



Promoting the role of parents in preventing child sexual abuse: scoping review protocol

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ABSTRACT

Introduction: Child sexual abuse includes any sexual act involving children, with or without physical contact. Understanding its complexity and promoting anticipatory parental competencies are essential for guiding effective preventive interventions.

Objectives: To map clinically relevant scientific evidence on nursing interventions aimed at the parental role in preventing child sexual abuse.

Methodology: A Scoping Review will be conducted following the JBI methodology. The search will cover peer-reviewed databases, including MEDLINE Ultimate, CINAHL Ultimate, Cochrane Central Register of Controlled Trials, Cochrane Database of Systematic Reviews, Web of Science, and Scopus, as well as Portugal's Open Access Scientific Repository and ProQuest. The database search was performed on September 4, 2025.

Results: Data will be presented descriptively, using figures and tables, accompanied by a narrative summary synthesizing nursing interventions that promote parental roles in the prevention of child sexual abuse.

Conclusion: This review will consolidate evidence to support the practice of Specialist Nurses in Child and Pediatric Health, enhancing preventive strategies based on the promotion of parental roles.

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RESUMO

Introdução: O abuso sexual infantil compreende qualquer ato de natureza sexual envolvendo crianças, com ou sem contacto físico. A compreensão da sua complexidade e a promoção de competências parentais antecipatórias são essenciais para fundamentar intervenções preventivas eficazes.

Objetivos: Mapear a evidência científica sobre intervenções de enfermagem orientadas para o papel parental na prevenção do abuso sexual infantil.

Metodologia: Será realizada uma Scoping Review segundo a metodologia JBI. A pesquisa abrangerá bases de dados revisadas por pares, incluindo MEDLINE Ultimate, CINAHL Ultimate, Cochrane Central Register of Controlled Trials, Cochrane Database of Systematic Reviews, Web of Science e Scopus, bem como o Repositório Científico de Acesso Aberto de Portugal e ProQuest. A pesquisa nas bases de dados foi efetuada a 4 de setembro de 2025.

Resultados: Os dados serão apresentados de forma descritiva, em figuras e tabelas, acompanhados de resumo narrativo, sintetizando as intervenções de enfermagem que promovem o papel parental na prevenção do abuso sexual infantil.

Conclusões: Esta revisão permitirá consolidar evidências para subsidiar a prática do Enfermeiro Especialista em Enfermagem de Saúde Infantil e Pediátrica, reforçando estratégias preventivas baseadas na promoção do papel parental.

Introduction

The World Health Organization (WHO) defines child maltreatment as all forms of abuse and neglect affecting individuals under 18 years of age, considering anyone within this age range as a child,¹ a criterion adopted in this review. Within this context, child sexual abuse involves sexual acts with or without physical contact, including sexually motivated kissing, touching of intimate areas, penetration, indecent exposure of genital organs, inappropriate sexual language, or encouragement of sexualized play. Abuse also includes the display of nude images, coercion to watch sexual acts, and forced sharing of intimate online content.²

Children's vulnerability in the digital environment has increased significantly, with offenders using social networks and chats to induce in-person meetings or request sexual content, often through coercion or blackmail, and live streaming amplifying global impact³. According to data from APAV,⁴ child sexual violence accounted for 6.4% of reported incidents, showing an increase compared with 2023, with child sexual abuse and child sexual abuse material each corresponding to 2.4% of the total.

The consequences of child sexual abuse are multidimensional, affecting the victim's neurobiological and neurophysiological health throughout the life course.⁵ Therefore,

it is urgent to invest in preventive programs aimed at training key adults, including sexual education, identification of warning signs, and protective strategies. In this context, Specialist Nurses in Child and Pediatric Health play a crucial role.⁶

Nursing ontology organizes core concepts, supporting clinical decision-making and evidencing health outcomes.⁷ Nursing interventions are defined as structured actions within clinical management, integrating diagnosis, therapy, and prevention, according to the Eagle-i Research Resource Ontology (ERO_0000604) and MeSH qualifier Q000451.⁸

Parents and caregivers, defined as adults responsible for the child's daily care, have a decisive role in protecting against sexual abuse. Parenting involves a set of behaviors, practices, emotions, and knowledge that guide care, education, and the relationship with children. Parental interventions, in turn, correspond to programs or actions directed at parents and caregivers, aiming to promote positive parenting practices, strengthen the emotional bond with the child, support healthy development, and prevent risk situations, including maltreatment.^{1,9}

The Lanzarote Convention highlights prevention as a core pillar, promoting age-appropriate sexual and digital education, children's participation in prevention processes,

training of parents/caregivers, and protection of victims.¹⁰ International preventive strategies strengthen community safety and are essential for promoting pediatric health.¹¹

Various targeted programs have been developed to equip parents and caregivers with the skills needed to prevent child sexual abuse, enhancing communication, monitoring, and protective capacities. For example, Project Safe: Empowering Parents to Prevent Child Sexual Abuse was evaluated in a randomized controlled trial (RCT) and demonstrated improvements in online risk-reduction strategies as well as strengthened parent–child bonding.¹² PowerTalk, an interactive manual guiding parental dialogue sessions on bodily boundaries and consent, received highly positive evaluations in field studies.¹³

A meta-analysis of parental interventions aimed at preventing child sexual abuse concluded that programs incorporating practical components such as role-play, booster sessions, and online modules yield higher rates of knowledge retention and sustained behavioral change.¹⁴

This scoping review aims to map the current scientific evidence on nursing interventions aimed at promoting the parental role in preventing child sexual abuse.

Preliminary searches in databases such as MEDLINE, Scopus, CINAHL, PubMed, Cochrane, JBI Evidence Synthesis, Web of Science, Prospero, and the Open Science Framework did not identify any published or ongoing reviews on nursing interventions aimed at promoting the parental role in preventing child sexual abuse.

Methodology

This scoping review will be conducted in accordance with the JBI methodology for scoping reviews¹⁵ and reported following the recommendations of the Preferred Reporting Items for Systematic Reviews and Meta-Analyses Extension for Scoping Reviews (PRISMA-ScR)^{1,6}

This scoping review protocol is registered on the Open Science Framework (OSF) [Identifier: DOI 10.17605/OSF.IO/CPMUQ].

Review question

Accordingly, this review seeks to answer the following research question: What nursing interventions are designed to promote the parental role in preventing child sexual abuse? Subsequent questions will be considered as sub-questions: Which nursing care settings are favorable to promoting the parental role? Which disciplinary areas are involved in promoting the parental role?

Eligibility criteria

The eligibility criteria were defined based on the PCC framework (Population, Concept, and Context), as recommended by the JBI methodology.¹⁵

Population (P)

This review will include studies referring to “parents,” defined according to the concept of parental capacity presented by the Judicial Commission of NSW as individuals capable of understanding, believing, knowing, and performing the necessary actions to ensure a child’s safety and emotional well-being¹⁷. Parents unable to fulfill their parental responsibilities either due to incapacity or legal impediment determined by the court will be excluded.¹⁸

Concept (C)

The concepts of interest in this review are nursing interventions that promote the parental role in the prevention of child sexual abuse, making the definition and clarification of these concepts relevant. Child sexual abuse is defined as the sexual exploitation of children by adults or individuals in positions of authority, in both familial and non-familial contexts, affecting the emotional, cognitive, and social development of the victim.¹⁹ Regarding nursing interventions, according to the Eagle-i Research Resource Ontology (ERO), they consist of a set of care practices and techniques incorporated into clinical management, integrating the nurse’s role in diagnostic, therapeutic, and preventive procedures. In the context of child sexual abuse prevention, these interventions include actions such as parental education, guidance on strategies to protect the child, and promotion of safe caregiving skills, aligned with MeSH qualifier Q000451.⁸ It is also important to understand the concept of “parental role,” oriented toward the set of responsibilities, competencies, and behaviors assumed by parents or primary caregivers in meeting the child’s physical, emotional, educational, and protective needs, within a dynamic process of interaction with the family and sociocultural context.²⁰

Context (C)

Studies conducted in nursing care settings will be included, characterized by a diversity of practice fields. In pediatric nursing, for example, professional practice occurs in hospitals, private clinics, residential homes, schools, governmental organizations, community/home settings, and social services, highlighting the broad scope of these intervention contexts²¹. Many of these settings do not have permanently assigned nurses, with care being provided by professionals who are deployed as needed.²²

Types of sources

This review will consider the following types of studies: Experimental and quasi-experimental studies, including randomized and non-randomized clinical trials. Observational studies, such as prospective and retrospective cohort studies, case-control studies, and cross-sectional studies.

Qualitative and descriptive observational studies, including case series, individual case reports, and descriptive cross-sectional studies. Literature reviews that may contribute to mapping nursing interventions aimed at promoting the parental role in preventing child sexual abuse.

Additional criteria

No language restrictions will be applied; full-text studies in Portuguese, English, or Spanish will be included. For texts in other languages, translation will be sought whenever possible. No temporal restrictions will be applied, allowing for a comprehensive mapping of the available scientific evidence.

Search strategy

The search strategy aims to identify both published and unpublished studies addressing the promotion of the parental role in preventing child sexual abuse. In the preliminary phase, an exploratory search was conducted in the CINAHL Ultimate and MEDLINE Ultimate databases, with the objective of mapping the available scientific evidence. Simultaneously, titles and abstracts of retrieved articles were analyzed to identify the main indexed descriptors and natural language terms relevant to the study area. The most relevant indexed descriptors (Medical Subject Headings – MeSH) identified were: Parents; Nursing Care; Prevention and Control; Sex Offenses; Child Abuse, Sexual; Sexual Trauma; Pediatrics; and Child. In the second phase, both MeSH and natural language terms identified in the literature were used to develop the complete search strategy, which will be adapted as necessary for each database:

- Scientific databases: MEDLINE Ultimate (via EBSCOhost), CINAHL Ultimate (via EBSCOhost), Cochrane Central Register of Controlled Trials (via EBSCO), Cochrane Database of Systematic Reviews (via EBSCO), JBI Evidence Synthesis, Web of Science, and Scopus;
- Open access repositories and grey literature: RCAAP (Repositórios Científicos de Acesso Aberto de Portugal), ProQuest, OpenGrey;
- Websites of relevant organizations: WHO (World Health Organization), APAV (Portuguese Association for Victim Support), UNICEF, national health authorities (Portugal), and the CDC (Centers for Disease Control and Prevention, USA).

No restrictions regarding document language or publication date will be applied, ensuring a comprehensive analysis of the scientific output available on the topic. A detailed example of the complete search strategy for the MEDLINE Ultimate database is presented in Table 1. MEDLINE Ultimate (via EBSCOhost): Search conducted on September 4, 2025

Table 1. Search strategy.

Search ID	Search terms	Results
S1	MH "Parents" OR XB (("Parent*" OR "Caregiver*")) OR AB (("Parent*" OR "Caregiver*"))	660,346
S2	MH ("prevention and control") OR XB "Prevention" OR AB "Prevention"	770,999
S3	MH "Sex Offenses" OR MH "Child Abuse, Sexual" OR MH "Sexual Trauma" OR XB (("Sex Offen*" OR "Sexual Abus*")) OR AB (("Sex Offen*" OR "Sexual Abus*"))	31,901
S4	((MH "Pediatrics" OR MH "Pediatric Nurses" OR MH "Pediatric Nursing" OR MH "Pediatric Nurse Practitioners" OR MH "Hospitals, Pediatric" OR MH "Child" OR MH "Child Care")) OR MH "Child Health" OR XB (("Pediatric*" OR "Pediatric Nurs*" OR "Hospital Pediatric" OR "Pediatric Car*" OR "Pediatric Unit*" OR "Child*" OR "Child Car*" OR "Child Health*")) OR AB (("Pediatric*" OR "Pediatric Nurs*" OR "Hospital Pediatric" OR "Pediatric Car*" OR "Pediatric Unit*" OR "Child*" OR "Child Car*" OR "Child Health*"))	2,941,553
	S1 AND S2 AND S3 AND S4	448

Study selection

After completing the search, all retrieved references will be imported into the JBI SUMARI software²³, a tool that facilitates collaborative study screening. Automatic duplicate removal will be performed at this stage. The selection of identified publications will follow a two-step approach:

1. Title and abstract screening: Two independent reviewers will screen all titles and abstracts according to the predefined inclusion criteria.
2. Full-text review: Potentially eligible sources will be retrieved in full and assessed in detail by the same reviewers.

Reasons for the exclusion of any source after full-text analysis will be recorded and reported in the final scoping review. Throughout the selection process, any disagreements between reviewers will be resolved through discussion; if consensus cannot be reached, a third reviewer will be consulted for a final decision.

Data extraction

After determining the relevance of each study, data extraction will be performed independently by two reviewers using a customized instrument adapted for scoping reviews and detailed in this protocol (Table 2), based on the JBI model¹⁵. Critical appraisal of the included studies will not be conducted, as it is not required within the scope of a scoping review.

Stage 1 – Detailed extraction by study

A data extraction table will be created for each study, including information on the population, concepts, context, methodology, and objectives. At this stage, qualitative data

will be extracted, focusing on nursing knowledge related to promoting the parental role in preventing child sexual abuse (Table 2).

Table 2. Data extraction instrument.

Title	Article title
Year	Year of publication
Author(s)	Name and surname of each author of the study
Country of Origin	Country of origin of the main author
Type of study	Describe the type of study reported
Objective(s)	Relevance of the objectives
Methodology	Describe the methodology
Participants	Identify the participants
Components Transferable to Nursing Practice	Identify the target age group (0–1; 1–3; 4–5; 6–12; 13–18 years) and which contents, methodologies, and outcomes can be adapted by the ESIP nurse (e.g., age-tailored educational modules, risk checklists, follow-up strategies).
Care Delivery Context	Identify the context of care delivery context
Lead Professional	To record whether the intervention was conducted by nurses, other health professionals, or a multiprofessional team
Author-reported limitations	Identify the limitations of the study

To ensure the validity of the data extraction tool (Table 2), a pilot test will be conducted with a subset of selected studies. This step will allow us to verify the clarity, consistency, and applicability of the table items, as well as to identify and correct any potential ambiguities before the full data extraction. Adjustments resulting from the pilot test will be incorporated into the final version of the tool, in accordance with the JBI methodology for scoping reviews. Any changes made will be documented in the final report.

Stage 2 – Categorization of context units

Based on the extracted context units, categorization will be performed in specific tables (Tables 3 to 5). The coding rules will follow the concept definitions established by the *International Council of Nurses*.²⁴

Review Question 1: Nursing interventions that address the needs related to promoting the parental role in preventing child sexual abuse (Table 3).

Table 3. Nursing intervention types by age group

Category: Nursing Intervention	Context Unit

Review Question 2: Nursing care settings that are favorable to promoting the parental role (Table 4).

Table 4. Care delivery contexts.

Category: Care Delivery Context	Context Unit

Review Question 3: Disciplinary areas involved in promoting the parental role (Table 5)

Table 5. Disciplinary Areas.

Category: Disciplinary Areas	Context Unit

Data analysis and presentation

The extracted information from the included studies will be organised into tables aligned with the main research question and its sub-questions: Nursing intervention types by age group (0–1; 1–3; 4–5; 6–12; 13–18 years); Care Delivery Contexts; Disciplinary Areas. The tables will always be accompanied by narrative summaries that provide contextual interpretation of the findings and explain how the results address the review’s objectives and guiding questions. If justified by the data analysis, alternative formats (e.g. visual representations) may also be adopted to present the findings more clearly or effectively.

Discussion

The present review aims to map and systematize nursing interventions that promote the parental role in preventing child sexual abuse. The results will be presented descriptively and organized in alignment with the review’s objective and research questions.

Data synthesis will be conducted narratively, complemented by tables and figures to facilitate the organization and clarification of the identified interventions. In this context, nursing care assumes a central role by coordinating and implementing preventive interventions, identifying early signs of abuse, supporting families, and promoting the protection and well-being of children. This professional practice contributes to minimizing the psychological, physical, and social impacts resulting from trauma²⁵.

Thus, this review may provide evidence-based support for nurses’ decision-making, strengthening preventive practices, guiding clinical interventions, and contributing to the comprehensive protection of children. Furthermore, the findings may inform the development of institutional policies and educational programs focused on parental training, reinforcing strategies that promote child safety.

Conclusion

This protocol aims to map the scientific evidence on nursing interventions that promote the parental role in preventing child sexual abuse. This form of violence constitutes a serious violation of human rights, with physical, psychological, and social repercussions that may affect victims throughout their entire life course.

In this context, the strengthening of parental competencies supported by evidence-based nursing interventions represents a key component in preventing risk situations and promoting the protection of children. The results of this review may contribute to consolidating knowledge in the field of child and pediatric health nursing, providing support for clinical practice and decision-making.

Indeed, they will enable the mapping of intervention strategies, the identification of evidence gaps, and the recognition of promising practices in the prevention of child sexual abuse.

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