

Reproductive Health Education in Improving Adolescents' Self-Protection Against Sexual Abuse: A Scoping Review

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ABSTRACT

Background: The issue of sexual abuse among adolescents remains a reproductive health issue, and adolescents' vulnerability increases due to a lack of knowledge about self-protection. This scoping review aims to identify and map scientific evidence regarding reproductive health education in improving adolescents' self-protection skills against sexual abuse.

Method: : This scoping review follows the PRISMA-ScR guidelines and uses the PCC (Population, Concept, Context) Framework. Literature searches were conducted using five databases, namely PubMed, ScienceDirect, Wiley Online Library, EBSCO, and Google Scholar. The article screening process was carried out systematically using Rayyan, with duplicate removal, title and abstract screening, and full-text assessment against inclusion and exclusion criteria. Of the 854 articles identified, 10 articles met the criteria and were analyzed further. The methodological quality of the articles was assessed using the Joanna Briggs Institute (JBI) assessment, with 7 articles (70%) receiving a Grade A and 3 articles (30%) receiving a Grade B. The dominant research designs were pre-experimental (30%) and qualitative (30%).

Result: This scoping review identified four themes, namely adolescents' knowledge of reproductive health, reproductive health education in schools, educational materials and methods, and improving adolescents' self-protection skills. Reproductive health education shows potential in supporting the strengthening of adolescents' self-protection against sexual abuse through increasing their knowledge and protective skills.

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INTRODUCTION

Sexual abuse of adolescents is a serious problem with long-term effects on physical, psychological, and social health.(1) According to the World Health Organization (WHO), about 650 million women (1 in 5) and 1 in 7 men reported experiencing sexual abuse or violence before age 18.(2) In Indonesia, the 2024 National Survey on the Experiences of Children and Adolescents (SNPHAR) by the Ministry of Women's Empowerment and Child Protection reported that 11.5 million children aged 13-17, or about 50.78%, have experienced physical, emotional, or sexual violence at some point. These findings show that violence against adolescents remains high and is an important child protection issue in Indonesia.(3)

Adolescence is a transitional period from childhood to adulthood. It is marked by significant biological, psychological, and social changes. Adolescence is divided into early (ages 10-13), middle (ages 14-16), and late adolescence (ages 17-18) (4) in terms of its development stages. This scoping review uses this age range as the population limit. This phase includes puberty,

identity exploration, and increased social interaction, all of which heighten the risk of sexual abuse.(5) Adolescents are more vulnerable due to less mature cognitive development and decision-making. Limited knowledge about reproductive health, bodily boundaries, and self-protection skills also raises this risk. Reproductive health education is seen as a preventive strategy to strengthen adolescents' self-protection skills.(6)

Based on research conducted by Barriuso Ortega, reproductive health education plays an important role in improving adolescents' understanding and forming more positive attitudes towards sexual violence. Through reproductive health education interventions, adolescents not only gain information but also experience an increase in self-protection, especially in their ability to make the right decisions regarding sexual health and safety.(7) Several previous studies have shown that reproductive health education and sex education can increase adolescents' knowledge and reduce their self-awareness to avoid sexual abuse.(8) The novelty of this scoping review is the self-protection skills outcomes that are mapped as skill

achievements in reproductive health education interventions in adolescents.

Thus, the review question in this scoping review is: How does reproductive health education improve adolescents' self-protection against sexual abuse? The purpose of this scoping review study is to identify and map scientific evidence regarding the role of reproductive health education in improving adolescents' self-protection against sexual abuse. The findings of this study are expected to provide a scientific basis for programs, educators, and policymakers in designing educational interventions that are more responsive to the needs of adolescents in preventing sexual abuse.

METHOD

This scoping review has been registered on the open science platform (OSF) as part of fulfilling research protocols and methodological transparency, with registration number: doi.org/10.17605/OSF.IO/CEUJW The method employed is a scoping review. A scoping review is a method of literature review that aims to identify, map, and summarize scientific evidence related to a specific topic.(9) This Scoping review refers to the framework developed by Arksey and O'Malley, which includes five main stages, namely, identification of research questions, identification of relevant studies, study selection, data mapping (Data Charting), and summarization and reporting of results.(10) This Scoping review is also reinforced by the methodological refinement approach by Levac et al., which emphasizes the clarity of the review objectives, transparent study selection process, and comprehensive interpretation of results, as well as following the JBI (Joanna Briggs Institute) guidelines to improve accuracy and systematic reporting of results.(11) The following are the stages carried out in the implementation of this scoping review:

1. Identifying the research question

In this scoping review, the research question was formulated using the PCC Framework (Population, Concept, Context) to ensure a clear and systematic focus of the study (12). The research question in this scoping review is: "How does reproductive health education improve adolescents' self-protection against sexual abuse?"

Table 1. PCC Framework

P (Population)	C (Concept)	C (Context)
Adolescents aged 10-18 years	Reproductive Health Education in improving adolescents' self-protection against sexual abuse	Various educational settings and communities in developed and developing countries

2. Identifying relevant journals

The selection of articles in this Scoping review was carried out through the stages of identification, screening, and selection based on the PRISMA-ScR guidelines, namely by selecting relevant articles. Data collection was carried out through 5 databases, namely PubMed, ScienceDirect, Wiley Online Journal, EBSCO, and Google Scholar. The literature search strategy in this scoping review was developed by combining keywords relevant to the research topic using Boolean operators (AND), (OR), Medical Subject Headings (MeSH), and Truncation (*). The keywords used reflect the three main components in accordance with the Scoping review Framework. Keywords are used in this scoping review. The search was conducted on December 16, 2025. The search strategy performed was the use of the keywords ("Reproductive Health Education") AND ("Adolescents") AND ("Self-Protection") AND ("Sexual Abuse" OR "Sexual Harassment" OR Sexual Violence"). After establishing the keyword search strategy, this study applied inclusion and exclusion criteria to filter literature relevant to the title of this scoping review. The inclusion and exclusion criteria for this scoping review are as follows:

Table 2. Inclusion and exclusion criteria

Inclusion criteria	Exclusion criteria
1. Articles discussing reproductive health, self-protection, and sexual abuse	1. Articles that do not discuss adolescents or self-protection 2. Full text not available
2. Published between 2017 and 2025 to ensure relevance.	3. Published before 2017
3. Articles available in full text	

3. Article Selection

The selection of articles was carried out through a systematic process using Rayyan, which included several stages. The first stage involved searching using keywords in each database, namely PubMed with 699 articles, ScienceDirect with 75 articles, Wiley Online Journal with 18 articles, EBSCO with 50 articles, and Google Scholar with 12 articles, resulting in a total of 854 articles registered for screening. Finally, after full-text screening, 10 articles were included in the review for further analysis. This process ensured that the selected articles were accurate and in line with the objectives of the scoping review. The screening process was carried out by three reviewers using Rayyan. Screening was carried out in several stages, namely screening for article duplication, titles and abstracts, and full-text articles. This process was carried out to ensure objectivity and minimize selection bias in article selection. The following is the Prisma Flowchart:

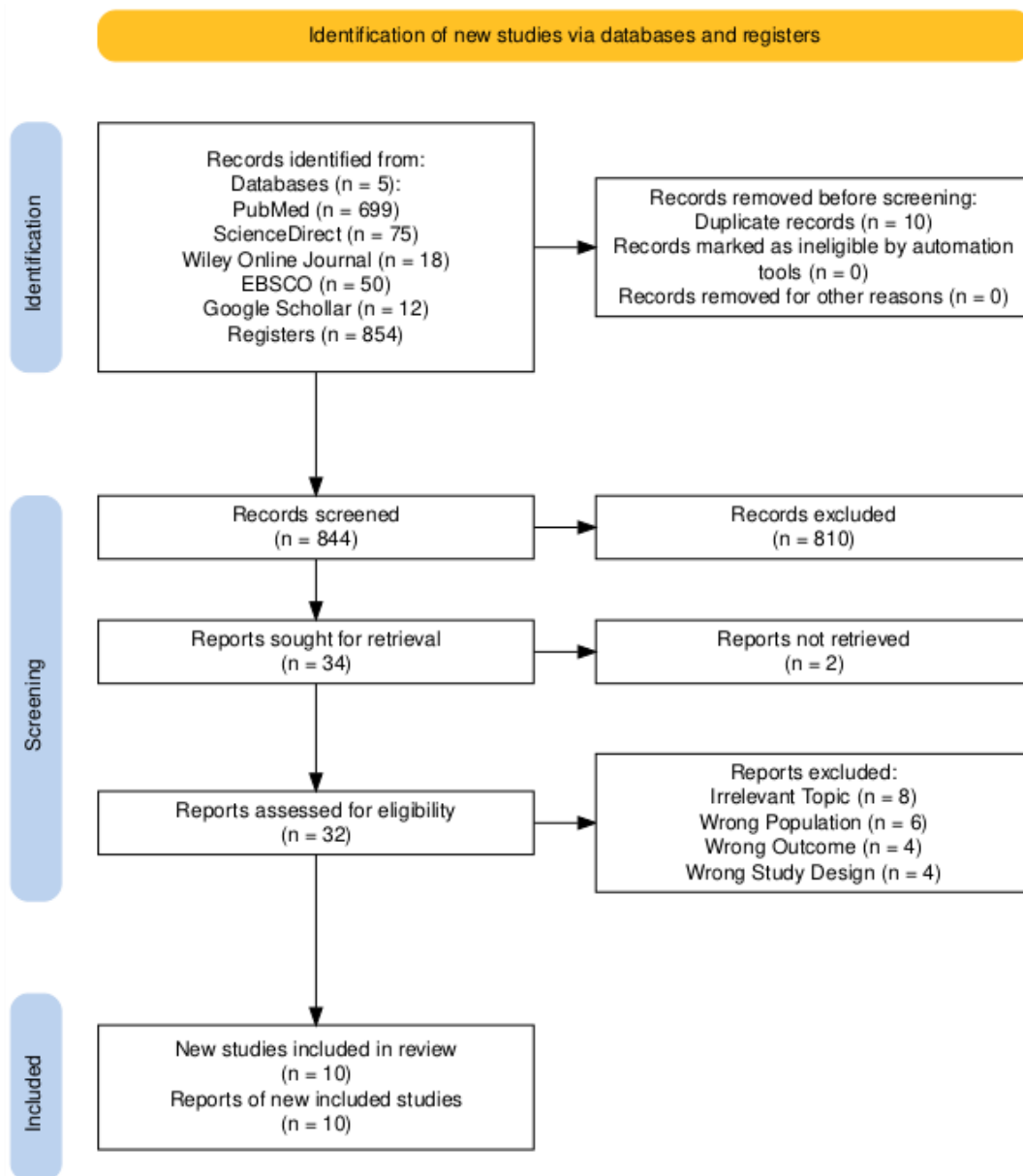


Figure 1. PRISMA Flowchart

4. Data Charting and Summarizing Reporting Results

In a scoping review, data charting is a systematic process of extracting and recording important information from each article relevant to the scoping review title. This data includes the title, author, year, country, objective, method, data collection, respondents, sample size, results, and article code. The data charting process is carried out using a structured table or template to ensure consistency and facilitate thematic analysis.(13) Data charting in this Scoping review is as follows Table 3. At the quality assessment stage of the scoping review, the author evaluated the methodological quality of the selected articles

to ensure that the evidence used met scientific standards. Quality Assessment of the articles used, justification of the CA tool used was CASP, Joanna Briggs Institute (JBI), to assess various types of research methodologies tailored to the methodology checklist of each article, MMAT for studies with a mixed method design, and conducting a critical appraisal of all articles included in the review for analysis. This assessment was conducted for all articles that met the inclusion criteria to ensure that the study results and conclusions had a strong evidence base.(14)

Table 3. Data charting

Code	Title/ Author/ Year/ Grade	Country	Aim of Study	Method	Data Collection	Participants/ Sample Size	Result
A1	Significance of Knowledge in Children on Self-Protection of Sexual Abuse: A Systematic Review, Rahimi (2022)	Iran	This study aimed to systematically review available documents about the importance of knowledge on self-protection of sexual abuse in children	Systematic Review	Data extraction from included studies	Children with a Total sample size of 6,582 across 19 studies.	Educational programs on self-protection significantly improve children's self-protection skills and reduce the risk of violence or sexual abuse.
A2	Effectiveness of Adolescent Interactive Education Program on Knowledge About Child Sexual Abuse and Self-Protection Among Early Adolescent Girls from Selected Urban Schools in Bengaluru, Annie Pame (2024)	India	The study aims to assess early adolescent girls' knowledge on child sexual abuse and self-protection and assess the effectiveness of interactive education programs.	A pre-experimental design: One group of pre-test and post-test	Questionnaire	30 early adolescent girls	There were significant changes in the knowledge score from pre-test to post-test ($t = -5.722, P < 0.001$). Interactive education programs effectively increase the knowledge level on CSA and self-protection.
A3	Preventing sexual violence among high school students through norms correction and bystander intervention: A school-based cluster trial of Your Voice Your View, Lindsay M. (2023)	United States	The study aims to use intervention skills training, risk reduction, and social norms theory as a promise, and a comprehensive approach for sexual violence prevention among youth.	Cluster Randomized Controlled Trial (RCT)	Questionnaire	The participants were 2,685 10th-grade students recruited from 26 high schools in the northeastern United States.	The program showed a small protective effect against victimization and was implemented with high levels of adherence to intervention guidelines (>90%).
A4	The effect of an educational program on knowledge about sexual abuse prevention among child laborers: a quasi-experimental study, Jamalodin <i>et al.</i> (2025)	Iran	This study aimed to evaluate the effectiveness of an educational intervention designed to enhance knowledge about sexual abuse prevention among child laborers.	Quantitative Quasi-Experimental (non-randomized control group design)	Questionnaire	The sample size for each group was determined to be 30 participants.	The interaction effect between time and group was significant ($P < 0.001$), indicating that the knowledge changes over time differ significantly between the two groups.

A5	Effectiveness of health education on awareness of child abuse among school children, Maria Mathew, (2021)	India	The present study was designed to evaluate effectiveness of health education.	Pre-experimental one-group pre-posttest design	Questionnaire	Participants: All female children in grades 6 to 12 who gave consent to participate. Sample Size: 200 girls	There was a significant improvement in knowledge about laws to protect children from sexual offenses, from 49% to 78% after the intervention.
A6	Preventing the Onset of Child Sexual Abuse by Targeting Young Adolescents With Universal Prevention Programming, Elizabeth J. (2017)	United States	To review and develop a school-based universal prevention approach targeting early adolescents (ages 11–13 years) to prevent the emergence of child sexual abuse (CSA) behavior perpetrated by adolescents, rather than just focusing on victim prevention.	A cluster randomized trial	Questionnaire	The participants were 200 female students, with a total sample size of 200.	Early research suggests such programs have significant potential to reduce the risk of CSA behavior in adolescence.
A7	Prevention of, and response to, sexual harassment at secondary school: A system map, Nicole T. (2021)	United States	The aim of this study is to understand how school systems shape the dynamics of disclosure, reporting, and handling of sexual harassment in schools (including behaviors, processes, and norms), and to identify opportunities for effecting systems change	Qualitative	In-depth interview	Staff and students (public secondary schools)	We grouped these factors into four interlinked themes: 1] Knowledge and confidence; 2] Trust in the reporting system and processes; 3] Communication, confidentiality, and safeguarding; and 4] Prioritization of sexual harassment. Conclusions and implications
A8	Preventing adolescent sexual harassment: evaluating the	Netherlands	To prevent sexual harassment among adolescent students of a	Qualitative	Semi-structured focused interviews	The participants were developers	The study found that although both interventions

	planning process of the " " in two school-based interventions using the Intervention Mapping framework, Gaby P. A. (2019)		lower educational level in the Netherlands.			and trainers involved in two school-based interventions Sample Size: A total of 4 participants	were practice-based and lacked a strong theoretical foundation, their methods and materials reflected elements of behavior-change theories.
A9	The Effectiveness of Psychoeducation to Improve Personal Safety Skill Knowledge in Students of SMP X Lhokseumawe, Binti Fatonah et al. (2024)	Indonesia	The purpose of this study was to determine the effectiveness of psychoeducation in students of SMP X Lhokseumawe.	<i>Pre-Experiment one-group pretest-posttest</i>	Questionnaire	Participants: Students of SMP X Lhokseumawe Sample Size: 30 students.	The sig. value (2-tailed) 0.000 <0.05. These results prove that psychoeducation is quite effective in improving students' knowledge of personal safety skills.
A10	Education on Changes in Puberty and Self-Protection Efforts to Prevent Sexual Violence in Children, Elisa Danik Kurniawati et al (2022)	Indonesia	Improving students' sexual knowledge to strengthen self-protection against sexual violence in the school environment	Qualitative	Small Group Discussion (SGD) and video (audiovisual).	14 students, divided into 4 small groups (3-4 students each)	Post-test results showed that 70% of students understood changes in puberty and self-protection efforts to prevent sexual violence.

Table 4. Quality assessment

Article	Kind	Grade
A1	Systematic Review	A
A2	A Pre-Experimental One-group pre-test and post-test	A
A3	Cluster Randomized Controlled Trial (RCT)	A
A4	Quasi-Experimental (non-randomized control group design)	A
A5	Pre-Experimental One-group pre-posttest design	A
A6	A cluster randomized trial	A
A7	Qualitative	B
A8	Qualitative	B
A9	Pre-Experiment one-group pretest-posttest	A
A10	Qualitative	B

RESULT AND DISCUSSION

Based on 10 articles selected in a scoping review related to reproductive health education in improving adolescent self-protection against sexual abuse, the results are as follows

Article characteristics

Based on the mapping of the countries of origin of the 10 articles analyzed in this scoping review, most of the studies originate from the United States (3/10, 30%). Next were articles from Iran, India, and Indonesia, each with the same percentage (2/10, 20%), while the Netherlands had 1/10 (10%). This distribution shows that studies on reproductive health education in improving adolescent self-protection against sexual abuse have been conducted in various countries with diverse social and cultural contexts, both in developed and developing countries. The following diagram shows the percentage results:

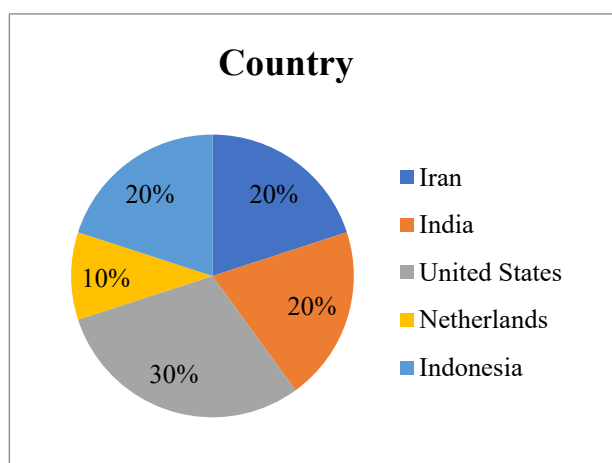


Figure 2. Analysis of Articles Based on Country of Origin

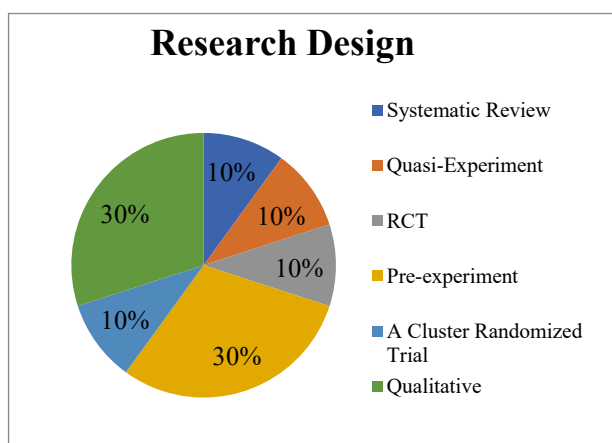


Figure 3. Analysis of Articles Based on Research Type

Based on the research design, of the 10 articles in this scoping review, 1 article used a systematic review with a percentage of 10%, 1 article used a quasi-experimental design with a percentage of 10%, 3 articles used a pre-experimental research design with a percentage of 30%, qualitative studies (3 articles, 30%), and cluster randomized

trials (1 article, 10%). Based on the Quality Assessment results of the 10 articles that met the inclusion criteria, most demonstrated good methodological quality. The article quality characteristics diagram illustrates that 70% of articles (7 articles) were graded A, while 30% of articles were graded B. Articles that received a B grade fulfilled most methodological aspects; nonetheless, there were still deficiencies in the reporting of philosophical perspectives, researcher reflexivity, and ethical approval, meaning that methodological quality was not yet fully optimal.

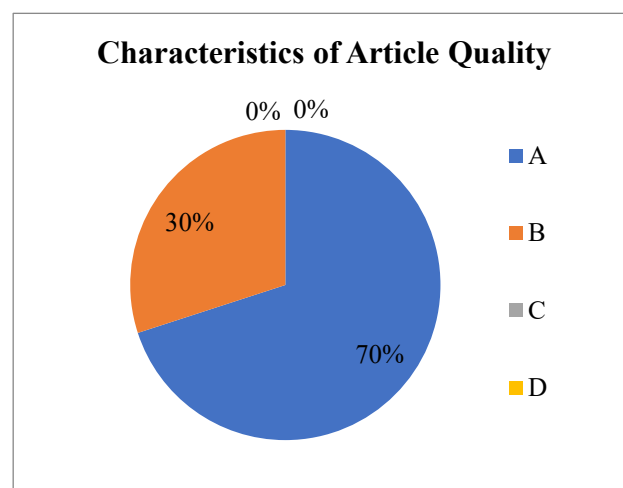


Figure 4. Article analysis based on Quality Assessment

Analysis and mapping of included studies

The following is the analysis and mapping of research articles table:

Table 5. Analysis and mapping of Research Articles

Main Theme	Subtheme	Article (Code)
Teenagers' knowledge about reproductive health	The importance of sexual knowledge, gaps in adolescent knowledge	A1, A2, A5, A9, A10
Reproductive health education in schools	School-based education, participatory education, counseling	A3, A4, A5, A6, A8, A9, A10
Educational materials and methods	Body boundaries and consent, interactive methods (discussion, role play)	A2, A4, A5, A8, A9,
Enhancing adolescents' self-protection skills	Recognizing the risks of sexual abuse, refusing, and reporting	A1, A2, A7, A8, A9

In the analysis and mapping of research articles stage, the author mapped all selected articles from several journals

based on characteristics such as topic, context, and main findings, then presented them in a table to clarify the relationships among research themes in this scoping review.

Adolescent Knowledge About Reproductive Health

Based on article A1, sexual knowledge acts as a protective factor that significantly increases self-protection abilities. Before the intervention, there was still a considerable knowledge gap, as some adolescents were unable to distinguish between reasonable and unreasonable requests and did not have rejection skills.(15) Articles A2 and A5 show that adolescents had low levels of knowledge about child sexual abuse and self-protection before the intervention; nonetheless, after the interactive education program, there was an increase in knowledge and self-protection.(16) This confirms that sexual knowledge is an important protective factor and shows that there is an initial knowledge gap among adolescents.(17) A9 found that before counseling, students had a limited understanding of the boundaries of healthy interaction and the concept of personal body protection. After the intervention, there was a significant increase in knowledge scores, indicating that structured sexual education can strengthen awareness of body autonomy as part of self-protection.(18) A10 also confirmed that discussion- and audiovisual-based education effectively increased students' knowledge about self-protection efforts, including the ability to refuse inappropriate touch and understand reporting mechanisms. This shows that increased knowledge not only affects cognitive aspects but also behavioral readiness for prevention.(19)

Reproductive Health Education in Schools

Based on the analysis of the articles, articles A3 and A6 identify that structured reproductive health education programs implemented in schools with active student participation contribute to increasing awareness, establishing positive attitudes, and strengthening behaviors that prevent sexual violence through a universal prevention approach that addresses risk factors. A8 emphasizes the importance of systematically designing school-based interventions using the Intervention Mapping framework to ensure the effectiveness of sexual abuse prevention among adolescents. Meanwhile, A9 and A10 show that interactive counseling methods in the school environment play a role in increasing students' knowledge and strengthening their ability to protect themselves from sexual violence.

Educational Materials and Methods

Based on the reviewed articles, it was found that the articles examined educational materials and methods. A2 presented materials on consent, introduction to forms of sexual abuse, and identification of risky situations.(17) A4

showed that structured education programs included materials on bodily rights and personal boundaries, using participatory methods. A5 presents material on the classification of sexual violence and prevention measures, using participatory counseling methods to encourage active involvement.(20) A5 integrates the concepts of good touch/bad touch and types of sexual violence through interactive lectures and hands-on practice that improve students' readiness to respond.(16) A8 develops sexual abuse prevention interventions based on Intervention Mapping with components of modeling, group discussion, and behavioral reflection to shape norms and awareness about consent.(21) A9 reports that school-based counseling that analyzes healthy interaction boundaries, personal body protection, and assertive response exercises through role play significantly improves students' knowledge and self-protection scores.(18) A10 includes educational materials on puberty changes, body protection rules (underwear rules), and simulations of responses to unsafe situations as strategies for building self-protection skills from an early age.(19)

Improving Adolescent Self-Protection Skills

Based on a review of the articles, it was found that health education contributes to improving adolescent self-protection. A1 shows that increasing adolescents' knowledge about the forms and situations of sexual abuse strengthens their ability to identify risks and increases their readiness to protect themselves.(15) A2 reports that interactive education programs help adolescents recognize risky behavior patterns while training them to respond more firmly to inappropriate activities.(17) A7 identifies that low trust in reporting systems and concerns about not being believed are the main barriers for adolescents in disclosing experiences of sexual abuse.(22) A8 shows that Intervention Mapping-based interventions build awareness about consent and social norms, thereby increasing students' courage to prevent and respond to abusive behavior.(21) A9 finds that school counseling that discusses healthy interaction boundaries and assertive response training through simulations contributes significantly to improving the ability to refuse and report sexual violence.(18)

The results of the scoping review show that sexual knowledge as part of reproductive health knowledge is the main foundation for improving adolescents' self-protection against sexual abuse. When adolescents understand bodily boundaries, privacy, forms of abuse, and safe measures they can take (refusing, avoiding risky situations, and reporting to trusted adults), their ability to recognize threats and determine protective responses becomes stronger.(19) Regarding the knowledge gap among adolescents, there is still a gap in adolescents' knowledge about CSA and self-protection strategies that hinders their ability to protect

themselves. Therefore, interactive reproductive health education supported by collaboration between schools and families is needed to improve adolescents' knowledge and protective skills.(19)

Prevention of sexual abuse among adolescents will be more successful if reproductive health education is implemented as a universal program in schools that is designed comprehensively, carried out in stages and repeatedly in several sessions, and emphasizes skills training that can be directly practiced, such as simulations or role-plays. The program also needs to convey clear and firm messages about sexual behavior boundaries. For greater impact, it is important to involve parents through open communication and supervision; consequently, adolescents' self-protection abilities can be maximized.(23) Educational materials that emphasize bodily boundaries (the ability to express personal boundaries) and strengthening the ability to deal with peer pressure are important targets in preventing sexual abuse among adolescents. This conclusion also emphasizes that educational outcomes tend to be stronger when interactive and participatory methods are used, such as theater or role-playing by peers followed by group discussions, as well as skills and resilience training sessions, because they provide space for adolescents to practice social skills, assert boundaries, and increase self-confidence in real-life situations.(21)

In this scoping review on improving adolescents' self-protection abilities in recognizing the risks of sexual abuse, the findings confirm that reproductive health education plays an important role in building adolescents' knowledge and confidence to recognize signs of abuse, understand that such behavior is unacceptable, and realize the importance of keeping themselves safe. Furthermore, understanding risks not only helps adolescents avoid dangerous situations but is also related to their readiness to disclose and report experiences of abuse. Therefore, strengthening systematic education in schools by integrating sexual abuse material into the curriculum and providing active support from educators are strategic steps in raising risk awareness and strengthening adolescents' self-protection against sexual abuse.(22)

Methodologically, the analyzed articles indicate that interventions using participatory, skill-based approaches, such as role play, group discussions, modeling, and behavioral reflection, are more often associated with increased protective readiness than conventional lecture methods.(21) This suggests that learning that provides space for social practice and simulation of real situations helps adolescents internalize concepts of consent and personal boundaries more deeply. However, most identified interventions still focus on formal school settings, while community- and family-based approaches remain relatively

limited.(23) Parental involvement and strengthened school response systems also emerge as contextual factors that contribute to prevention effectiveness.(22) Therefore, this synthesis emphasizes the need to develop more comprehensive, contextually grounded educational models to expand the reach of sexual abuse prevention efforts among adolescents.

The findings in this scoping review align with research showing that structured Comprehensive Sexuality Education (CSE) interventions significantly improve adolescents' competence in knowledge, skills, and attitudes related to sexual and reproductive health. For example, a quasi-experimental study in Indonesia found that students who received CSE programs experienced a significant increase in sexual health competence compared with the control group, including greater understanding of risks, gender norms, and communication about reproductive health.(24) Furthermore, a synthesis of research evidence indicates that comprehensive sexuality education is associated with improvements in adolescents' ability to communicate assertively, set and maintain personal boundaries, and make more responsible decisions regarding sexual health. Strengthening these competencies is an important element in building adolescents' capacity to protect themselves against the risk of sexual violence.(25) Strengths of the study, this scoping review successfully mapped key evidence on reproductive health education for preventing sexual abuse among adolescents. In addition, this study has been registered on the Open Science Framework (OSF) to fulfill research protocols and ensure methodological transparency. Study limitations, this scoping review only focuses on mapping existing literature without including primary research, so it cannot provide direct intervention or stronger quantitative evidence regarding the effectiveness of reproductive health education in increasing self-protection.

CONCLUSION

A scoping review of 10 articles mapped that reproductive health education shows potential in supporting the improvement of adolescent self-protection against sexual abuse, namely through strengthening protective knowledge and skills such as recognizing risks, setting boundaries, and reporting. The evidence identified mostly comes from school-based interventions with a participatory approach. However, the available literature is still limited to formal educational settings, while community-based approaches and parts of health services have not been widely explored. Based on these gaps, further research is needed to develop and evaluate community-based intervention models to expand adolescent prevention and protection efforts.

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Conflict of Interest

No potential conflicts of interest relevant to this article were reported.

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