for body parts** in Armenian is limited primarily to healthcare professionals, such as doctors and scientists, and is rarely employed in everyday conversations among the general population. One of the experts stated, "*Even doctors avoid naming intimate body parts properly. Gynecologists just say, 'Let me see.' That's it.*" (Social worker, NGO) This creates a significant

communication gap, as the general public lacks a standardized and widely understood vocabulary to discuss intimate or anatomical topics. Consequently, this can hinder effective communication between children, parents, teachers, and even healthcare providers, particularly when discussing sensitive issues such as health, hygiene, or abuse. And of course researchers lack the appropriate vocabulary to ask children about their experience. As one of the doctors mentioned, *“There is an Armenian word, ‘ban,’ which means ‘thing.’ This word is often used when people lack the proper means of articulation. Almost all terms related to sexual relations are replaced with the word ‘ban,’ blurring and mystifying everything.”* (Doctor, YSMU)

Conversely, **sexual profanity** often forms part of everyday language in Armenia, particularly among male adults and adolescents in informal settings. However, it remains a cultural taboo, especially for girls, who are expected to adhere to stricter standards of modesty and propriety. The use of sexual profanity by girls is often stigmatized and viewed as a violation of societal norms, reinforcing gender-based expectations and double standards. Furthermore, the use of sexual profanity by men and boys in the presence of women and girls is culturally prohibited in Armenian society, reflecting traditional norms that emphasize respect, modesty, and decorum in mixed-gender settings. When such language is used in the presence of women and girls, it is often considered disrespectful, inappropriate, and even offensive. In some cases, it may lead to social disapproval or reprimand, as it contradicts the societal emphasis on maintaining a courteous and respectful environment, especially in mixed-gender interactions. This unwritten rule reinforces the notion that women and girls should be shielded from explicit or vulgar language, as they are often seen as symbols of family honor and virtue. However, this expectation is not always uniformly followed, and violations can occur, particularly in more informal or less traditional contexts.

At the same time, this cultural norm highlights a double standard: while men are discouraged from using such language around women, sexual profanity among men or boys themselves is often normalized and may even be seen as a form of camaraderie. This disparity underscores the gendered expectations regarding behavior and language in Armenian society, where women are often expected to embody modesty, while men are granted greater freedom in their expressions. Gatekeepers working with children state, *“Male teenagers use insulting words in almost every sentence. If a girl uses such words, she is stigmatized as ill-mannered or worse.”* (Psychologist, NGO)

Insufficient vocabulary and taboos contribute to a broader culture of silence around sexual topics, as girls may feel additional pressure to avoid discussing anything related to sexuality, even in contexts where it is necessary for their safety or education. The normalization of profanity in male-dominated spaces further highlights the unequal gender dynamics in how such language is perceived and used.

Social workers and psychologists with experience working with children consistently report that when children experience abuse, they often struggle to verbalize their experiences. Instead of using words to describe what has happened to them, they frequently resort to **nonverbal communication**, such as pointing to or gesturing toward the parts of their body where they were touched by the perpetrator. This reliance on nonverbal cues can stem from several factors, including fear, confusion, lack of appropriate language, or the trauma associated with the abuse. As one of the interviewed lawyers stated, *“Children lack the appropriate words to*

*describe the abuse. Some know only insulting terms, but they are too ashamed to use them when speaking to adults. Almost none know the biological terms for intimate body parts.” (Lawyer)*

A significant barrier is the absence of comprehensive sexual education and open dialogue about bodily autonomy, consent, and abuse prevention. Many children are never taught the terminology needed to describe their bodies or inappropriate interactions in a clear and accurate way. Cultural taboos surrounding discussions of sexuality further exacerbate this problem, as children may internalize a sense of shame or fear of repercussions if they attempt to disclose their experiences.

The reliance on nonverbal communication also places an additional burden on social workers, psychologists, and other professionals to interpret these cues accurately, which can be challenging and may delay intervention. Miscommunication or missed signs can result in prolonged harm, as cases might not be addressed until more significant psychological or physical damage has occurred.

This situation underscores the urgent need for comprehensive education tailored to children's developmental stages. Programs should teach children the proper terminology for their body parts, emphasize their right to personal boundaries, and equip them to recognize and report inappropriate behavior. Furthermore, it highlights the importance of creating safe, open environments where children feel comfortable discussing sensitive issues without fear of judgment or reprisal. Training parents, teachers, and professionals to engage in these conversations with sensitivity and confidence is equally essential for fostering a culture of prevention and protection.

## **Discussion**

The expert interviews reveal a critical gap in data on CSEA prevalence in Armenia. Professionals report that CSEA cases often remain underreported due to deeply ingrained cultural stigmas and fears of retaliation. Experts highlighted that the issue of sexual violence against children is significantly underresearched, and the lack of reliable statistics hinders the development of effective prevention strategies. This finding is in line with the international research on barriers CSEA disclosure, including the fear of negative consequences, shame, self-blame, developmental factors, gender influences, and their relationship to the perpetrator (Alaggia, Collin-Vézina, & Lateef, 2019; Augusti & Myhre, 2021; Morrison et al., 2018).

Social and cultural stigmas further reinforce this culture of silence, making it extremely difficult for children to seek help. Despite this, the increasing awareness of CSEA, especially following Armenia's ratification of international treaties like the Lanzarote Convention, is gradually shifting societal attitudes towards the need for more robust protective mechanisms.

The study emphasizes the need for a comprehensive, multidisciplinary approach to address CSEA, integrating efforts from the education, law enforcement, healthcare, and child protection sectors.

Research on CSEA disclosure barriers must also consider global ethical frameworks, such as the United Nations Convention on the Rights of the Child (UNCRC), which emphasizes children's right to express their views freely in matters affecting them, ensuring that participation remains voluntary and child-centered. The

issue of CSEA requires a nuanced, ethical approach that both safeguards the well-being of children and upholds legal and moral standards.

Projective techniques provide effective tools for understanding the experiences of children who have faced sexual violence, particularly in Armenian context, where deep-rooted stigma and the absence of an appropriate vocabulary to discuss body awareness and sexual safety present significant barriers to disclosure. Projective methods allow children to express their emotions, experiences, and trauma in indirect, non-verbal ways, reducing psychological distress and the fear of social consequences associated with direct questioning. Projective techniques and art therapy, when used by trained professionals, provide invaluable tools for understanding the experiences of children who have faced sexual violence. These methods offer a compassionate and detailed approach, balancing the need for accurate data with the priority of maintaining the child's emotional well-being and safety. Incorporating such techniques can deepen insights while fostering trust and support between the researcher and the child. Projective techniques and art therapy offer indirect yet effective ways to explore children's experiences of abuse without causing distress (West, 1998; Garb, Wood, & Nezworski, 2000).

The expert interviews helped to reveal the following **social barriers** for the disclosure of CSEA in Armenia. 1) Fear of Stigmatization. Victims and their families often refrain from reporting due to the fear of being shamed or ostracized by their communities. 2) Victim-Blaming Attitudes. Society may place responsibility on the victim rather than the perpetrator, discouraging disclosure. 3) Family Pressure and Honor Culture. Families may suppress disclosure to protect their reputation and avoid social disgrace. 4) Mistrust in Authorities. Survivors and their families lack confidence in law enforcement or social services, fearing that disclosure will not lead to justice or protection. 5) Lack of Awareness. Many victims, especially children, may not fully understand what constitutes abuse or their right to report it.

Among **cultural barriers** for the disclosure of CSEA in Armenia the following factors were outlined. 1) Taboos Surrounding Sexuality. Conversations about sexual abuse are often considered inappropriate, making it difficult for children to express their experiences. 2) Traditional Gender Norms. Patriarchal structures discourage girls from reporting abuse, while boys feel additional pressure due to societal expectations of masculinity. 3) Normalization of Authority and Obedience. Children are often taught to obey adults without question, making it harder for them to recognize and report abusive behavior.

**Institutional barriers** for the disclosure of CSEA in Armenia include 1) Lack of Child-Friendly Reporting Mechanisms. Existing systems may not be accessible or safe for children, discouraging them from seeking help. 2) Inadequate Training of Professionals. Social workers, teachers, and healthcare providers lack the skills to identify and respond appropriately to CSEA cases. 3) Limited Psychological Support for Victims. A shortage of trauma-informed counseling and rehabilitation services leaves victims without necessary care. 4) Inconsistent Law Enforcement Response. Police and judicial authorities may mishandle cases due to a lack of specialized training, leading to re-traumatization or case dismissal. 4) Gatekeeping by Institutions. Schools, polyclinics, and other institutions may prioritize their reputation over child protection, suppressing reports of abuse.

## Conclusion

This study highlights the complex social, cultural, institutional, and legal barriers that hinder the disclosure of CSEA in Armenia. The findings demonstrate that deep-rooted societal taboos, fear of stigmatization, and distrust in authorities significantly contribute to the silence surrounding this issue. Institutional limitations, including the lack of child-friendly reporting mechanisms, insufficient training among professionals, and inconsistent law enforcement responses, further exacerbate the problem. Additionally, legal gaps and a lack of comprehensive, systematically collected data on CSEA hinder the development of effective prevention and intervention strategies.

Despite these challenges, the research underscores the urgent need for culturally sensitive approaches to breaking the silence around CSEA. Strengthening legal frameworks, enhancing child protection services, and fostering intersectoral collaboration among law enforcement, healthcare, education, and social services are critical steps toward improving child safety. Furthermore, investing in public awareness campaigns and educational programs can help shift societal attitudes and empower children with the language and resources to report abuse.

The study also highlights the importance of ethical and methodologically sound research on CSEA. Key challenges include the absence of research methods adapted to Armenian culture and language, a high level of stigma associated with sexual violence, a lack of vocabulary for discussing body awareness and sexual safety, and legal uncertainty regarding children's participation in research. Additionally, raising awareness through education programs is essential to empower children, parents, and professionals to better identify, respond to, and prevent sexual violence. Addressing CSEA in Armenia requires a multidisciplinary, evidence-based approach that prioritizes child protection, fosters societal dialogue, and ensures that all children have the right to live free from violence and exploitation.

## References

Alaggia, R., Collin-Vézina, D., & Lateef, R. (2017). Facilitators and barriers to child sexual abuse (CSA) disclosures: A research update (2000-2016). *Trauma, Violence & Abuse*, 1-24.

Alaggia, R., Collin-Vézina, D., & Lateef, R. (2019). Facilitators and Barriers to Child Sexual Abuse (CSA) Disclosures: A Research Update (2000–2016). *Trauma, Violence, & Abuse*, 20(2), 260-283. <https://doi.org/10.1177/1524838017697312>

Antonyan, M. (2016). The issue of child security in frame of human security concept (on example of experience of FAR Children's Support Center). In A. E. Mkrtchyan & A. V. Atanesyan (Eds.), *Security issues in the modern societies (Materials of the International Conference)* (pp. 53–66). YSU Publishing.

Appendix to the Order of the Minister of Education, Science, Culture, and Sports of the Republic of Armenia, No. 1033-A/2, dated June 30, 2021, "Healthy Lifestyle" Course Experimental Standards and Programs (Grades 5-11). Retrieved from <https://escs.am/files/files/2021-07-14/c6f0006e245a8dfecf658d012ce6e223.pdf>

Augusti, E. M., & Myhre, M. C. (2021). The Barriers and Facilitators to Abuse Disclosure and Psychosocial Support Needs in Children and Adolescents Around

the Time of Disclosure. *Child Care in Practice*, 30(2), 187–202. <https://doi.org/10.1080/13575279.2021.1902279>

Azatyan, R., Azizian, A., & Hakobyan, A. (2022). A descriptive study of adverse childhood experiences (ACEs) among female patients with sexual dysfunctions in Armenia. *Health Psychology Report*, 10(4), 294–301. <https://doi.org/10.5114/hpr.2022.116367>

Catton, A. K. H., Dorahy, M. J., & Yogeeswaran, K. (2023). Disclosure of Sexual Victimization: Effects of Invalidation and Shame on Re-Disclosure. *Journal of interpersonal violence*, 38(13-14), 8332–8356. <https://doi.org/10.1177/08862605231155122>

Council of Europe. (2007). *Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (Lanzarote Convention)*. Retrieved from <https://www.coe.int/en/web/children/lanzarote-convention>

Ertsyan, K. J., Odinokova, V. A., & Rusakova, M. M. (2023). Ситуационные факторы совершения сексуального насилия над детьми [Situational factors of sexual violence against children] [Электронный ресурс]. Психология и право, 13(3), 44–55. <https://doi.org/10.17759/psylaw.2023130304>

Garb, H. N., Wood, J. M., & Nezworski, M. T. (2000). Projective techniques and the detection of child sexual abuse. *Child maltreatment*, 5(2), 161–168. <https://doi.org/10.1177/1077559500005002007>

Government of the Republic of Armenia. (2017). *The law on prevention of domestic and domestic violence and protection of persons subjected to domestic and domestic violence* (as amended by Law No. 169-N of 12.04.24). Adopted on December 13, 2017. Republic of Armenia.

Government of the Republic of Armenia. (2021). *Criminal Code of the Republic of Armenia*. Adopted on May 5, 2021. Republic of Armenia.

Government of the Republic of Armenia. (2023). *The law on amendments and additions to the Labor Code of the Republic of Armenia*. Adopted on May 3, 2023. Republic of Armenia.

Independent Inquiry on Child Sexual Abuse. (2020, March). *The internet: Investigation report*. Retrieved from [https://lordslibrary.parliament.uk/covid-19-risking-a-rise-in-online-child-sexual-abuse/?utm\\_source=chatgpt.com](https://lordslibrary.parliament.uk/covid-19-risking-a-rise-in-online-child-sexual-abuse/?utm_source=chatgpt.com).

Investigative Committee of the Republic of Armenia. (2024, August 13). 1032 criminal proceedings regarding crimes committed against minors were investigated by the Investigative Committee of the Republic of Armenia in the first half of 2024. Retrieved January 23, 2024, from <https://www.investigative.am/news/hh-qnnchakan-komiteoum-2024t-arajin-kisamyakoum-qnnvel-e-anchapahasneri-nkatmamb-katarvac-hancagorcouyounneri-veraberyal-1-032-qreakan-varouyt>

Latiff, M.A., Fang, L., Goh, D.A., & Tan, L.J. (2024). A systematic review of factors associated with disclosure of child sexual abuse. *Child Abuse & Neglect*, 147, doi: 10.1016/j.chab.2023.106564.

Mamikonyan, O. (2022, December 22). Число случаев сексуального насилия в отношении детей выросло на 44% с 2020 года [The number of cases of sexual violence against children has increased by 44% since 2010]. Forbes.ru. <https://www.forbes.ru/forbeslife/482902-cislo-slucaev-seksual-nogo-nasilia-v-otnosenii-detej-vyroslo-na-44-s-2020-goda>.

Melkonyan, N., Melkumyan, Y., Karapetyan, A., & Hakobyan, L. (2024). Professional ethics of public relations practitioners in the context of digitalization. *Georgian medical news*, (349), 80–84.

Morrison, S. E., Bruce, C., & Wilson, S. (2018). Children's disclosure of sexual abuse: A systematic review of qualitative research exploring barriers and facilitators. *Journal of Child Sexual Abuse*, 27(2), 1–19. <https://doi.org/10.1080/10538712.2018.1425943>

Piolanti, A., Schmid, I. E., Fiderer, F. J., Ward, C. L., Stöckl, H., & Foran, H. M. (2025). Global prevalence of sexual violence against children: A systematic review and meta-analysis. *JAMA Pediatrics*. Advance online publication. <https://doi.org/10.1001/jamapediatrics.2024.5326>

Ramanadhan, S., Revette, A. C., Lee, R. M., & Aveling, E. L. (2021). Pragmatic approaches to analyzing qualitative data for implementation science: an introduction. *Implementation Science Communications*, 2, 1-10.

Sahakyan, A., Voskanyan, A., & Mkrtchyan, L. (2024). Development of parenting skills in a scope of group social work. *Journal of Sociology: Bulletin of Yerevan University*, 15(1 (39), 43-53. <https://doi.org/10.46991/BYSU:F/2024.15.1.043>

Sexual Assault Crisis Center Armenia. (2014). *About details* [Facebook page]. Retrieved January 18, 2025, from [https://www.facebook.com/saccarmenia/about\\_details](https://www.facebook.com/saccarmenia/about_details)

United Nations Children's Fund. (2023). *International classification of violence against children*. UNICEF.

United Nations Children's Fund. (2024). *When numbers demand action: Confronting the global scale of sexual violence against children*. UNICEF. Retrieved from <https://data.unicef.org/topic/child-protection/violence/sexual-violence/>

Vardanyan, Y. (2024). The development of the integrated social services system in Armenia. *Journal of Sociology: Bulletin of Yerevan University*, 15(2 (40), 41-49. <https://doi.org/10.46991/BYSU.F/2024.15.2.41>

West M. M. (1998). Meta-analysis of studies assessing the efficacy of projective techniques in discriminating child sexual abuse. *Child abuse & neglect*, 22(11), 1151–1166. [https://doi.org/10.1016/s0145-2134\(98\)00086-6](https://doi.org/10.1016/s0145-2134(98)00086-6)

World Health Organization. (2020). *Global status report on preventing violence against children 2020*. World Health Organization. <https://iris.who.int/bitstream/handle/10665/332394/9789240004191-eng.pdf?sequence=1>

World Medical Association (WMA). (2013). Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects. Retrieved from <https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/>.

Yacoubian, G. S. Jr. (2022). An assessment of Armenia's residential childcare institutions as a case study in international child protection. *Advances in Applied Sociology*, 12(7), 338–345. <https://doi.org/10.4236/aasoci.2022.127026>

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**Conflict of Interests**

The authors declare no ethical issues or conflicts of interest in this research.

**Ethical Standards**

The authors affirm this research did not involve human subjects.