The International Journal of Indian Psychology ISSN 2348-5396 (Online) | ISSN: 2349-3429 (Print) Volume 10, Issue 4, October- December, 2022 DIP: 18.01.015.20221004, ODOI: 10.25215/1004.015 https://www.ijip.in



Research Paper

A Study on the Effects of a prevention Program to Improve Preschool Children's Knowledge Pertaining to the Difference between Good and Bad Secrets related to Child Sexual Abuse (CSA)

N.D.U. Vimukthi^{1*}, Prof. D.D.K.S. Karunanayake²

ABSTRACT

Child sexual abuse is a significant problem that is experienced universally regardless of culture, ethnicity, and social class. Among all age groups of children, young children are at greater risk of being victims of sexual abuse because of their lack of knowledge of danger and self-protection. Previous studies worldwide have used child sexual abuse awareness programs for young children and proved those programs are very effective for raising young children's awareness of child sexual abuse. The current study attempts to explore the effectiveness of those programs for Sri Lankan preschool-aged children, hence there were very limited studies conducted with that age group. This is a quantitative study conducted with 104 participants chosen from a convenient method of sampling located in the Matara District of the Southern Province, Sri Lanka to explore children's awareness of good and bad secrets in the context of child sexual abuse. Data was gathered using sentences with childfriendly rating scales in the pre-test and post-test. The analysis used paired sample t-tests and mean comparisons and found that awareness programs on "child sexual abuse prevention" can significantly improve preschool children's awareness of prevention from child sexual abuse and significantly improve their knowledge of the difference between good and bad secrets. The findings of the study can strengthen children, family, community, and government-based child protection mechanisms and interventions.

Keywords: Children, Preschool children, Child sexual abuse, Prevention strategies, Prevention programs.

hild Sexual Abuse (CSA) is a universal problem, which is an involvement of an adult figure in sexual activities with children, who cannot give appropriate consent and who don't understand the significance of what is going on with them (Kempe, 2013). Even though many steps have been taken by the government to prevent it, statistics show

¹M.Phil. in Psychology (Reading), Postgraduate Institute of Humanities and Social Sciences, University of Peradeniya, Sri Lanka

²Ph.D. (Pursue), Department of Psychology, University of Peradeniya, Sri Lanka *<u>Corresponding Author</u>

Received: September 12, 2022; Revision Received: October 18, 2022; Accepted: November 05, 2022

^{© 2022,} N., D., U., Vimukthi & D., D., K., S., Karunanayake.; licensee IJIP. This is an Open Access Research distributed under the terms of the Creative Commons Attribution License (www.creativecommons.org/ licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any Medium, provided the original work is properly cited.

that child abuse cases keep on increasing in past years. Globally, the prevalence of Child Sexual Abuse is 11.8% (Rohanachandra, 2015).

Recently, Sri Lankan society faced many incidents of CSA. It has become a major public health problem, affecting all cultures and social classes in the Sri Lankan context. Studies in Sri Lanka show that, the prevalence of sexual abuse among adolescents to be 21.9%. Further, the studies have found that globally CSA is common in females. Similarly, Sri Lanka has reported the highest rate among females, as well as among adolescents (Rohanachandra, 2015). Sri Lanka National Child Protection Authority (NCPA) shows that, it is working on protecting children who have been subjected to abuse and that over 10,000 child abuse cases were reported last year on the island (Annual Report National Child Protection Authority, 2015). The authority reported it has received 10,732 complaints on different forms of child abuse during the year 2015.

A Child –A child is defined by different organizations in relation to various legal and social backgrounds. In many countries, there is an officially fixed age when childhood ends and a person legally becomes an adult. The age ranges anywhere from 13 to 21, with 18 being the most common (Muhammad & Rubina, 2017). According to the United Nations Convention on the Rights of the Child (2010), a child is defined as a person under the age of 18 years. Convention on the Rights of the Child (1989), a child means every human being below the age of eighteen years unless, under the law applicable to the child, the majority is attained earlier.

A preschooler is a child who is a collection of the development in various newly acknowledged factors which related to child development, in their preschool (Brewer, 1992). A child of age three to five is considered a preschooler. Whether or not a child of this age, attend a preschool program, they are no longer a toddler. When attending preschool they develop basic life skills, and feel the independence and knowledge that they will need as they enter their school years (Yoshikawa, 2013).

Child Sexual Abuse (CSA) - WHO Consultation on Child Abuse Prevention in 1999, stated child sexual abuse as "the involvement of a child in sexual activity that he or she does not possess the ability to fully comprehend, is unable to give their informed consent to, or for which the child is not developmentally prepared and cannot give consent, or that violates the laws or social taboos of society". Further, Child Sexual Abuse circles a broad range of sexual behaviors, including vaginal or anus penetration (using a finger, penis, or any other object), oral sex, touching genitals and other body parts, masturbation, exhibitionism (exposing genitals), voyeurism (watching), exposing a child to pornography, and directing a child to engage in sexual activities (Christensen, 2017).

Prevention Strategies- Prevention strategies include a combination of providing information (for example, defining CSA and how it is underestimated in every society), building skills (for example, what to do to prevent it, what children should know to stop and leave at-risk situations, whom to talk to) and providing resources (for example hotlines, trained personnel in schools, resources enabling people to stop any form of potential abuse before it happens) (Pellai & Caranzano, 2015).

CSA Prevention Programs- To prevent Child Sexual Abuse effectively, global preventive approaches which are targeting individuals, family, and societal conditions must be explored

and validated in order to protect the next generations of children and youth from being sexually abused (Collin-Vezina, 2013). There is a high correlation rate of Child Sexual Abuse with psychopathology and increased risk of attempting suicide in adulthood suggesting the need for a systematic assessment of psychological disorders and suicidal risks. These risk factors show the need for healthcare providers to increase the recognition and development of treatment approaches for emotional breakdowns as well as early prevention approaches (Murray, 2015).

Many research has revealed that programs are effective at building children's knowledge about sexual abuse and their preventive skills (Davis, Gidycz, 2000). These programs can be offered at a low cost, they are fairly easy to implement widely, and they reach a maximum number of children while avoiding the stigmatization of a particular population (Collin-Vézina, Daigneault, & Hébert, 2013).

Preschool Children's Knowledge on CSA & Prevention Strategies - Studies have found that children who are in kindergarten age can be taught the safety skills to prevent sexual abuse (Harvey, Forehand, Brown, & Holmes, 1988). Also, there is evidence that educational programs are improving the safety skills and knowledge of children about sexual abuse, but no study has revealed that education actually reduces the prevalence of sexual abuse (Macmillen and et.al, 1994). The effectiveness is mostly reported in the programs which are conducted for more than four sessions. They are presented in physically involving activities. Also, these programs have recorded the highest effectiveness. Even though these types of programs are used for youth, studies show that active, long-term programs are more effective for children in any age range (Davis, 2000).

A study which used more than 1300 preschool children who belong to the age range of 3-6 years, were assessed in pre and post-test. Children who participated in prevention programs reported more knowledge of prevention skills and concepts when compared to the children who were in the control programs. Also, the same study revealed that children who are in the 4-6 years of age range have higher knowledge about skills and concepts than those who are younger than that age range. So consequently, the study shows that benefits in prevention programs vary with the age of the participants in a more specific way (Nemerofsky, 2008).

In general, children report minimal knowledge of sexual abuse and self-protection skills (Wurtele, 1998). In one study of 406 children, ages 3 ¹/₂ to 5 ¹/₂, only 38% correctly recognized inappropriate touch requests; the majority regarded sexual touching as acceptable (Wurtele & Owens, 1997). Furthermore, half of the children in this sample believed that abuse was the child's fault, and few participants thought that children should report secret touching. Few children were willing to tell anyone about the abusive incident, and even fewer knew how to report it. Other research has found that although almost all preschool children know the correct terms for their non-genital body parts, very few know the correct names for genitals (Wurtele & Kenny, 2008). Knowing the correct terminology for genitals facilitates helpful responses to children's disclosures of abuse. In contrast, children who make disclosures using incorrect and idiosyncratic terminology (e.g., "She touched my muffin") may not be understood and, consequently, may not receive a positive, supportive response. As a result, adults may be less likely to report abuse, and child protection agencies may be reluctant to investigate reports perceived as difficult to substantiate (Wurtele, Sandy & Kenny, Maureen, 2010).

Parents, adults, and other organizations do not give sufficient and suitable knowledge to children (especially preschool age children), on how to protect themselves from being exposed to incidents of sexual abuse. Therefore, they are more vulnerable to being victims of sexual abuse. Hence, the purpose of the present study is to investigate preschool children's knowledge of prevention strategies for CSA in order to bring to light the importance of making preschool children aware of the possible risks that they have and to cope with the situations of sexual abuse. By giving this understanding, the researcher aims to reduce the children's risk of being abused sexually, due to the lack of knowledge and awareness about the prevention strategies.

METHODOLOGY

Research design-

The research used an experimental research design. The research study employs quantitative data gathering methods and uses the frequencies and pre-test- post-test method.

Participants-

Participants in this study ranged in age from three to five years old (M = 4.4712; SD =.5015) and came from three different preschools in three Grama Niladhari Divisions (Kekanadura, Kirinda-Pulwella, and Gandara) of the Matara District. A period of one month was assigned for this task. One hundred and ten (104) preschool children (48 boys and 56 girls) participated in the study and they were selected by convenience sampling method, but participation in the study was voluntary.

Instruments-

The primary data sources used were the basic demographical data and sentences with rating scales. To identify preschool children's awareness about good and bad secrets researcher asked for 6 sentences from children using a three-point child-friendly rating scale. Before reading the sentences three picture cards were shown to each child (these cards included images of three symbols that represent right, wrong, and question). Then read out sentences one by one and children were asked to choose an option to indicate their responses. These simple statements contained sentences such as "Nimali's father buys some gift for her mother and says 'don't tell mother! It's our secret; someone has told you to keep a secret about touching you."

Procedure-

Pre-test data were collected using these instruments. Then conducted the awareness program on how to protect from child sexual abuse to the children, targeting to improve children's knowledge about the difference between good and bad secrets. Finally using the same instruments used in the pre-test, conducted a post-test to measure whether the children's awareness was raised after the awareness program.

Prevention program - The main objective of the prevention program was to teach ageappropriate prevention skills. It includes teaching children about the difference between good secrets and bad secrets. The researcher referred to several prevention programs and related studies such as "My Body is Special" Training Program-MBS-TP, (Kemer & Dalgıç, 2021); "Who Do You Tell?" child sexual abuse education program, (Tutty, Aubry & Velasquez, 2020); "Body Safety Training Program", (Tunc, Gorak, Ozyazicioglu, e Ak, Isil & Vural, 2018); "Be Safe! Training Program", (Pathirana, 2004) before creating the current awareness program.

Consent and Confidentiality-

Permission was requested from the preschool teachers of each institution to contact the preschool children and administer the instruments to the children. Verbal permission was also requested from parents of all participating children through the teacher at the preschools and before the data collection researcher explained the study and their right to withdraw from the study. In addition, the researcher sent consent forms to parents using e-mail and other social media apps. Also, the researcher kept the names and private details of the children confidential. To ensure privacy and continued anonymity, pseudonyms were used, if and when necessary.

RESULTS

Research hypothesized that Preschool children's awareness of the difference between bad secrets and good secrets will increase after the awareness program.

One hundred four (104) participants between ages 4 to 5 years (M=4.47, SD, .505158) participated in this study. Among them 48 (46.2%) participants were male and 56 (53.8%) participants were female. All participants were Buddhist Sinhalese.

Table 1 Frequencies- Total number of Responses to the Difference between Good andBad Secret before and after the Awareness Program

	Questions	Before			After		
		Good	Bad	Don't Know	Good	Bad	Don't Know
01	Nimali's father buys some gift for her mother and says 'don't tell mother! It's our secret.	104 (100%)	-	-	104 (100%)	-	-
02	Chamath's was at his friend's house, and his friend's father asked him if he could take pictures of him. His father said he would give Chamath sweets, but only if he promised not to tell his parents.	80 (76.9%)	11 (10.6%)	13 (12.5%)	-	96 (92.3%)	08 (7.7%)
03	Your mother is a making special cake for your sister's birthday and tells you to keep it a secret.	104 (100%)	-	-	104 (100%)	-	-
04	The teacher asked two students to stay in for recess to help decorate the classroom for a surprise party in the afternoon. The teacher asked the	102 (98.1%)	-	02 (1.9%)	104 (100%)	-	-

	students to keep the surprise a secret.						
05	A man show his private parts to you and says never to tell anyone or else he will really hurt you	_	104 (100%)	-	-	104 (100%)	-
06	Someone has told you to keep a secret about touching you and bring you some toy.	83 (79.8%)	21 (20.2%)	-	-	104 (100%)	-

Of the 104 participants who participated in the awareness program 100% were aware that the sentence 01 and 03 were good secrets and sentence 05 was a bad secret before the awareness program was held and these numbers did not change after the awareness program. Although sentence two indicates a bad secret, before the awareness program 80 children out of 104 (76.9%) named it as a good secret. Only 11 (10.6%) preschoolers identified it as a bad secret and 13 (12.5%) children said they didn't know whether that secret was good or bad. But after the awareness program, 96 (92.3%) preschoolers correctly named it a bad secret, and 08 (7.7%) still couldn't identify whether it was a good secret or a bad secret. Sentence 04 represented a good secret and 102 (98%) children could name it as a good one before the awareness program and 02 (1.9%) participants said they don't know whether it was good or bad, but after the awareness program, those 02 could also correctly name it as a good secret. Although sentence 06 represents a bad secret, before the awareness program only 21 (20.2%) participants identified it as a bad one while 82 (79.8%) participants named it as a good one. But after the awareness program, all participants 104 (100%) could identify it as a bad secret.

Secrets	Mean	Std. Deviation
Pre-test	4.2885	.63358
Post-test	5.9231	.26776

 Table 2 Difference between pre-test and post-test in secrets

There was a significant increment in the preschoolers' awareness level of the difference between good and bad secrets after the awareness program in post-test (M=5.9231, SD .26776) than pre-test (M= 4.2885, SD .63358); t (103) = -25.472, p< .001. Further, awareness program had a large effect on preschoolers' awareness level, Cohen's d= -2.4, 95% Cl [-2.8, -2.1].

DISCUSSION

According to the results of the study, the hypothesis was supported. The results of this study indicate that Preschool children's awareness of the difference between good secrets and bad secrets could increase via an awareness program. According to the current study, the majority of the children failed to identify the difference between good secrets and bad secrets in the pre-test (before the intervention). But after conducting an awareness program,

the majority of them were able to identify the difference between good secrets and bad secrets correctly.

Although some researches have suggested that preschool age children's baseline knowledge of concepts related to sexual abuse is low (Zhang et al., 2014), a large number of additional research studies convey that preschool age children can understand the concepts related to sexual abuse like secrets and touch. Many studies suggest that children's understanding of secrets begins to develop at age three (Bok, 1989; Meares & Orlay, 1988) and, with age, children are more likely to say they would keep a secret for a peer (Piaget, 1932; Watson & Valtin, 1997). Furthermore, these studies demonstrate that children's ability to distinguish between different types of secrets (Anagnostaki, Wright, & Sutton, 2010; Watson & Valtin, 1997) and reasons for keeping secrets (Last & Aharoni-Etzioni, 1995) become more sophisticated with age. Studies reveal that children are more likely to tell the truth (Talwar et al., 2002), being reassured about the consequences of truthfulness (Lyon & Dorado, 2008), and discussing the difference between truths and lies (London & Nunez, 2002).

Our findings further support the idea of Walsh, et al. (2015). They found among Chinese preschoolers aged three to five years, only 16 percent of participants would report secret touching to an adult. The tendency for children to keep the secret of child abuse is an important practical impediment to adequate research, prevention, assessment, and treatment. While some studies have established that children will readily keep adult secrets, few have investigated the predictors of ease of disclosure. Children at high risk for sexual abuse also were more likely to keep the secret (Dunkerley & Dalenberg, 2000). Kenny, Wurtele, and Alonso's (2012) study of Latino preschoolers found that child sexual abuse awareness program was effective at increasing children's knowledge about harmful secrets.

One of the most pervasive aspects of abuse that makes interviewing a child victim difficult is the element of secrecy. Most victims of sexual abuse have been urged not to tell and hence may remain silent about the abuse for months, years, or a lifetime (Burgess & Holstrom, 1974; Faller, 1984; Summit, 1983; Herman, 1981). Clinical commentaries on child sexual abuse (Summit, 1983) give the impression that young children are able to keep secrets in the situation of abuse. School-based abuse prevention programs for early childhood and elementary school children have been found to be effective in increasing student knowledge and protective behaviors (Brassard & Fiorvanti, 2014).

According to worldwide research studies, a large number of research studies suggest that preschool-age children's knowledge of the difference between good and bad secrets can be improved by awareness programs.

CONCLUSION

The strengths of this study lie in its methodology. It contains information concerning preschool children's knowledge on prevention of CSA. Moreover, data were gathered using sentences with child-friendly rating scales. Using this data gathering method a powerful empirical data set was compiled; drawing on these data; issues pertaining to awareness of preschool children were investigated. Very few preschool children had any kind of pre-existing knowledge of Secrets, Children showed greater difficulties in understanding good and bad secrets before the awareness program and when provided with an awareness program have the capacity to increase their knowledge pertaining to child sexual abuse.

Finally, preschool children's awareness of the difference between good secrets and bad secrets can be increased via an awareness program.

REFERENCES

- Alan G. Nemerofsky EdD, Deborah T. Carran PhD & Leon A. Rosenberg PhD (2008). Age Variation in Performance Among Preschool Children in a Sexual Abuse Prevention Program, Journal of Child Sexual Abuse ,Volume 3, 1994 - Issue 1.https://doi.org/10 .1300/J070v03n01_06
- Anagnostaki L, Wright MJ, Bourchier-Sutton AJ. The semantics of secrecy: young children 's classification of secret content. J Genet Psychol. 2010 Oct-Dec; 171 (4):279-99. doi: 10.1080/00221325.2010.493186. PMID: 21171546.
- Annual Report National Child Protection Authority (2015), retrieve from: https://www.parli ament.lk/uploads/documents/paperspresented/annual-report-national-child-protection -authority-2015.pdf
- Bok, S. (1989). Secrets: On the ethics of concealment and revelation. Vintage.
- Brassard, Marla R.; Fiorvanti, Christina M. (2015). School-Based Child Abuse Prevention Programs. *Psychology in the Schools*, v52 n1 p40-60 Jan 2015. ISSN-0033-3085
- Brewer, W. F., & Vosniadou, S. (1992). Mental models of the earth: A study of conceptual change in childhood. *Cognitive psychology*, 24(4), 535-585.
- Burgess, A. W., & Holmstrom, L. L. (1974). Rape trauma syndrome. *The American Journal* of *Psychiatry*, 131(9), 981–986.
- Christensen, H. N., Uldum, B., Welbury, R., & Haubek, D. (2017). How Danish dentists and dental hygienists handle their role in child abuse and neglect matters. *Acta Odontologica Scandinavica*, 75(5), 332-337.
- Citak Tunc G, Gorak G, Ozyazicioglu N, Ak B, Isil O, Vural P. Preventing Child Sexual Abuse: Body Safety Training for Young Children in Turkey. J Child Sex Abus. 2018 May-Jun;27(4):347-364. doi: 10.1080/10538712.2018.1477001. Epub 2018 Jun 1. PMID: 29856274.
- Collin-Vézina, D., Daigneault, I. & Hébert, M. Lessons learned from child sexual abuse research: prevalence, outcomes, and preventive strategies. Child Adolesc Psychiatry Ment Health 7, 22 (2013). https://doi.org/10.1186/1753-2000-7-22.
- Collin-Vézina, D., Daigneault, I. & Hébert, M. Lessons learned from child sexual abuse research: prevalence, outcomes, and preventive strategies. Child Adolesc Psychiatry Ment Health 7, 22 (2013). https://doi.org/10.1186/1753-2000-7-22.
- Davis M, Gidycz CA (2000). Child sexual abuse prevention programs: A meta-analysis. J Clin Child Psychol. 29: 257-265. 10.1207/S15374424jccp2902_11.
- Davis M, Gidycz CA (2000). Child sexual abuse prevention programs: A meta-analysis. J Clin Child Psychol. 29: 257-265. 10.1207/S15374424jccp2902_11.
- Dunkerley, G. K., & Dalenberg, C. J. (2000). Secret-keeping behaviors in black and white children as a function of interviewer race, racial identity, and risk for abuse. Journal of Aggression, Maltreatment & Trauma, 2(2), 13-35.
- Faller, K. C. (1984). Is the child victim of sexual abuse telling the truth? *Child Abuse & Neglect*, 8(4), 473–481. https://doi.org/10.1016/0145-2134(84)90029-2
- Harvey, P., Forehand, R., Brown, C., & Holmes, T. (1988). The prevention of sexual abuse: Examination of the effectiveness of a program with kindergarten-age children. *Behavior Therapy*, 19(3), 429-435.
- Herman, J. (1981). Father-daughter incest. *Professional Psychology*, *12*(1), 76–80. Https://d oi.org/10.1037/0735-7028.12.1.76

- Kemer D, İşler Dalgıç A. Effectiveness of Sexual Abuse Prevention Training Program Developed by Creative Drama for Preschoolers: An Experimental Study. J Child Sex Abus. 2022 Jan;31(1):9-32. doi: 10.1080/10538712.2021.1994504. Epub 2021 Oct 25. PMID: 34696696.
- Kempe, C. H. (2013). Sexual abuse, another hidden pediatric problem: The 1977 C. Anderson Aldrich lecture. In R. D. Krugman & J. E. Korbin (Eds.), C. Henry Kempe: A 50 year legacy to the field of child abuse and neglect (pp. 179–192). Springer Science + Business Media. https://doi.org/10.1007/978-94-007-4084-6_21
- Kenny, M. C., Wurtele, S. K., & Alonso, L. (2012). Evaluation of a personal safety program with Latino preschoolers. Journal of Child Sexual Abuse, 21, 368–385. doi:10.1080/ 10538712.2012.675426
- Last U, Aharoni-Etzioni A. Secrets and reasons for secrecy among school-aged children: developmental trends and gender differences. J Genet Psychol. 1995 Jun;156(2):191-203. doi: 10.1080/00221325.1995.9914816. PMID: 7798078.
- Leslie M. Tutty, Danielle Aubry & Laura Velasquez (2020) The "Who Do You Tell?"[™] Child Sexual Abuse Education Program: Eight Years of Monitoring, Journal of Child Sexual Abuse, 29:1, 2-21, DOI: 10.1080/10538712.2019.1663969
- London K & Nunez N. Examining the efficacy of truth/lie discussions in predicting and increasing the veracity of children's reports. J Exp Child Psychol. 2002 Oct;83(2):1 31-47. doi: 10.1016/s0022-0965(02)00119-4. PMID: 12408959.
- Lyon TD, Dorado JS. Truth induction in young maltreated children: the effects of oathtaking and reassurance on true and false disclosures. Child Abuse Negl. 2008 Jul;32(7):738-48. doi: 10.1016/j.chiabu.2007.08.008. Epub 2008 Jul 2. PMID: 18599 119; PMCID: PMC3280084.
- MacMillan, H. L., MacMillan, J. H., Offord, D. R., Griffith, L., & MacMillan, A. (1994). Primary prevention of child sexual abuse: a critical review. Part II. Journal of Child Psychology and Psychiatry, 35(5), 857-876.
- Meares R, Orlay W. On self-boundary: a study of the development of the concept of secrecy. Br J Med Psychol. 1988 Dec; 61 (Pt 4):305-16. doi: 10.1111/j.2044-8341. 1988.tb02 793.x. PMID: 3207635.
- Muhammad, I. & Rubina, A. (2017). Social History of Childhood and Children: A Note on the Cultural and Historical Differences in Child Care. 54-59. 10.9790/0837-2207045459.
- Murray LK, Nguyen A, Cohen JA. Child sexual abuse. Child Adolesc Psychiatr Clin N Am. 2014 Apr;23(2):321-37. doi: 10.1016/j.chc.2014.01.003. PMID: 24656583; PMCID: PMC4413451.
- Nemerofsky, A. G., Carran, D. T., & Rosenberg, L. A. (1994). Age variation in performance among preschool children in a sexual abuse prevention program. Journal of Child Sexual Abuse, 3(1), 85-102.
- Pathirana, B.D.D & Canadian Red Cross (2017). Be Safe! Child protection as part of programming in Sri Lanka.
- Pellai, Alberto and Caranzano-Maitre, Myriam (2015) "Primary prevention of child sexual abuse: Child focused interventions," Irish Journal of Applied Social Studies: Vol. 15: Iss. 2, Article 4.
- Piaget, J. (1932). The moral judgment of the child. Routledge.
- Summit, R. C. (1983). The child sexual abuse accommodation syndrome. *Child Abuse & Neglect*, 7(2), 177–193. https://doi.org/10.1016/0145-2134(83)90070-4
- Talwar V, Lee K, Bala N, Lindsay RC. Children's conceptual knowledge of lying and its relation to their actual behaviors: implications for court competence examinations.

Law Hum Behav. 2002 Aug;26(4):395-415. doi: 10.1023/a:1016379104959. PMID: 12182530.

- Walsh K, Zwi K, Woolfenden S, Shlonsky A. School-based education programes for the prevention of child sexual abuse. Cochrane Database of Systematic Reviews 2015, Issue 4. Art. No.: CD004380. DOI: 10.1002/14651858. CD004380.pub3.
- Watson, A. J., & Valtin, R. (1997). A structural analysis of children's concepts of secrecy. Australian Journal of Psychology, 49(1), 49-54.
- Watson, A. J., & Valtin, R. (1997). Secrecy in middle childhood. International Journal of Behavioral Development, 21(3), 431-452.
- Wurtele, S. K., & Owens, S. J. (1997). Teaching personal safety to young children: An investigation of age and gender a cross five studies. Child Abuse & Neglect, 21(8), 805–814.
- Wurtele, S. K., Hughes, J., & Owens, J. (1998). An examination of the reliability of the "what if" situations test: A brief report. Journal of Child Sexual Abuse, 7(1), 41–52. doi:10.1300/J070v07n01_03
- Wurtele, Sandy & Kenny, Maureen. (2010). Primary prevention of child sexual abuse: Child-and parent-focused approaches. The Prevention of Sexual Violence: A Practitioner's Sourcebook. 107-119.
- Y M Rohanachandra, D M A Dahanayake, P A S Pathigoda, G S Wijetunge, (2015). Characteristics of victims of alleged child sexual abuse referred to a child guidance clinic of a children's hospital. Ceylon Medical Journal 2015; 60: 163-164.
- Yoshikawa, H., Weiland, C., Brooks-Gunn, J., Burchinal, M. R., Espinosa, L. M., Gormley, W. T., & Zaslow, M. J. (2013). Investing in our future: The evidence base on preschool education.
- Zhang, W., Chen, J., Feng, Y., Li, J., Liu, C., & Zhao, X. (2014). Evaluation of a sexual abuse prevention education for Chinese preschoolers. Research on Social Work Practice, 24, 428–436. doi:10.1177/1049731513510409

Acknowledgement

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Conflict of Interest

The author declared no conflict of interests.

How to cite this article: N., D., U., Vimukthi & D., D., K., S., Karunanayake (2022). A Study on the Effects of a prevention Program to Improve Preschool Children's Knowledge Pertaining to the Difference between Good and Bad Secrets related to Child Sexual Abuse (CSA). *International Journal of Indian Psychology*, *10*(*4*), 131-140. DIP:18.01.015.20221 004, DOI:10.25215/1004.015