

## Child sexual abuse: impact on child behavior and perspectives for Occupational Therapy

### Abuso sexual infantil: impacto no comportamento da criança e perspectivas para a Terapia Ocupacional

### Abuso sexual infantil: impacto en el comportamiento del niño y perspectivas para la Terapia Ocupacional

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This is an integrative review carried out in 2019, through the Portal Regional da Biblioteca Virtual em Saúde, in Portuguese, between 2009 and 2019. It aimed to know the scientific production on the impact of sexual abuse in children and point out the possibilities of Occupational Therapy action. The following descriptors and their combinations were considered: "Abuso sexual" infantil (Child "sexual abuse"); "Abuso sexual" infantil AND comportamento (Child "sexual abuse" AND behavior); "Violência sexual" infantil saúde pública/"Violência sexual infantil" saúde coletiva (Child "Sexual violence" public health/"Child sexual violence" collective health); Abuso sexual infantil AND comportamento (Child sexual abuse AND behavior); "Violência sexual" infantil atenção primária em saúde (Child "sexual violence" primary health care); "Violência sexual" infantil saúde pública/"Violência sexual infantil" saúde coletiva ("Child sexual violence" public health/"Child sexual violence" collective health); "Abuso sexual" infância AND terapia ocupacional/"violência sexual" infantil Terapia Ocupacional (Child "Sexual abuse" AND occupational therapy/"sexual violence" childhood Occupational Therapy). From an initial survey of 238 articles, six articles were eligible and two thematic categories were constructed: *Child Sexual Abuse: a perverse reality*; and *Child Sexual Abuse: consequences and reflections of Occupational Therapy*. It was observed that the highest occurrence of sexual abuse occurs in the intra-family environment, with the victim's father, stepfather and brother as the main abusers. Abuse causes possible psychosocial traumas that directly interfere in the child's life, generating consequences in their development and behavior. Occupational therapeutic intervention can prevent psychological, social and emotional consequences that affect children who are victims of sexual abuse.

**Descriptors:** Child abuse, Sexual; Adaptation, Psychological; Occupational Therapy.

Esta é uma revisão integrativa, realizada em 2019, através do Portal Regional da Biblioteca Virtual em Saúde, em português, considerando o período de 2009 a 2019, com o objetivo de conhecer a produção científica sobre o impacto do abuso sexual na infância e apontar as possibilidades de ação da Terapia Ocupacional. Considerou-se os descritores e suas combinações: "Abuso sexual infantil"; "Abuso sexual infantil AND comportamento"; "Violência sexual criança e adolescente"; "Abuso sexual infantil AND comportamento"; "Violência sexual infantil atenção primária em saúde"; "Violência sexual infantil saúde pública/Violência sexual infantil saúde coletiva"; "Abuso sexual infância AND terapia ocupacional/Violência sexual infantil Terapia Ocupacional". Do levantamento inicial de 238 artigos, foram elegíveis seis artigos, e construídas duas categorias temáticas: *Abuso Sexual Infantil: uma realidade perversa*; e *Abuso Sexual Infantil: consequências e reflexões da Terapia Ocupacional*. Observou-se que a maior ocorrência de abuso sexual foi no ambiente intrafamiliar, com o pai, padrasto e irmão da vítima como os principais abusadores. O abuso causa possíveis traumas psicossociais que interferem diretamente na vida da criança, e gera consequência no desenvolvimento e no comportamento destas. A intervenção terapêutica ocupacional poderá prevenir consequências psíquicas, sociais e emocionais que acometem as crianças vítimas de abuso sexual.

**Descritores:** Abuso sexual na infância; Adaptação psicológica; Terapia Ocupacional.

Esta es una revisión integradora realizada en 2019, a través del Portal Regional de la Biblioteca Virtual en Salud, en portugués, considerando el período de 2009 a 2019, con el objetivo de conocer la producción científica sobre el impacto del abuso sexual en la infancia y señalar las posibilidades de actuación de la Terapia Ocupacional. Se consideraron los descriptores y sus combinaciones: "Abuso sexual infantil"; "Abuso sexual infantil AND comportamiento" ("Abuso sexual infantil AND comportamiento"); "Violência sexual criança e adolescente" ("Violencia sexual niños y adolescentes"); "Abuso sexual infantil AND comportamento" ("Abuso sexual infantil AND comportamiento"); "Violência sexual infantil atenção primária em saúde" ("Violencia sexual infantil atención primaria de salud"); "Violência sexual infantil saúde pública/Violência sexual infantil saúde coletiva" ("Violencia sexual infantil salud pública/Violencia sexual infantil salud colectiva"); "Abuso sexual infância AND terapia ocupacional/Violência sexual infantil Terapia Ocupacional" ("Abuso sexual infancia AND terapia ocupacional/Abuso sexual infantil Terapia Ocupacional"). A partir de la encuesta inicial de 238 artículos, seis artículos fueron elegibles y, dos categorías temáticas se construyeron: *Abuso Sexual Infantil: una realidad perversa*; y, *Abuso Sexual Infantil: consecuencias y reflexiones de la Terapia Ocupacional*. Se observó que la mayoría de los abusos sexuales se producen en el entorno intrafamiliar, siendo el padre, el padrasto y el hermano de la víctima los principales abusadores. El abuso provoca posibles traumas psicossociales que interfieren directamente en la vida del niño y genera consecuencias en su desarrollo y comportamiento. La intervención terapéutica ocupacional puede prevenir las consecuencias psíquicas, sociales y emocionales que afectan a los niños víctimas de abuso sexual.

**Descritores:** Abuso sexual infantil; Adaptação psicológica; Terapia Ocupacional.

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## INTRODUCTION

**W**hen considering the stages of child development, it is extremely important to monitor human development, as this is a unique, continuous and changing process. The prenatal period and the early years are decisive in the child's evolution, as they come from the experience offered by the environment and the interaction with the genetically inherited biopsychosocial characteristics<sup>1</sup>.

The term sexual abuse should be understood as an act in which an individual is submitted by another to obtain sexual gratification against their will. The act of sexual abuse goes beyond disrespecting the other, as it involves a relationship of power and pursuit of excess<sup>2</sup>.

Child Sexual Abuse (CSA) is considered one of the biggest public health problems that occur all over the world, in all social classes, age groups and without gender distinction. In CSA, the child is induced by the abuser to commit sexual acts against their will<sup>3</sup>.

CSA is characterized as any act performed by the person who uses the child or adolescent to satisfy their sexual desires, whether it is sexual intercourse, sexual game or any act of an erotic nature<sup>4</sup>. In addition, factors such as sexual exploitation, such as encouragement, prostitution, sexual slavery, child pornography and sexual tourism, are also considered CSA.

From the perspective of children's development, when they experience trauma such as sexual violence, this fact can cause great harm to their development, and cause emotional, behavioral and social impairments. It is understood that children often do not understand what is happening or do not know how to deal with this violence, and these practices are imposed by physical force, threats or induction of their will by the abuser. In many cases, sexual abuse occurs within the family itself, causing even greater damage, as there is an emotional bond between victim and abuser, thus causing a break in the family bond and the child's trust in their parents<sup>5</sup>.

Sexual abuse can have several consequences, as can be seen by behavioral indicators: loss of appetite, rejection by father or mother, sudden changes, resistance to undressing, difficulties in sitting and maintaining social relationships, school problems, fantasies and regressive behavior, avoiding physical contact or engaging in seductive behavior, in addition to early and inappropriate knowledge for the child's age about sexuality<sup>2</sup>.

The performance of Occupational Therapy with children victims of sexual violence is of great importance, as this professional has the role of facilitator of the reestablishment of the family bond, and resolution of conflicts arising from the trauma. The interventions of this professional will be aimed at reestablishing the physical, psychological and social conditions of the child and adolescent<sup>6</sup>.

The occupational therapist will resort to activities that minimize the impacts and consequences of violence, through the use of therapeutic resources, such as the use of the Ludic Model. The act of playing can be an important resource used to understand the world around the child and what comes with it, enabling the solution of conflicts and frustrations, thus promoting a process of self-knowledge, relationship with the other, in addition to exploring and developing skills and child skills<sup>6</sup>.

Occupational therapists position themselves as a facilitator of expressions and of the re-elaboration of the process experienced by the child, so that he can recognize himself as an active being in the world, through the playful model, provided by the act of playing<sup>7</sup>.

CSA can cause serious psychopathological traumas, such as sexualized and inappropriate behavior for the child's age, depression, easy crying, fear of people in general, poor school performance, suicidal thoughts<sup>8</sup>. Thus, this study aimed to understand the scientific production on the impact of sexual abuse in childhood and point out the possibilities of action of Occupational Therapy.

## METHODS

It is an integrative review, defined as a broad methodological approach regarding reviews, which allow the inclusion of experimental and non-experimental studies, for a better understanding of the phenomena analyzed, in addition to combining data from theoretical and empirical literature, it incorporates a range of Purpose: definition of concepts, review of theories and evidence, and analysis of methodological problems of a particular topic<sup>9</sup>.

For the construction of this study, the following steps were taken: 1) Identification of theme and delimitation of research question; 2) Definition of inclusion and exclusion criteria, and sampling and literature search; 3) Categorization of studies found; 4) Evaluation of studies found; 5) Analysis of results found; and 6) Knowledge synthesis.

Data collection was carried out in November 2019. The collection was carried out from a bibliographic survey of scientific articles in journals indexed in the Biblioteca Virtual em Saúde (BVS) databases. The publications of reference authors in the area were consulted, a later critical and thorough reading of articles on the BVS portal, using the following Health Sciences Descriptors (DeCS): “Abuso sexual” infantil (Child “sexual abuse”); “Abuso sexual” infantil AND comportamento (Child “sexual abuse” AND behavior); “Violência sexual” infantil saúde pública/ “Violência sexual infantil” saúde coletiva (Child “Sexual violence” public health/ “Child sexual violence” collective health); Abuso sexual infantil AND comportamento (Child sexual abuse AND behavior); “Violência sexual” infantil atenção primária em saúde (Child “sexual violence” primary health care); “Violência sexual” infantil saúde pública/ “Violência sexual infantil” saúde coletiva (“Child sexual violence” public health/ “Child sexual violence” collective health); “Abuso sexual” infância AND terapia ocupacional/ “violência sexual” infantil Terapia Ocupacional (Child “Sexual abuse” AND occupational therapy/ “sexual violence” childhood Occupational Therapy).

As inclusion criteria, the following items were considered: 1) articles indexed in the BVS; 2) published in the last 10 years (2009 to 2019); 3) available in full; 4) written in Portuguese and; 5) with the main issues: child sexual abuse; child sexual abuse and occupational therapy and child sexual violence.

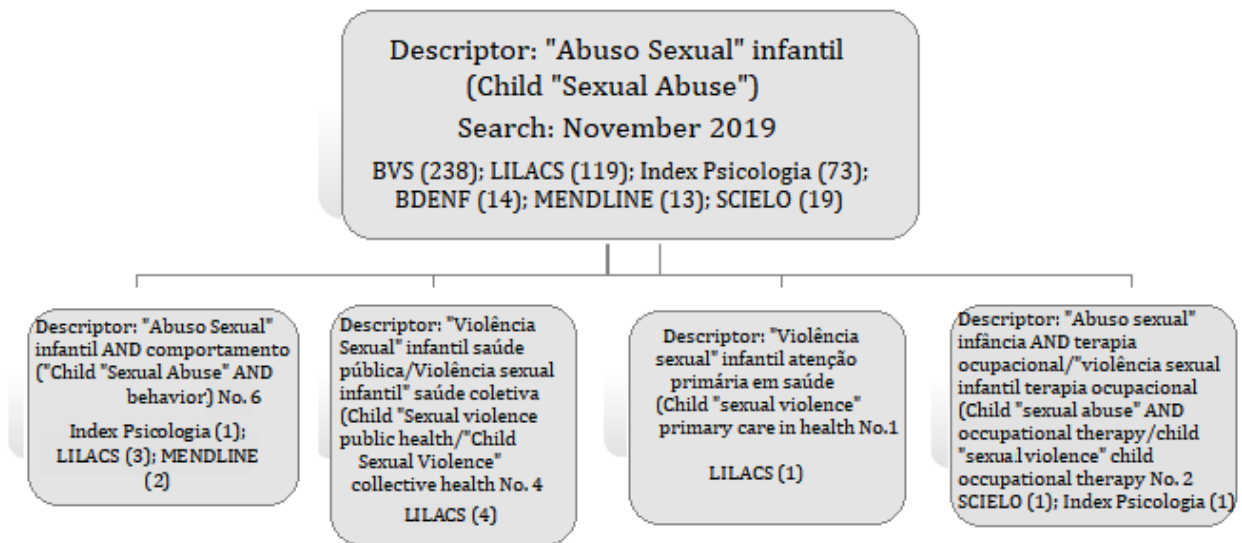
For the exclusion criteria, the following items were considered: 1) works published in the form of theses, dissertations, books, book chapters or reviews; 2) articles published in languages other than Portuguese; 3) duplicate articles in the database; and 4) articles that were not in agreement with the theme of child sexual abuse, removing those that had as their main focus on violence and neglect.

The studies selected to compose this integrative literature review were arranged in a Microsoft Excel® 2010 spreadsheet and categorized according to the authors/year of publication, journal, study type, article title, study objective and main result found.

## RESULTS

238 articles were identified on the subject of child sexual abuse, which, after analysis based on the objective outlined, on the inclusion and exclusion criteria and on the search descriptors: “Child sexual abuse AND behavior”, with six articles; four for “Child sexual violence public health/Child sexual violence” collective health; one for “Child sexual violence primary care in health”; and two on “Childhood sexual abuse AND occupational therapy/child sexual violence occupational therapy”, initially resulting in 13 eligible studies. Figure 1 shows the search cycle for articles, as well as the quantity of articles found in the databases, according to the descriptors.

**Figure 1.** Search cycle with the correlation of the quantity of articles found in the database. Rio Grande do Sul, Santa Maria, 2019.



The article selection process resulted in a total of 238 studies. Of these, 181 were excluded by reading the title, four for being duplicates, resulting in the identification of 57 articles. Of these, 40 were excluded considering the exclusion criteria, resulting in 10 articles selected for full reading and, of these, four were excluded for not focusing on the planned theme, as they discussed negligence and violence. With this exclusion, there remained six articles that fit the purpose and proposal of this study (Figure 2).

**Figure 2.** Flowchart of collection of articles that composed the results. Rio Grande do Sul, Santa Maria, 2019.

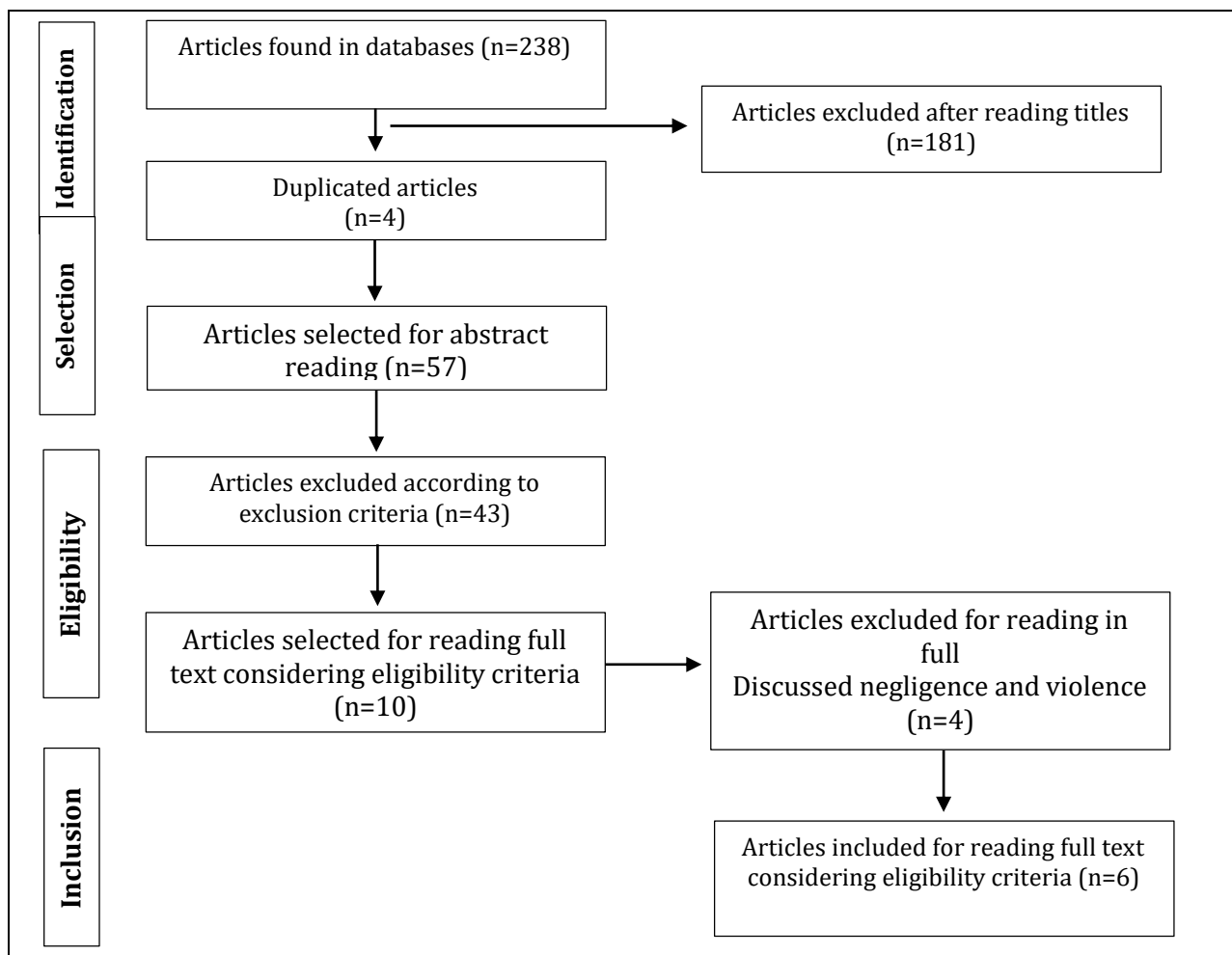


Table 1 presents a summary of the main characteristics of the six selected articles. This presents data from each study, based on the variables: authors/year of publication, journal, type of study, title of the article and purpose of the study.

After analyzing the six selected articles, it was observed that the main victims of CSA are girls, children or adolescents, brown or black (Articles 1, 2, 3 and 5), low income (Articles 1 and 3) and who reside in peripheral regions (Articles 3 and 5). The studies showed that, most of the time, CSA occurs in the intra-family environment (Articles 1, 3 and 5), and the aggressor is male (father, stepfather, brother), but this violence can also happen in the extra-family environment, which may the aggressor is a stranger or a person close to the family (neighbor, boyfriend) (Article 5).

Article 2 reflects on CSA and pregnancy. This study showed that most girls up to 13 years old who had children were black. The study pointed out the occurrence of repeated violence in most cases. Regarding prenatal care, there was a late start and a low number of consultations; and as for the type of delivery, there was a higher percentage of cesarean. Regarding the babies, the study highlighted that they had worse birth weight and 1<sup>st</sup> minute APGAR than mothers without notification of rape.

**Chart 1.** Synthesis of the studies analyzed in full. Rio Grande do Sul, Santa Maria, 2019.

No.	Author/ Year	Journal	Type of study	Article title	Objective of study
1	Guimarães, J.A.T.L; Villela, W.V; 2011.	Cadernos Saúde Publica	Descriptive	Characteristics of physical and sexual violence against children and adolescents examined at the Forensic Medicine Institute in Maceió, Alagoas State, Brazil	Describe the characteristics of violence against children and adolescents assisted at the Instituto Médico Legal de Maceió (IML/Maceió), Alagoas, Brazil
2	Souto, R.M.C.V; et al; 2017	Ciência & Saúde Coletiva	Descriptive	<i>Estupro e gravidez de meninas de até 13 anos no Brasil: características e implicações na saúde gestacional, parto e nascimento.</i> (Rape and pregnancy of girls up to 13 years old in Brazil: characteristics and implications for gestational health, delivery and birth)	Describe the characteristics of mothers up to 13 years old and analyze the profile of reported rape cases in this same age group and the repercussions of this violence during pregnancy and childbirth.
3	Honorato, L.G.F; et al; 2018	Arquivos Brasileiros de Psicologia	Descriptive, exploratory, quantitative	Violence in Childhood and Adolescence: Profile reported in the mesoregion of the Low Amazon	Draw a profile of reported violence against children in the western region of the state of Pará, with an emphasis on physical and sexual violence.
4	Nascimento, A.F; Deslandes, S,F; 2016	Revista de Saúde Coletiva	Bibliographi c	The construction of Brazilian public agenda to face child sexual abuse	Analyze the emergency of the social issue of sexual violence against children and adolescents as a public problem, its inclusion and permanence in the formal agenda of national policies in the decades of 1990 and 2000.
5	Santana, J.S.S.; Santana, S.P; Lopes, M.L; 2011.	Revista Baiana de Saúde Pública	Quantitative, descriptive, transversal	Sexual Violence Against Children and Adolescents: Analysis of Notifications of Council of Guardianship and Technical Police Department	Present characteristics of registered cases of sexual violence against children and adolescents in the municipality of Feira de Santana, in the Bahia state, from 2002 to 2006.
6	Pimentel, A.S.G; Araújo, L.S.; 2009.	Psicologia em Estudo	Qualitative Gestalt phenomenol ogical- existential orientation	Interpretation Gestalt of a sexual violence inside family	Unveil some meanings attributed to intrafamily sexual violence.

Article 4 presents a contextualization of the broad movement of articulation and social mobilization that took place in the 1990s that guided the construction of the National Plan to Combat Sexual Violence against Children and Adolescents as an intersectoral public policy, which was approved in the 2000s by 160 participating organizations in the National Meeting, in the city of Natal, in the state of Rio Grande do Norte, "Natal Letter" and ratified at the Ordinary Assembly of the National Council for the Rights of Children and Adolescents (*Conselho Nacional dos Direitos da Criança e do Adolescente* - CONANDA).

In Article 6, an analysis was carried out considering Ricoeur's theory of interpretation, concepts of Gestalt-Therapy that considers contact, background and psychological nutrition, and Occupational Therapy that bases its reflections on areas, components and contexts of performance. Thus, it was possible to understand the adolescent's experience, considering her existential field, it was observed that the CSA interfered with her self-image and self-esteem, triggering a set of demands in the psychic, occupational, affective and relational field.

## DISCUSSION

The studies in this review were grouped into two categories, namely: *Child Sexual Abuse: a perverse reality*; and *Child Sexual Abuse: consequences and reflections of Occupational Therapy*.

### ***Child Sexual Abuse: a perverse reality***

Sexual abuse is the most perverse violence practiced against children and adolescents, as it affects the body, mind and dignity of victims<sup>9-11</sup>. The studies analyzed demonstrate that CSA most commonly affects female children and adolescents (Article 1, 2, 3 and 5), corroborating data from other studies<sup>12-14</sup>.

Regarding color, most of the analyzed studies pointed to mixed or black children and adolescents (Article 1, 2, 3 and 5), according to studies on the subject<sup>10,13,14</sup>. Thus, it is believed that the fact that most notifications correspond to female victims may be, in part, due to the lack of notification by males, being motivated by the fear of embarrassment resulting from the prejudice surrounding of sexual identity and the family and social repercussions<sup>10,13-16</sup>.

In the studies analyzed, the children and adolescents were from low-income families (Articles 1 and 3), data that corroborates the results of other investigations on the subject<sup>17-19</sup>. But it is important to emphasize that the low-income situation, in itself, does not justify any practice of violence against children, adolescents or any other person, as violence is part of the daily life of all social classes<sup>20</sup>.

Regarding residence, it was observed that most children and adolescents who suffer CSA live in peripheral neighborhoods (Articles 3 and 5), a characteristic pointed out in a study that addresses the subject<sup>20</sup>. The CSA occurs in all social classes, the fact that it is more frequent in the less favored social classes may be related to the ways to seek help and address the problem. For families from higher social classes seek this help in the private sector (private offices), thus facilitating the maintenance of confidentiality of the situation. In the case of families from lower social classes, the demand is for public sector services<sup>20</sup>. It is noteworthy that public services also guarantee the confidentiality of victims and access to data is carried out in compliance with current national legislation.

From the analysis of the selected studies, an increase in the rate of sexual abuse against children and adolescents in the intra-family environment can be seen (Articles 1, 3 and 5). As an act performed by a family member or person responsible for it, studies show that CSA is often committed by the victim's father, stepfather or brother, the house where the child lives is the main place of abuse<sup>12-14</sup>.

Sexual abuse, when experienced by the child or adolescent in the family context, can lead to major complications, intensifying the trauma caused by the emotional closeness between abuser and victim<sup>5</sup>. Thus, it is extremely important to support the family, child and adolescent who were violated, as it is at this stage of development that marked changes occur, ranging from physical to neurological, cognitive and behavioral.

When a child does not receive the necessary support, there can be serious declines in their development, thus requiring a person who plays the role of caregiver, who provides a healthy environment, ensuring adequate psychosocial development, as it is understood that it is the duty of the State and of the family to protect and ensure the rights established by the Child and Adolescent Statute (*Estatuto da Criança e do Adolescente - ECA*)<sup>21</sup>, law 8.069, of July 13,

1990, which provides for full protection of children and adolescents. Therefore, it is through this support that the negative effects of such violence can mitigate such effects<sup>10,22</sup>.

An important point mentioned in Article 2 was pregnancy, the reflections made in this study corroborate other studies dealing with the theme<sup>12,23,24</sup>. The increasing representation of pregnant children and adolescents is a significant phenomenon in Brazil<sup>25-27</sup> and worldwide<sup>28</sup>. Early sexual initiation can generate risks to biological, psychological and social development<sup>25-27</sup>. A factor that corroborates this data is the absence of studies and policies with this audience<sup>28</sup>, thus, it is important to know the needs and demands of these children and adolescents and, thus, to draw action strategies to reduce cases of pregnancy.

Article 4 points out that, currently, there is an increase in notifications of sexual violence as a result of the implementation of public policies and dissemination of the electronic tool such as "Dial 100", giving greater visibility to situations of sexual abuse in general and, consequently, increasing the number of these types of notifications<sup>12</sup>. But the non-reporting of abuses is still a reality. This factor was presented in the analyzed studies, relating to the difficulty in proving such an act, as it is not always possible to find signs of violence through a legal medical examination, in addition to the feeling of guilt on the part of the victim<sup>10,13,15</sup>.

The increase in number of notifications shows the fragility of the network in providing care health and protection, being of extreme importance the promotion of health and public policies that provide a social structure for the individual development of children and adolescents and their families, highlighting the importance of implementing a multidisciplinary work aimed at integrated actions of care and attention to health and life, which seek to promote more structured strategies, guarantee comprehensive care, and guaranteed information and clarification on the importance of interrupting the cycle of violence and preserving lives<sup>11,12,29</sup>.

For a better functioning of the support and care networks, it is necessary that the team that welcomes the cases of abused children and adolescents be technically, emotionally and psychologically prepared so that the services are effective, emphasizing the importance and need for implementation training/sensitization courses for professionals with an approach in the areas of Education, Justice and Health to inform them about the immense and invisible problem of sexual violence in the lives of victims<sup>30,31</sup>.

### ***Child Sexual Abuse: consequences and reflections of Occupational Therapy***

Child sexual violence is a phenomenon that crosses borders, being something that happens in all countries. Due to its frequency and often not receiving the proper attention, which can cause great sequelae, triggering a set of demands in biological, social<sup>25-27</sup>, in the psychic field<sup>16,25-27,29,32</sup>, emotional, occupational, behavioral, affective and relational<sup>16,29,32</sup>. These sequelae are mentioned by the authors of the six articles analyzed in this study.

In the psychic and emotional field, violence can lead to abuse of alcohol and other drugs, depression, anxiety, suicidal tendency, compromising self-image and self-esteem, appearance of sexualized behavior, sleep disorders, psychotic symptoms, anxiety conditions, expressions repeated through gestures, feelings of rejection, confusion, humiliation, shame and fear<sup>16,29,30</sup>.

Regarding behavioral impairments presented in the analyzed studies, changes in diet and learning stand out, and an unusual increase in the frequency of bathing<sup>29</sup>. In the relational field, there are difficulties in creating new social and affective bonds, causing isolation and socialization difficulties<sup>12,16,29,30</sup>. The child or adolescent who was abused may present promiscuity behaviors, sexual dysfunctions, coitophobia, menstrual dysfunctions, poor body image, sexualization or abuse of their children, self and heterodestructive behavior, low self-esteem, guilt, feelings of shame and betrayal, psychiatric disorders and homosexuality<sup>2,29</sup>.

The performance of the Occupational Therapy professional towards these victims (referred to in Article 6) is conjectured based on the understanding of the meanings that children or adolescents attribute to the occurrence of sexual abuse, as well as the understanding of the experiences lived by the victims in their field existential, which is reflected in their way of being-in-the-world and in the interactions they establish with themselves and with their



family and friends<sup>16,33</sup>. Resignifying these values and the lives of these children and adolescents, it is noted that the professional not only interferes in the child's daily life, but also promotes the support of the family, which will favor the results of their therapeutic intervention, especially when there is more stimulation daily in the environment where the child feels welcomed<sup>2</sup>.

Faced with individuals who have suffered sexual abuse, the occupational therapist seeks to recover the active dimension of human existence, which is the result of a new look, using as an instrument of action the use of various activities, through the act of doing and the posture of being. Thus, the professional will resort to work with expressive and creative activities, associated with psychodynamic and social approaches, based on any and all verbal and non-verbal human expression for therapeutic purposes. More than words, activities express the thoughts and feelings of these children and adolescents<sup>2,33</sup>.

Therapeutic approaches can prevent a decline in the psychological, social and emotional development of children who have suffered sexual violence, also enabling the early identification of behavioral changes resulting from such an act, as sexual abuse can also cause the loss of subjectivity, having physical consequences that may directly affect the child's development during the stages of development, causing damage throughout life<sup>2,33</sup>.

An early therapeutic approach can prevent inappropriate behaviors, such as a suicide attempt, abusive use of alcohol and other drugs, minimizing traumatic episodes, the development of mental disorders and enabling this child to recognize themselves as an active being and not lose his subjectivity<sup>2</sup>.

## CONCLUSION

From the analyzed studies, it can be observed that the CSA growth in the intra-family environment, being this act committed by the father, stepfather or brother of the victim. The children and adolescents most affected by sexual abuse are female, of mixed color/race.

CSA generates many negative impacts on the lives of children and adolescents. They face the psychological, emotional, physical and social consequences of this violence throughout their lives. It is important to create promotion, education and prevention strategies through a multidisciplinary team approach to minimize harm to the development of victims.

Another point mentioned in the publications is the involvement of the family and society in general to detect symptoms and seek qualified help for these children and adolescents, thus avoiding possible trauma.

When considering the multidisciplinary team approach, which will include professionals from the areas of health, humanities and social assistance, it is important to discuss the role of the Occupational Therapist in the intervention with children and adolescents who have suffered CSA. This is because these professionals carry out their interventions based on the needs of individuals, use playful activities to devise strategies to minimize the impacts of sexual abuse on child development, traumas, promote quality of life and give new meaning to the lives of these children and adolescents and, thus, allowing children and adolescents to express themselves and create, taking a place of being, being a subject and having their place in the world.

This study suggests a reflection on the theme from the perspective of health teams, especially with regard to primary care, through which teams of Basic Health Units can perceive and observe the main warning signs for CSA cases.

As limitations of this study, the scarcity of scientific research that discusses the impact of CSA on the behavior of children and adolescents, the intervention of Occupational Therapists together with the perspective of collective health, is highlighted.

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#### CONTRIBUTIONS

**Giovana Rodrigues dos Santos** contributed to the design, collection and analysis of data and writing. **Aline Sarturi Ponte** participated in the writing and revision. **Tânia Fernandes Silva** worked on the study design and review.

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