Efficacy of Child Sexual Abuse Prevention Programs:
An Annotated Bibliography
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Introduction

The purpose of this project is to compile recent research findings to help answer the question "what works in child sexual abuse prevention", and organize the material in a manner easily accessible to the Prevent Child Abuse America network.

The articles reviewed for this annotated bibliography are classified into four different categories: 1) Articles that examine interventions focused on children; 2) Articles that examine interventions focused on parents and caregivers; 3) Articles that examine interventions focused on potential offenders and offender management; and 4) Articles that examine interventions focused on communities and multiple target groups. Each section is followed by a brief synthesis of notable trends and implications.

Contents

SECTION I - Children

Bolen, Rebecca M. "Child Sexual Abuse: Prevention or Promotion." *Social Work* 48.2 (2003): 174-85. Print.

Abstract: "Current child sexual abuse prevention programs assume that, by targeting potential victims, they can reduce the prevalence of child sexual abuse. This article presents findings, however, that suggest this assumption is flawed. First, recent studies indicate that the prevalence of abuse has not decreased over the history of prevention programs. Second, because of the pervasiveness of the threat of child sexual abuse, it is doubtful that prevention programs can adequately prepare children for the diversity of approaches by potential offenders. It is suggested instead that potential offenders are more appropriate targets of prevention programs. Because a large portion of abuse appears to be related to socialized relational patterns gone awry, it is suggested that a more efficacious method of prevention is a school-based program that promotes healthy relationship patterns. The article compares the existing victim-based paradigm with the proposed potential healthy relationships paradigms along four domains: underlying assumptions, orientation, method, and goals." (174)

Sample: NA

Description of intervention: School-based programs.

Method: Review of multiple meta-analyses

Results: Current prevention programs are effective in teaching concepts about sexual abuse and skills in self-protection. They also appear to increase disclosures by children.

Implications: "The only effective method of reducing the prevalence of child sexual abuse is to target potential offending behaviors. A paradigm shift in assumptions around the prevention of child sex abuse is necessary to increase efficacy. Programs for the promotion of healthy relationship patterns might be successful because they target the reduction of offending behavior rather than the reduction of victimization." (184)

Finkelhor, D. "Prevention of Sexual Abuse Through Educational Programs Directed Toward Children." *Pediatrics* 120.3 (2007): 640-45. Print.

Abstract: "A Catholic Medical Association (CMA) Task Force issued a report in October 2006 on the sexual abuse of children and its prevention[1] in response to initiatives by Catholic dioceses across the country, which were reeling from abuse scandals and have been seeking to improve their sexual abuse–prevention efforts. This report argued strongly against what it called 'child-empowerment programs' aimed at preventing sexual abuse. It argued that these programs were 'ineffective at preventing sexual abuse' and 'inconsistent with the science of emotional, cognitive, neurobiological and moral development of the child.'"(640)

"This report reiterated a number of arguments that have been raised over 2 decades against classroom-based prevention education by various critics. However, the research evidence and the

available meta-analytic reviews do not give much support to these criticisms, and the reappearance of these arguments in a high-profile public policy context merit discussion and rebuttal." (640)

"The claim that these programs are ineffective is based on 2 central arguments: (1) that the concepts are misguided, cannot be understood and implemented by children, and fundamentally will not work even if implemented and (2) that no empirical evidence has established that they do work. I will refer to these as the "conceptual" and "empirical" critiques, respectively. The empirical critique argues that research has failed to find that the prevention programs actually prevent the sexual abuse. Among those studies often cited are a 1995 study by me and my co-workers that did not show a lower incidence of sexual assault or decreased injury among children who had been exposed to prevention programs and a 2003 study by Bolen." (641)

Sample: NA

Description of intervention: Child empowerment programs offered at school-based or youth service environments.

Method: Review of analyses and review of other evaluations of sexual abuse prevention programs.

Results: "The CMA argued that no empirical evidence has established that prevention-education programs work to reduce the likelihood of sexual abuse. Hence, they should be abandoned. The literature is virtually unanimous in showing that the programs promote disclosure, and at least 1 study has found that program exposure reduces self-blame. These are important. Disclosure may result in much better outcomes for a child, because it may terminate and shorten the duration of the abuse, mobilize assistance, and reduce isolation. It may also allow the identification of perpetrators and reduce future offending. Reductions in self-blame are believed to be associated with better mental health outcomes." (642)

Implications: "The weight of currently available evidence shows that it is worth providing children with high-quality prevention-education programs. Much research has suggested that children acquire the concepts. Some research has suggested that the programs promote disclosure. One study found lower rates of victimization for children who were exposed to these programs. A study found that children who are exposed to prevention education have less self-blame if they are victimized. There have been declines in sexual abuse since 1993 that may possibly be related to the dissemination of prevention education." (644)

> Jones, L. M., Finkelhor, D., & Halter, S. (2006). Child maltreatment trends in the 1990s: Why does neglect differ from sexual and physical abuse? Child Maltreatment, 11(2), 107-120.

Abstract: "Substantiated cases of child maltreatment have declined more than 20% since a peak in 1993. However, although sexual abuse and physical abuse showed significant declines during the 1990s (47% and 36%, respectively), neglect fluctuated, with only a small overall decline during this period (7%). Available data suggest that at least part of the declines in sexual and

physical abuse is likely to be real. Some evidence also suggests that a decline in neglect may have been masked in some states. Possible sources for declines in child maltreatment include direct prevention efforts, economic improvements, more aggressive criminal justice efforts, dissemination of psychiatric medication, and generational changes. Public health models suggest that population-level prevention initiatives are the most promising options for further reducing maltreatment rates. However, better epidemiological and evaluation research will be needed to identify the key factors." (107)

Sample: N/A

Description of intervention: school-based

Method: "The National Child Abuse and Neglect Data System (NCANDS; U.S. Department of Health and Human Services, Children's Bureau, 1992-2005) was the primary data source used to calculate the maltreatment trends." (107)

Results: "College undergraduates (Gibson & Leitenberg, 2000) and high school students (Ko & Cosden, 2001) exposed to sexual abuse prevention programs as children experienced fewer victimization experiences than those not exposed to such programs." (112)

Implications: Public awareness campaigns are more effective when paired with child abuse prevention programs. "Although evaluations of child abuse education and prevention programs show mixed results, it is possible that the declines in sexual and physical abuse may reflect the programs' collective success in increasing public knowledge about abuse and improving protections for children." (112-113) The correlation between an increase in CSA prevention education programs and a decrease in victimization may not be causal. This trend could be influenced by, "broad social and economic forces are at work beyond the efforts of people in the child maltreatment field." (116) "Prevention may best occur through programs and policy that improve families' well-being in general. Initiatives to reduce substance abuse, domestic violence, community violence, or to improve families' economic security, along with maltreatment prevention and education programs, may collectively offer the strongest intervention for further reducing rates of child abuse and neglect." (117-118)

> Kaufman Kantor, G. (2005) Final Report: Evaluation of Prevent Child Abuse Vermont SAFE-T Program. Durham, NH: Family Research Laboratory, CCRC, and University of New Hampshire. *(not-published)*

Abstract: "Prevent Child Abuse Vermont created the Sexual Abuse Free Environment for TeensTM (SAFE- T) Program in response to the high rates of sexual abuse seen in Vermont and throughout the country. Including prevention in adolescence is crucial, not just in terms of victim prevention but in terms of addressing youth sexual behavior problems, as 35.6% of those who perpetrate child sexual abuse are under the age of 18 (Finkelhor, Ormrod, & Chaffin, 2009). Furthermore, 86% of students reported witnessing sexual harassment at school and 81% of high school students reported having experienced sexual harassment (Lipson, 2001) making it critical to expand prevention efforts to include the role of the bystander." (Executive Summary, pg. 1)

"This study evaluates the presence of risk and protective factors in students both in the Program and Comparison Schools and measures program outcomes based on the presence of these factors. The study intends to determine the residual impact of the SAFE-T Program on students one year after implementation was completed." (Executive Summary, pg. 1)

Sample: Seven instances of the SAFE-T program

Description of intervention: "SAFE-T approaches prevention by creating a partnership between schools, parents/guardians, and community organizations to promote healthy relationships and behaviors among adolescents. The program seeks to reduce risk factors and increase protective factors to facilitate change in school communities by reducing sexual victimization and perpetration, and increasing bystander intervention. The Center for Disease Control and Prevention (CDC, 2009) acknowledges certain individual, relational, community, and societal factors that increase one's likelihood of sexual violence perpetration, as well as protective factors that reduce one's risk for perpetration and victimization. Protective factors such as positive mental health, high self esteem, high social responsibility, and high perception of support act as buffers for youth against both victimization and perpetration of violence. Risk factors addressed through the SAFE-T Program include substance use, family aggression, and dating violence perpetration and victimization." (Executive Summary, pg. 1)

Method: "The evaluation study was conducted in two phases between 2000 and 2005 (Kaufman Kantor, 2005). The study used a quasi-experimental design in which process and outcome evaluations were conducted with 5 Vermont schools in Phase 1 and two Vermont schools in Phase 2. Process evaluations included in-class observations, student focus groups, and teacher interviews. These evaluations were completed with Program Schools with the intent to determine the level of program fidelity." (Executive Summary, pg. 1)

"Outcome evaluations included pre-tests conducted with 7th and 8th grade students at both Program and Comparison schools to collect baseline data. Post-tests were then conducted one year later to determine longitudinal outcomes. The evaluation instrument was created using existing validated measures that assess risk and protective factors, and measure knowledge, attitudes, and behaviors regarding drug and alcohol use, dating violence perpetration and victimization, sexual victimization, and perpetration of aggression. The instrument was reviewed by scholars at University of New Hampshire's Family Research Laboratory, piloted, and focus group tested with middle school students prior to use in the study." (Executive Summary, pg. 1)

Results: "Phase One: At one year follow up, students in the Program School had significantly lower rates of reported sexual victimization, dating violence victimization, and dating violence perpetration at follow- up. Additionally, students who received the SAFE-T Program had greater gains and retention of knowledge about sexual risk behaviors. Students who had experienced forced sexual activity had significantly higher instances of intra-family conflict, witnessing sexual harassment, being a victim of sexual harassment, and scored lower on social responsibility." (Executive Summary, pg. 2)

"Phase Two: Students receiving SAFE-T had significantly lower rates of both observing and perpetrating harassment, and had more knowledge in areas of sexual myths and sexual

harassment. However, students at the Program School had a significant increase in perpetrating aggression towards a sibling. Program students showed a decrease in dating violence perpetration from baseline to follow up, but the results were not statistically significant when compared to students in Comparison schools." (Executive Summary, pg. 2)

Implications: "The results of this study indicate that the SAFE-T Program had a positive impact on students' knowledge, attitudes, and behavior. Students at Program Schools showed lower rates of sexual victimization, and dating violence victimization and perpetration. Students also observed fewer incidents of harassment and perpetrated harassment less. Additionally, students at Program Schools made significant gains in knowledge of sexual risk factors as compared to those students at Comparison Schools. These findings suggest the efficacy of implementing the SAFE-T Program, a comprehensive, skills-based sexual abuse prevention program, with middle school students to reduce sexual violence in communities." (Executive Summary, pg. 3)

"Further research is needed to build on the successes of this study. The field of child sexual abuse prevention is rapidly developing and new research has been conducted that has relevance for future SAFE-T evaluations. Recent research into risk and protective factors for victimization and perpetration indicate a need to expand those constructs measured in this study to include such things as coping, communication, and empathy skills as well as level of connection to adult supports. The realm of bystander engagement is also one that is rapidly emerging and further research into the ways in which SAFE-T encourages bystander engagement is needed." (Executive Summary, pg. 3)

Furthermore, additional research could investigate the impact that the non-classroom based components of SAFE-T contribute to comprehensive sexual abuse prevention at the community level. This could involve researching the impact of school staff and/or parent training on adult knowledge and skill acquisition as well as the strength of student/adult relationships." (Executive Summary, pg. 3)

Kenny, M. C. (2008-01). Child sexual abuse: from prevention to self-protection. Child abuse review (Chichester, England: 1992), 17(1), 36-54.doi:10.1002/car.1012

Abstract: "There are a growing number of child abuse prevention and education programs, including primarily group-based parent and child education, which are taught by teachers within the school system. This article reviews some of the existing sexual abuse education and/or body safety programs, as well as the research surrounding them. Advantages as well as criticisms of such programs are reviewed. Issues such as target populations (i.e. children, teachers, parents), program components and methodological limitations are addressed. Major findings include: children as young as three can be effectively taught self-protection skills, parental and family involvement in training is important, and repeated exposure helps children maintain knowledge gains. The components of successful programs include teaching children to identify and resist inappropriate touching, reassuring children that it is not their fault and learning the proper names of their genitals. Finally, future directions for program development, research and policy are explored." (36)

Sample: 21 articles on CSA prevention studies

Description of intervention: Six different programs:

Body Safety Training: Modeling, rehearsal, reinforcement and feedback with the intention to identify private parts, safe and unsafe touching, and reporting CSA.

Child Assault Prevention: Role-plays and guided group discussion with the intention to teach assertiveness, increase communication with adults, reporting skills.

Feeling Yes, Feeling No: Three videotapes which utilize didactic approaches and role-play scenarios with the intention to identify responses to being touched, seek help if touched, tools to protect themselves from CSA, learn names of genitals and build self-confidence.

Good Touch, Bad Touch: Lesson plans, instructions, role-playing, video, story cards and book, worksheets and coloring books with the intention to teach body safety rules, body ownership, say 'No to abuse' and who to ask for help.

Safe Child: Videos, lesson plans, games, role-plays and activities with the intention to improve self-esteem and self-reliance, body safety rules, secret keeping and strangers.

Talking About Touching: Photo-lesson cards, take home letters for parents, poster, videos, songs and storybook with intention to increase children's knowledge of and adherence to rules that will keep them safe, act in assertive ways and identify differences in safe touch, unsafe touch and follow safety rules about touching.

Method: "Most programs utilize a pre/post questionnaire aimed at assessing the participants' knowledge and gain in sexual abuse information (Roberts and Miltenberger, 1999)."(41)
 Formats of efficacy evaluations include: measuring knowledge of appropriate and inappropriate touch, parent reports on child sexual behaviors, parent reports on changes in child's behavior since onset of program, hypothetical scenarios related to touching, and semi-structured interviews.

Results: "Children who participate in self-protection programs show significant gains in knowledge and skills, which may be helpful in avoiding sexual victimization (Hébert et al., 2001; Wurtele et al., 1991, 1992a, 1992b; Wurtele and Owens, 1997). Children of all ages have demonstrated increased ability in identifying potentially abusive situations and differentiating between okay and not okay touches (Boyle and Lutzker, 2005; Hazzard et al., 1991; Sylvester, 1997; Wurtele, 1998; Wurtele et al., 1992b). School-based programs were successful in teaching school-age children, CSA concepts and self-protection skills (Davis and Gidyz, 2000; Rispens et al., 1997). Wurtele et al. (1992b) also found that these gains in knowledge were still evident up to five months post-participation." (42)

"The most commonly reported positive effects by children are increases in a sense of control and feelings of safety. The majority of children reported that they felt safer after completion of a prevention program (Hazzard et al., 1991). In addition, children often report positive feelings about their genitals, including that it was okay to touch one's own private parts (Wurtele and

Owens, 1997). In the Wurtele et al. (1992b) study, preschoolers expanded the type of resource person to whom they would report abuse. Wurtele and Owens (1997) found that the preschool children who completed their BST program, as compared to the control group, learned that it is not their fault if abuse occurs and that they should tell someone even if the abuser tells them to keep it a secret. For the children in this study, the most difficult skill to learn appeared to be disclosure of the abuse. This may be due to the fact that it requires advanced memory and communication skills, which are lacking in preschoolers (Wurtele and Owens, 1997)." (42)

"Currier and Wurtele (1996) conducted the BST program with a group of children with a known history of sexual abuse; more than half of those children disclosed information about their abuse after completing the program. They also demonstrated significant decreases in some sexualized behavior (i.e. masturbating, using sexual words and making sexual sounds) (Currier and Wurtele, 1996). Other positive effects also include increases in parent-child communication about CSA (Finkelhor and Dziuba-Leatherman, 1995; Wurtele, 1990)." (42)

Implications: "It is imperative for children who have not been exposed to CSA, as well as those who have suffered sexual abuse, to learn self- protection skills. To achieve the best results, self-protection programs should incorporate parental involvement, opportunities for practice, repeated exposure, and concepts such as identification of potentially abusive situations, age-appropriate sex education and body safety skills. Self-protection skills should be introduced when children are developmentally capable of learning the medical names of their genitalia, or as early as age three. Therefore, teaching self-protection skills begins in the home with the parent and progresses from preschool to high school. It is important that parents send a positive message to children about these issues so as to enhance open communication with children throughout their childhood and into adolescence." (50)

"Opponents of programs aimed at enhancing self-protection behavior in children have offered little evidence that support their claims of potential negative side effects. On the other hand, there is a large body of research indicating that children of all ages are able to benefit from CSA education programs. Children who have participated in CSA education programs have demonstrated gains in knowledge about personal safety and the importance of disclosure, improvements in self-esteem and feelings of greater self-control." (50)

"As suggested throughout this paper, primary prevention programs geared at educating children about CSA *should be labeled as self-protection programs, rather than prevention programs.* While many of these education programs exist in schools in the US, not all states require that CSA self-protection programs be offered. Legislation needs to ensure that empirically validated CSA education programs are employed throughout the nation, which requires that the general community recognize CSA as a public health problem. While self-protection behavior may not directly reduce the rates of CSA, these skills assist children in identifying inappropriate sexual advances and seeking help immediately, to prevent future advances from the perpetrator. Programs geared at children and their parents also increase awareness of CSA, and help children who disclose abuse to receive a supportive response." (51)

Efficacy of Child Sexual Abuse Prevention Programs: An Annotated Bibliography

Kernsmith, P. D., & Hernandez-Jozefowicz, D. M. (2011). A Gender-Sensitive Peer Education Program for Sexual Assault Prevention in the Schools. *Children & Schools*, *33*(3), 146-157.

Abstract: "This study evaluates a gender-sensitive peer education program emphasizing male responsibility for decreasing rape developed through a long-standing agency and school collaborative. Sessions were led by trained male and female high school leaders. Repeated surveying revealed that at posttest and three-month follow-up, the program decreased rape-tolerant attitudes among male and female high school students. A social cognitive learning model—comprising connection to the school, similarity to peer educators, and evaluation of the presentation—predicted posttest and follow-up scores. Students who were strongly connected, similar to a peer, and interested in the presentation showed the greatest improvement. These findings indicate that increasing school belonging, including peer educators from a wide range of social circles, and adding more interesting program components may increase the effectiveness of future prevention programs." (146)

Sample: The First Step Peer Education Program for 343 students.

Description of intervention: School-based program with the goal "to provide broad sexual assault prevention programming to students by including those who had not previously been targeted for intervention—namely, male high school students. Peer educators received 15 hours of training, including knowledge building m sexual assault and skill building in listening, presentation, and communication skills. A series of 50-minute classroom presentations were offered on a variety of topics, including rape myths, risk reduction, how to help a friend, and bystander intervention." (149) "In addition to classroom presentations, several large group assemblies were held with students. To address school atmosphere, other projects included the creation of posters and an artwork competition to be posted throughout the school." (150)

Method: All students who attended a classroom presentation were surveyed both immediately before and after the presentation. Students' attitudes about sexual assault were tested again three months after the end of the intervention. For specific instruments of measurement see page 151.

Results: "This study demonstrated that the peer education sexual assault prevention program resulted in statistically significant changes in attitudes from pre to posttest and that these changes were maintained at a three-month follow-up. The intervention was equally effective for male and female students of all grade levels. In addition, students who related to the presenters and who felt connected to the school were more likely to experience an improvement in their beliefs and attitudes related to sexual assault. These findings help support a gender-sensitive peer education intervention based on a social cognitive learning model. It is hoped that such changes will relate to prevention of sexual assault behaviors, particularly among heterosexual male students, in the future." (154)

Implications: "The present results have implications for social work practice in the schools. At the micro level, school social workers can consistently work at promoting anti-rape and anti-sexual-assault attitudes and behaviors in their work with individual students. School social workers may be influential in decreasing myths and beliefs that place students at risk not only for sexual victimization, but also for perpetration. At the mezzo level, the results of this study

suggest that peer-run psycho-educational groups can be an effective means of changing student attitudes about sexual assault, particularly for those who perceive themselves as being similar to peer educators and who feel connected to their school." (155)

Lalor, K., & McElvaney, R. (2010). Child sexual abuse, links to later sexual exploitation/high-risk sexual behavior, and prevention/treatment programs. *Trauma, Violence, & Abuse*, *11*(4), 159-177.

Abstract: "This paper reviews the literature on the nature and incidence of child sexual abuse, explores the link between child sexual abuse and later sexual exploitation, and reviews the literature on prevention strategies and effective interventions in child sexual abuse services. Our understanding of the international epidemiology of child sexual abuse is considerably greater than it was just 10 years ago, and studies from around the world are examined. Childhood sexual abuse can involve a wide number of psychological sequelae, including low self-esteem, anxiety, and depression. Numerous studies have noted that child sexual abuse victims are vulnerable to later sexual revictimization, as well as the link between child sexual abuse and later engagement in high-risk sexual behavior. Survivors of child sexual abuse are more likely to have multiple sex partners, become pregnant as teenagers, and experience sexual assault as adults. Various models, which attempt to account for this inter-relationship, are presented; most invoke mediating variables such as low self-esteem, drug/alcohol use, PTSD and distorted sexual development. Prevention strategies for child sexual abuse are examined including media campaigns, school-based prevention programs, and therapy with abusers. The results of a number of meta-analyses are examined. However, researchers have identified significant methodological limitations in the extant research literature that impede the making of recommendations for implementing existing therapeutic programs unreservedly."(159)

Sample: N/A

Description of intervention: Media campaigns, School-based programs, Prevention through therapy with abusers.

Method: Literature Review

Results & Implications: CSA is an international public health problem. Sexual abuse of children is more pervasive in their own families and communities by perpetrators trusted and known. Victims are less likely to report perpetrators who are close to them for fear of safety, embarrassment, shame and other consequences. Victims of CSA are more likely to engage in high-risk behaviors, both sexual and non-sexual. Family well-being influences the risk level of CSA. Mass media campaigns and school-based programs have shown improvements in the increase of knowledge and the acquisition of skills. Broad-based prevention programs that focus on general child maltreatment may offer insight for further improvements. (171-172)

Lampert, J., & Walsh, K. (2010). 'Keep telling until someone listens': understanding prevention concepts in children's picture books dealing with child sexual abuse. *Children's Literature in Education*, *41*(2), 146-167.

Abstract: "Children's picture books dealing with the topic of child sexual abuse appeared in the 1980s with the aim of addressing the need for age-appropriate texts to teach sexual abuse prevention concepts and to provide support for young children who may be at risk of or have already experienced sexual abuse. Despite the apparent potential of children's picture books to convey child sexual abuse prevention concepts, very few studies have addressed the topic of child sexual abuse in children's literature. This article critically examines a selection of 15 picture books (published in the US, Canada and Australia) for children aged 3–8 years dealing with this theme. It makes use of an established set of evaluative criteria to conduct an audit of the books' content and applies techniques of literary discourse analysis to explain how these picture books satisfy criteria for child sexual abuse prevention. The analysis is used as a way to understand the discourses available to readers, both adults and children, on the topic of child sexual abuse. Key themes in the books include children's empowerment and agency, and the need for persistence and hope." (1)

Sample: N/A

Description of intervention: Instructive children's picture books that deal with the challenging themes of child sexual abuse prevention.

Method: Review of content found in 15 books.

Results: "Nearly all of the picture books emphasize saying no or rejecting unwanted overtures (criteria 5) and most of the texts promoted telling a trusted adult (criteria 6). Encouraging disclosure, as will soon be discussed, was the most common objective of the books. Most of the texts repeated their safety message (criteria 9) and many assisted young readers to rehearse and repeat saying no (criteria 17). As repetition is a common discursive strategy in picture books at any rate, here the genre and the message are easily reconciled. Every book included additional support materials for teachers and/or parents (criteria 18). This places the sample of books firmly within an instructive genre – they are intended to be used or read to children by adults who will understand their value as a prevention, cautionary, or counseling tool. That they will be used this way, of course, cannot be guaranteed, but the existence of the supplementary notes make clear their intent. The notes signal to adults the need for prerequisite knowledge before using the books with children, no matter who the adult is. These liner notes also present a kind of credibility, giving the treatment of child sexual abuse prevention in the text an expert voice of authority." (5)

Implications: "These texts position readers, children and adults alike, to view books as a way to help children overcome social and emotional problems in general, and child sexual abuse in particular. As social commentary, the texts allow us a glimpse into how the issue of child sexual abuse is perceived at this time, in this place. Through examining the extent to which these books satisfy criteria for child sexual abuse prevention we begin to conceive of their educative and therapeutic potential. Through close textual analysis we begin to see patterns demonstrating how current conceptions about child sexual abuse manifest themselves in children's literature. Based

on themes of children's empowerment and agency, the books purport to teach children to recognize, resist and report abuse (Portwood, 2006)." (15)

McDaniel, C. (2001). Children's literature as prevention of child sexual abuse. *Children's Literature in Education*, *32*(3), 203-224.

Abstract: "This article addresses the issue of child sexual abuse, providing contextual information about the problem, such as the fact that in 85–95% of cases, the offender is known to and trusted by the victim. Because children are greatly influenced by situations depicted in books (and other media), positive and negative influences of general children's literature are discussed. More importantly, the author argues that carefully selected children's literature can help to prevent child sexual abuse. Since statistics reveal that the average sexually abused victim is eight years old, this study focuses on current and suggested literature for children ages four through eight. Content and evaluative criteria are discussed, followed by a survey of thirteen children's books that deal with child sexual abuse. Finally, ideal characteristics of prevention are suggested and some literary models are proposed." (203)

Sample: 13 Books

Description of intervention: Using books geared towards children as prevention tools.

Method: Review of content in children's books about preventing child sexual abuse

Results: Beneficial children's books follow nine criteria: "1. Never blame the victim; 2. Be balanced, with at least some books identifying the abuser as someone known to the victim, rather than a stranger; 3. Reflect the fact that abusers represent all classes, all economic and social backgrounds, and both genders. The norm should not be that they are poor and non-Caucasian; 4. Be careful to differentiate rape and other sexual abuse from loving or sexual behavior. Abusive handling should not be confused with "fondling" or loving and affectionate touching; 5. Avoid easy solutions, which are not helpful or realistic. Happy endings that occur without hard work and knowledgeable interaction make for poor literature and convey harmful messages; 6. Include information to help readers recognize whether they are victims of abuse. 7. Teach children to differentiate between secrets that are potentially threatening to their safety and surprises that will eventually be aired to please someone; 8. Suggest alternative ways of getting help; and 9. Avoid graphic scenes of abuse and violence." (212)

Implications: Future focus should center on providing literature that deals with the significant issues and questions children must face in real life. As we consider the use of literature to instill healthy attitudes in children toward themselves and others, it is important to remember that some of the materials we frequently provide contain stereotypical or negative messages. Improvements in the increasingly disturbing statistics connected with problems such as child sexual abuse will only occur if we change our attitudes and approaches to the issues. (221)

Mikton, Christopher, and Alexander Butchart. "Child Maltreatment Prevention: A Systematic Review of Reviews." *Bull World Health Organ* 87 (2009): 353-61. Print.

Abstract: "This article looks to synthesize recent evidence from systematic and comprehensive reviews on the effectiveness of universal and selective child maltreatment prevention interventions, evaluate the methodological quality of the reviews and outcome evaluation studies they are based on, and map the geographical distribution of the evidence." (353)

Sample: 26

Description of intervention: Early childhood home visitation, parent education programs, CSA prevention programs

Method: "A systematic review of reviews was conducted. The quality of the systematic reviews was evaluated with a tool for the assessment of multiple systematic reviews (AMSTAR), and the quality of the outcome evaluations was assessed using indicators of internal validity and of the construct validity of outcome measures." (353)

Results: "The review focused on seven main types of interventions: home visiting, parent education, child sex abuse prevention, abusive head trauma prevention, multi-component interventions, media-based interventions, and support and mutual aid groups. Four of the seven – home visiting, parent education, abusive head trauma prevention and multi-component interventions – show promise in preventing actual child maltreatment. Three of them – home visiting, parent education and child sexual abuse prevention – appear effective in reducing risk factors for child maltreatment, although these conclusions are tentative due to the methodological shortcomings of the reviews and outcome evaluation studies they draw on. (353)

Implications: "Evidence for the effectiveness of four of the seven main types of interventions for preventing child maltreatment is promising, although it is weakened by methodological problems and paucity of outcome evaluations from low- and middle-income countries." (353)

Pelcovitz, David, Naomi A. Adler, Sandra Kaplan, Linda Packman, and Renee Krieger. "The Failure of a School-based Child Sexual Abuse Prevention Program." *Journal of the American Academy of Child & Adolescent Psychiatry* 31.5 (1992): 887-92. Print.

Abstract: "Structured interviews were administered to 22 children, ranging in age from 6 to 10 years old, who did not disclose long-term sexual abuse by an auxiliary school employee, despite having been exposed to a school-based child sexual abuse prevention program. The results are presented in the context of a review of existing literature on school-based child sexual abuse prevention programs. Results point to the ineffectiveness of brief, single presentation, prevention efforts not geared to specific developmental levels of the audience, the need to explore the impact of the variable of group versus individual victimization on disclosure, and the need for further study of sexually victimized children who received prevention programming with the addition of a control group sample." (887)

Sample: One school-based intervention where 22 students became victims after being exposed to the program

Description of intervention: 40 minute film "Too Smart for Strangers", which, according to the accompanying material, is designed to teach young children how to protect themselves from potential physical or sexual harm. (889)

Method: The children were enrolled in once-weekly, structured group psychotherapy sessions, separated into two groups by age. Interviews with a questionnaire were administered to each child individually addressing the following: recollection of exposure to sexual abuse prevention materials, age of exposure to prevention materials, recollection of actual sexual abuse prevention materials, and efficacy of prevention materials, particularly while they were being victimized.

Results: Of the 19 children exposed to the film only 10 remembers seeing it. Only two of those 10 recalled details related to sexual abuse. Only three children reported the movie was helpful but could not articulate why it was helpful. Those three children also said that the movie did not help them know how to respond to their own abuse. (890)

Implications: The fact that none of the victims reported their own abuse indicates that the school-program they were exposed to was not effective. Failure could be contributed to lack of assessment, absence of follow up, shortness of program, and passive learning through the use of the film. The failure of this program does not suggest that all school-based programs are ineffective.

Stockford, Chreyl. *Connecticut Youth Violence Prevention Initiative*. Rep. no. 5 H79 SM55331-02. Hartford, Connecticut: Department of Mental Health and Addiction Services, 2003. (not-published, program evalualtion)

Abstract: "In Connecticut, as in many states, school violence involving girls is increasing – and of increasing concern to parents, schools, and communities. In the city of Hartford, the problem is further complicated by extremely high rates of crime, violence, and school dropouts. At the same time, although current literature recognizes the importance of offering gender-specific programming based on the realities of girl's lives and on the identification of girl's strengths, there is in Hartford a present lack of culture- and gender-specific violence prevention interventions. In response to these needs, the Connecticut Department of Mental Health and Addiction Services (DMHAS) in partnership with Wheeler Clinic and Prevent Child Abuse Connecticut, developed and implemented the Connecticut Youth Violence Prevention Initiative with funding from the SAMHSA Center for Mental Health Services (Grant Number 1 H79 SM55331). The goals of the CMHS initiative were to build community-wide understanding of the nature, extent, and effects of violence and other negative behaviors among youth in the community and to mobilize the community to address youth victimization and/or violence, and related problems, and to implement of an effective intervention that addressed youth violence-related problems and enhanced personal and interpersonal strengths, pro-social development, and positive mental health in youth."

Sample: One intervention

Description of intervention: "The Connecticut Youth Violence Prevention Initiative comprised two components. First, a Youth Violence Prevention Workgroup was established as an enhancement to the existing Connecticut Coalition for the Advancement of Prevention (CCAP), whose goal was to bring together prevention providers in order to identify and implement interventions that would in some way enhance the state's prevention infrastructure for youth. *Second, a school-based violence prevention intervention, the Vermont Sexual Abuse Free Environment for Teens (SAFE-T) Program,* was adapted to be appropriate for urban at-risk girls and implemented in two Hartford public schools by staff from Wheeler Clinic Prevention and Wellness Department, a DMHAS funded prevention services provider. The goals of the Connecticut SAFE-T Program were to provide youth with knowledge and skills to prevent or reduce the risks of sexual abuse and violence and encourage positive relationships. The target population of the Connecticut SAFE-T Program was high-risk 12 to 15 year old girls." (5)

Method: "The process evaluation documented implementation of the Connecticut SAFE-T Program, including planning activities, curriculum adaptation, and training; fidelity of implementation; dosage of intervention; numbers of individuals served; and program participant attrition and satisfaction. Several methods were used in the process evaluation of the Connecticut SAFE-T program, including direct observation of project staff meetings, review of archival records such as program attendance records, semi-structured interviews of Connecticut SAFE-T staff, and focus group interviews of Connecticut SAFE-T program participants. A few hours of class observation was also undertaken when recruiting evaluation participants." (16)

Results: After the SAFE-T Program: there was an overall reduction in the use of alcohol and marijuana, sibling aggression, dating violence perpetration, and reported sexual victimization. Results yielded an overall increase in extra-family aggression. In evaluating protective factors the results indicated a slight decrease in depression, no change in self-esteem, mixed results for social responsibility, and an increase in school support and knowledge gained of sexual risk behaviors.

Implications: Student comfort and participation might improve if the most sensitive content was taught in same-gender sessions. Ongoing counseling groups could supplement the program in a positive way for students who want to spend extra time on some personal issues, including students who may have experienced adverse life experiences such as sexual victimization, or who come from homes with marked parental conflict and violence. Material should not be rushed but should be presented over the course of a school year. To better understand program outcomes it is important to take victimization history into account. Training and consistent guidance and technical support for teachers is needed so that they are able to deliver the material with competence and comfort, or identify alternate sources to do so. There is room for expansion on parent and community involvement. (26-7)

Zwi, Karen, Susan Woolfenden, Danielle M. Wheeler, Tracey O'Brien, Paul Tait, and Katrina J. Williams. "School-based Education Programmes for the Prevention of Child Sexual Abuse." *The Cochrane Library* 1 (2009): 1-37. Print.

Efficacy of Child Sexual Abuse Prevention Programs: An Annotated Bibliography

Abstract: This article aims "to assess if school-based programs are effective in improving knowledge about sexual abuse and self-protective behaviors; whether participation results in an increase in disclosure of sexual abuse and/or produces any harm; knowledge retention and the effect of program type or setting." (1)

Sample: 15

Description of intervention: "All interventions used an active education program involving various combinations of role-play, film/video and discussion. Eight studies used established prevention programs including: the TOUCH program (Saslawsky 1986; Wurtele 1986), STOP! (Stop, Tell someone, Own your body, Protect yourself) (Blumberg 1991), CAPPP (Child Abuse Primary Prevention Program) (Blumberg 1991), TRUST (Oldfield 1996), Good Touch/Bad Touch program (Harvey 1988), BST (Behavioral Skills Training) (Lee 1998; Wurtele 1986) and ESPACE (Hebert 2001), and "Children Need to Know Personal Safety Training Program" (Fryer 1987). Seven interventions were brief (less than 90 minutes total duration) (Blumberg 1991; Hebert 2001; Oldfield 1996; Poche 1988; Saslawsky 1986; Wolfe 1986; Wurtele 1986) and the remainder was sustained (lasting from 90 up to 320 minutes). One study (Harvey 1988) measured the effects of a three-session intervention over seven weeks. In ten studies, the control group was on a waitlist or received the standard curriculum. In the five remaining studies, the control group interventions were as follows: discussion about self concept (Saslawsky 1986); multimedia presentation with no child abuse content (Harvey 1988; Wurtele 1986); fire prevention (Blumberg 1991), and an attention control program (Lee 1998)." (6)

Method: "Meta-analyses and sensitivity analysis, using two imputed intraclass correlation coefficients (ICC) (0.1, 0.2), were used for four outcomes: protective behaviors, questionnaire-based knowledge, vignette-based knowledge and disclosure of abuse. Meta-analysis was not possible for retention of knowledge, likelihood of harm, or effect of program type and setting."(1, 5)

Results: "Fifteen trials measuring knowledge and behavior change as a result of school-based child sexual abuse intervention programs were included. Over half the studies in each initial meta-analysis contained unit of analysis errors. For behavior change, two studies had data suitable for meta-analysis; results favored intervention (OR 6.76, 95% CI 1.44, 31.84) with moderate heterogeneity (I2=56.0%) and did not change significantly when adjustments using intra-class coefficients were made. Nine studies were included in a meta-analysis evaluating questionnaire-based knowledge. An increase in knowledge was found (SMD 0.59; 0.44, 0.74, heterogeneity (I2=66.4%). When adjusted for an ICC of 0.1 and 0.2 the results were SMD 0.6 (0.45, 0.75) and 0.57 (0.44, 0.71) respectively. Heterogeneity decreased with increasing ICC. A meta-analysis of four studies evaluating vignette-based knowledge favored intervention (SMD 0.37 (0.18, 0.55)) with low heterogeneity (I2=0.0%) and no significant change when ICC adjustments were made. Meta-analysis of between- group differences of reported disclosures did not show a statistically significant difference." (2, 6-8)

Implications: "Studies evaluated in this review report significant improvements in knowledge measures and protective behaviors. Results might have differed had the true ICCs from studies been available or cluster-adjusted results been available. Several studies reported harms,

suggesting a need to monitor the impact of similar interventions. Retention of knowledge should be measured beyond 3-12 months. Further investigation of the best forms of presentation and optimal age of program delivery is required." (2, 11-12)

SECTION I Synthesis

There is clear evidence that prevention programs geared towards children are effective in increasing children's knowledge of CSA and self-protection skills. Educational programs are also shown to increase disclosure. Effective programs boost empowerment, self-esteem, feelings of control and safety. Disclosure poses one of the largest challenges for victims of CSA. Programs should focus on encouraging a broader scope of acceptable figures of authority for disclosure.

There is little empirical evidence, indicating that prevention education reduces the risk of likelihood of sexual abuse in young children. This is likely because victim or potential victim focused interventions are symptom-based approaches. The only substantive way to reduce the risk of likelihood of CSA is to target offenders and potential offenders. Prevention programs that promote healthy relationships and family well being are more effective at reducing instances of child sexual abuse because they reduce offending behavior and risk instead of reducing victimization.

Sustainable programs that incorporate parents, caregivers and community members are more effective than classroom based programs. Educational picture books offer a way to help children overcome social and emotional challenges related to CSA. For programs that target children, long-term multidimensional projects are more effective than one-time programs.

SECTION II - Caregivers

> Deblinger, E., Thakkar-Kolar, R. R., Berry, E. J., & Schroeder, C. M. (2010). Caregivers' Efforts to Educate Their Children About Child Sexual Abuse A Replication Study. *Child maltreatment*, *15*(1), 91-100.

Abstract: "The current investigation examined parental efforts to educate their children about sexual abuse. Participants were 289 guardians (39% response rate) who voluntarily completed a survey assessing demographic characteristics, caregivers' direct or indirect experience with child sexual abuse, and their efforts to educate their children about the issue. As found previously, parents continue to disproportionately focus on strangers as potential offenders and provide limited information particularly in terms of the nature of sexual abuse and the secrecy associated with it. Parents with no direct or indirect experience with child sexual abuse were least likely to talk with their children about the issue in general and when they did so provided less information. These findings were surprisingly similar to earlier investigations despite methodological and sampling differences across investigations. Implications and limitations of the current survey findings discussed." (91)

Sample: 289 Parents

Description of intervention: Analysis of caregiver provided prevention education

Method: "Approximately 750 surveys were distributed to parents of kindergarten through third grade youngsters (mean age 8.5) in three New Jersey elementary schools." (91)

Results: Approximately 79% of parents in the sample reported efforts to educate their children about CSA. Strangers were the most common group of people that parents identified as potential perpetrators.

Implications: Many parents do not convey an accurate picture of CSA and they may be neglecting to share critical information that may help children effectively recognize, avert, and/or disclose sexual abuse should they experience such. Given the pervasive, persistent, and hidden nature of CSA, efforts to combat this widespread public health problem require a multi-prong approach that includes, but is certainly not limited to, research, legislative, and educational efforts. (99)

> Derrick, C.M., Flynn, C., Rodi, M., (2007). Stewards of Children Online: Child sexual abuse prevention training; training evaluation final report. Unpublished

Abstract: "Darkness to Light believes that adults who are responsible for children could do more to protect them from sexual abuse. Darkness to Light's organizational philosophy is that increased awareness of the prevalence and consequences of child sexual abuse, and adult education in preventing, recognizing and responding to it, will lead directly to reductions in the incidence of child sexual abuse. Stewards of Children, a web-based training developed by Darkness to Light, includes instruction that improves awareness of the prevalence, consequences,

and circumstances of child sexual abuse, lessons in ways to prevent, recognize, and respond to abuse, and exercise that empower and motivate participants to protect children proactively." (3)

"The evaluation of the online training assessed participants' satisfaction with the technical quality of the training, change in attitudes, increased knowledge of child sexual abuse, and change in prevention behaviors. Changes at the organizational levels were also assessed for policy and procedure modification and satisfaction with the technical quality of the training." (3)

Sample: 218 individuals who work or volunteer with children. Sample split into two groups: 134 for the intervention and 84 for the comparison group.

Description of intervention: Web based training for adults.

Method: Participants completed a baseline questionnaire and then participated in training. After training, participants completed evaluations immediately and after 2 and 6 months.

Results: After training participants were more likely to retain information. Participants also changed their attitude after training and maintained that change. Participants noticed an increase in prevention behaviors.

Implications: "Online training clearly has an impact on organizations and their employees. To ensure organizational-wide impact, organizational leaders can couple this online training with time for formal discussion and reflection with staff or volunteers to process the training information and discuss organizational changes to policies and procedures." (6)

> Hunt, R., & Walsh, K. M. (2011). Parents' views about child sexual abuse prevention education: A systematic review. *Australasian Journal of Early Childhood*, *36*(2), 63-76.

Abstract: "This paper presents the results of a systematic review of literature on the topic of parents' views about child sexual abuse prevention education. It describes: i) what parents know about child sexual abuse prevention education; ii) what child sexual abuse prevention messages parents provide to their children and what topics they discuss; iii) what parents' attitudes are towards child sexual abuse prevention education in schools; and iv) their preferences for content. Electronic database searches were conducted to identify relevant literature published in English relating to child sexual abuse prevention programs and parent's views. A total of 429 papers were evaluated with 13 studies identified as meeting the study's inclusion criteria. Worldwide, empirical research on parents' views about child sexual abuse prevention programs is limited and more research is needed in Australia. Implications for future research and practice are outlined." (1)

Sample: 13

Description of intervention: Parent provided education

Method: Systematic review in educational research. Key features include: fine detailing of the

research question(s); transparency in the reporting of search methods; comprehensive searches for published and unpublished studies; clear criteria for assessing the quality of studies; clear inclusion and exclusion criteria; more than one blind reviewer to reduce bias; and clear reporting of the findings (Evans & Benefield, 2001). "Studies were eligible for inclusion in the review if they were: i) primary research articles, ii) published in a peer-reviewed journal, book chapter or report, iii) reporting on the views of parents with young children aged 0-12 years; and iv) focused on any one of the four key research questions." (3-4)

Results: Parents know very little about child sexual abuse prevention education. Parents agreed that prevention education is important but the majority had not experienced it for themselves. Female parents were more likely to seek out prevention education. Parents who were willing to talk with their children about CSA were more likely have had or to have known someone who had a history with CSA. The more parents knew about CSA the more accurately they could predict how much their children knew. When parents do talk about CSA with their children they are more likely to discuss danger with strangers than to talk about explicit touching . Parents support CSA prevention education in schools and centers and are more likely to discuss CSA with their children if they are already receiving education at school. Parents are reluctant to talk to their children about CSA but would prefer that they be the primary educators for their own children.

Implications: Better CSA educated parents will educate their children better about CSA. If parents support CSA prevention education in schools but would like to themselves be the primary educator than it may be beneficial to educate parents about CSA through their child's school. Sustainable programs through school and family yield more discussion and more detailed discussion over time. For more details, discussion and supporting arguments see pages 11-13. Although the papers included review analysis from around the world the trends in data are congruent with the American studies. For specific statistics by country cultural factors have significant influence.

> Rheingold, A. A., de Arellano, M. A., Zajac, K., Patton, M., Saunders, B., & Kilpatrick, D. G. (2011) (Manuscript Under Review). Child sexual abuse training for childcare professionals: A multi-site randomized controlled trial of Stewards of Children.

Note: Unable to attain PDF

Abstract: "A Controlled Experimental Study of the Impact of *Darkness to Light*'s *Stewards of Children* Program on Child Care Professionals' Primary and Secondary Prevention Efforts, including Changes in Knowledge, Attitudes, and Reports of Behavior Over Time, As Related to the Prevention of Child Sexual Abuse. This 3-year study is complete and is pending publication. It was funded by the US Centers for Disease Control and is being conducted by Alyssa Rheingold, PhD at the National Crime Victim's Research Center at the Medical University of South Carolina. It evaluated, in a randomized, controlled experimental study, the impact of *Darkness to Light*'s *Stewards of Children* program on childcare professional's primary and secondary prevention efforts, including changes in knowledge, attitudes, and reports of behavior over time, in relation to the prevention of child sexual abuse. This evaluation also compared the

different modes of presentation (i.e. via web or facilitator-led). The study determined that those receiving the training (both online and facilitator-led) made significant changes in their child-protective behaviors over the long-term."

Rheingold, A.A., Campbell, C., Self-Brown, S., de Arellano, M., Resnick, H. Kilpatrick, D.G. (2007). Prevention of child sexual abuse: evaluation of a community media campaign; Child Maltreatment 2007 12: 352.

Abstract: "Given that mass media techniques have been an effective tool within the public health field for affecting behavioral change, these strategies may prove successful for the primary prevention of child sexual abuse (CSA). This study was an independent evaluation of a CSA media campaign. Two hundred parents were recruited from eight sites across the United States. Results indicated that the combined mass media campaign affected knowledge about CSA at the time of intervention compared to no intervention. No significant differences were found in regards to CSA attitudes. A significant positive impact on primary prevention response behaviors assessed using hypothetical vignettes was found; however, no significant findings were noted for several other behavioral responses. Knowledge and behavioral gains were not maintained at the one-month follow-up. Small sample size at follow-up may have affected findings. Results of this study imply that media campaigns alone may not significantly affect primary prevention of CSA." (352)

Sample: One media campaign shown to 200 parents

Description of intervention: "The current study is an independent evaluation of Darkness To Light's (DTL) mass media campaign on affecting parents' knowledge, attitudes, and behaviors related to CSA prevention." (354)

Method: "Participants were randomly assigned to one of four groups who were exposed to (a) video PSAs, (b) educational pamphlet, (c) video PSA plus educational pamphlet, or (d) no media materials. Comparisons between groups were made to differentiate the various forms of educational materials and within groups at a 1-month follow-up period." (354)

Results: "Overall, findings indicate that that the DTL's media campaign had significant impact on short- term knowledge, no significant impact on attitudes, and significant impact on primary prevention responses to hypothetical vignettes. No differences were noted across groups related to actual behavioral responses at follow-up. Specifically, exposure to DTL's PSA-plus-booklet campaign positively affected knowledge as compared to no campaign exposure. In addition, exposure to the booklet affected the generation of preventive strategies in response to hypothetical vignettes; however, effect size was small. No differences were found for the other four dimensions of prevention behaviors. It appears the PSAs alone were not as influential as the booklet or the booklet combined with the PSAs." (360)

Implications: Public health media campaigns are effective tools for increasing knowledge about health-related information. "Knowledge gained from the materials in a real- world campaign would be maintained over time, as continual exposure would likely improve knowledge retention." (360)

"Although changing knowledge and attitudes has not always been shown to be directly linked with changes in behavior, the literature suggests that knowledge and attitudes do influence behavior, and that the more specific and targeted the education, the more likely it is that behavior change will occur (Kelly & St. Lawrence, 1988)." (360)

"Findings from the current study, although minimal, indicate some support that a CSA prevention media campaign may affect awareness and potentially primary prevention behaviors. Even a small impact across a wide audience could have broad public health implications. An effectiveness study allowing for a full media blitz in a community would assist in further determining the overall potential impact of the DTL media campaign. However, the current study also indicates that a media campaign alone may not be sufficient in pre- venting CSA. Examining interventions that complement media campaign approaches would benefit the CSA prevention field." (361)

Rheingold, A. A., Zajac, K., & Patton, M. (2012). Feasibility and Acceptability of a Child Sexual Abuse Prevention Program for Childcare Professionals: Comparison of a Web-Based and In-Person Training. *Journal of Child Sexual Abuse*, *21*(4), 422-436.

Note: Unable to attain PDF

Abstract: "Recent prevention research has established the efficacy of some child sexual abuse prevention programs targeting adults; however, less is known about the feasibility of implementing such programs. The current study examines the feasibility and acceptability of a child sexual abuse prevention program for child care professionals provided in two different formats: in person and Web based. The sample consisted of 188 childcare professionals from a large-scale, multi-site, randomized controlled trial. Findings indicate that both in-person and online training formats are feasible to implement and acceptable to professionals. When comparing formats, the in-person format was favored in terms of comfort level and likelihood of sharing information with others. These findings have significant implications for dissemination of child sexual abuse prevention programs for child care professionals."

Self-Brown, S., Rheingold, A.A., Campbell, C., de Arellano, M., (2008).   A media campaign prevention program for child sexual abuse : community members' perspectives; Journal of Interpersonal Violence, 2008, 23: 728

Abstract: "This study examines the face validity and feasibility of materials included in a multimedia child sexual abuse (CSA) prevention campaign. A quantitative survey method assessed participants' comfort level, knowledge gain, and likelihood of behavioral change in response to the media campaign. Furthermore, a focus group method explored participants' attitudes and opinions regarding the campaign and the unique effects of ethnic or cultural norms on participants' acceptance of the media materials. Six groups, established based on participant ethnicity (i.e., three Caucasian groups, two African American groups, one Hispanic group), met at two sites in the Charleston, South Carolina, area. Quantitative data suggest that participants reported increased CSA knowledge and low levels of discomfort or anxiety related to exposure

to the materials. Focus group results suggest that study participants, regardless of ethnic background, agreed that the media campaign can have a positive impact on public knowledge of CSA. Implications and directions for future research are discussed." (728)

Sample: One media campaign shown to 42 parents

Description of intervention: "Group participants were shown two PSAs developed by Darkness To Light (D2L). The first PSA involved various people of different ages and racial groups describing CSA that happened to them at different ages and the relationship of the perpetrator. The second PSA provided prevalence and disclosure rates of CSA. In addition, information on common emotional difficulties that children experience, and preventive steps for talking to children about CSA, was offered. Both PSAs offered contact information for viewers to obtain more information about CSA. In addition, group participants were asked to read a booklet titled "Seven Steps to Protecting Our Children From Sexual Abuse: A Responsible Adult's Guide." The booklet provided information about the prevalence rates of CSA, CSA consequences, skills to recognize abuse, steps to decrease risk for CSA, and steps for responding when CSA is suspected." (733)

Method: "A mixed-method design was used in this study, including a combination of survey and focus group methodology. *Feasibility questionnaire*. Perceptions of the feasibility of the media materials to serve as prevention strategies by those who are exposed to the media campaign were assessed by a 16-item self-report measure, which included a combination of questions utilizing Likert-type scale ratings and open-ended, fill-in-the-blank questions. Participants were asked questions to determine whether the materials caused discomfort, whether they felt the prevention techniques were helpful and could help others, if they learned things that they did not know, how likely they would be to call the number provided in the media campaign, preferences for the various specific media materials, and their perceptions of strengths and weaknesses of the media program for possibly preventing CSA. Questions focused on both the content and the presentation of the materials. The measure provided data related to the face validity of the program." (731-732)

Results: The majority of group participants indicated no discomfort in viewing the media materials Focus group participants reported an increase in knowledge about CSA after viewing the D2L materials. Following the viewing of materials, 48.0% indicated they were moderately knowledgeable and 47.0% identified themselves as very knowledgeable. In addition, 79.0% of the participants reported that they learned new and useful steps for protecting their children, and 88.0% reported that they would be very likely to use the steps learned from the D2L materials. Approximately 68.0% of the group participants indicated that they would likely call the D2L number provided in the booklet. Those individuals who reported PTSD symptoms were more likely than individuals without such symptoms to report planning to use the steps from the materials to prevent child abuse. In addition, group members who were parents appeared more likely to report that they would contact D2L for questions related to sexual abuse than were members without children. (735-736)

Implications: "To date, we know relatively little about how to best structure CSA prevention efforts in general, especially when it comes to efforts aimed at adults (Guterman, 2004). Media

materials such as D2L's products are relatively inexpensive and have greater potential to reach a vast array of the public compared to many other primary prevention modalities. Study results suggest that the D2L media materials will be well accepted by the general public and are useful for increasing public knowledge and aware- ness of CSA. With this said, media campaigns are often limited in the clinically significant impact they make on long-term knowledge and behavioral change. Further evaluation of the D2L media campaign in a larger effective- ness trial is warranted to provide us with information on how this campaign will affect knowledge, attitudes, and behavior. Ultimately, CSA prevention media campaigns will likely be most effective when implemented in con- junction with other primary prevention methods that directly target the beliefs and behaviors of potential offenders. Such a multimodal approach will have the most potential for directly affecting the incidence rates of CSA (Renk, Liljequist, Steinberg, Bosco, & Phares, 2002)." (741)

Walsh, K., Brandon, L., & Chirio, L. (2012). Mother–Child Communication about Sexual Abuse Prevention. *Journal of Child Sexual Abuse*, *21*(4), 399-421.

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Abstract: Two hundred and twelve Australian mothers completed an online survey examining features of mother–child communication about child sexual abuse prevention. Two-thirds (67.5%) of respondents had discussed child sexual abuse prevention with their children, with proportions varying according to age range (highest for mothers with children aged 5–12 years) and only-child status (lowest for mothers of only children). The number of topics discussed with their children differed according to child gender (greater number of topics discussed by mothers with both girls and boys) and age range (greater number of topics discussed by mothers with children aged 5–12 years). These findings provide new insights into mother–child communication about child sexual abuse prevention.

Wurtele, S. K., & Kenny, M. C. (2010). Partnering with parents to prevent childhood sexual abuse. *Child Abuse Review*, *19*(2), 130-152.

Abstract: "Although research demonstrates that child-focused sexual abuse prevention programs can teach children personal safety knowledge and skills, childhood sexual abuse (CSA) prevention programs that involve parents have a number of distinct advantages. The more knowledge parents have about CSA, the greater likelihood they can create safer environments for their children and thus prevent the occurrence of sexual exploitation. Research has demonstrated that parents lack crucial information about CSA and can benefit from even brief educational efforts. This paper will identify potential barriers to participation and offer practical suggestions for enhancing both recruitment and retention rates. Recommendations for parent education programs are offered, including improving parents' confidence and skills in educating their children about CSA, providing them with parent-friendly materials to use and developing Internet applications." (130)

Sample: N/A

Description of intervention: School-based programs and parent provided education

Method: Literature Review

Results & Implications: "The CSA epidemic has sparked educational and prevention efforts aimed at children, parents and communities. The majority of programs target children as participants and are implemented in schools. Although most parents are in support of school-based prevention programs, this review has shown that very few parents take advantage of presentations held in conjunction with these programs. Most parents allow their children to participate, but few attend or access available information themselves. Parents remain an untapped resource with regard to their role in preventing CSA." (147)

"As outlined in this review, partnering with parents to prevent CSA has many advantages. Parents can function as their child's partner in prevention by repeatedly practicing and reviewing the content of school-based programs at home. Parents can teach and reinforce personal safety rules at home. They can talk with their children about sexuality and personal boundaries. A major advantage of targeting parents is that they often have the ability to limit the access of potential perpetrators to their children. Educated parents can reduce other risk factors associated with CSA, and identify child victims and respond to disclosures." (148)

"Although the need for parent-focused prevention programs is clear, this review has highlighted barriers to parental participation and recruitment. Barriers to participation include community resistance, denial or lack of awareness of the problem of CSA, beliefs that children (including their own) are not vulnerable to sexual exploitation and concerns about negative side effects of instruction. Some parents have expressed concern that CSA prevention programs will result in their children learning 'too much about sex' or result in other harmful effects, although this concern has not been substantiated in the literature. Other studies suggest that low rates of CSA prevention participation may be due to lack of time or scheduling conflicts. We offer numerous suggestions to enhance parental participation, and encourage the development of online technology in the form of Web-based training." (148)

"Encouragingly, substantiated cases of sexual abuse in the US have decreased an estimated 53 per cent since 1992 (Finkelhor and Jones, 2008). Although this decline cannot be definitely attributed to the CSA prevention movement (see Finkelhor and Jones, 2006, for other explanations), prevention efforts have most likely played a role. Conceivably, with more focus on including parents as an integral part of the prevention process, primary prevention efforts have the potential to prevent the sexual victimization of children and to achieve the overall goal of eliminating this serious public health problem." (148)

SECTION II Synthesis

Many parents make efforts to educate their children about the dangers of CSA. Unfortunately that information is often incomplete and can be misdirecting. For example strangers are the most common group parents identify as potential perpetrators even though the most common group of potential perpetrators are people who are close to the victim.

Parents and caregivers who received training indicated more knowledge about CSA, a better attitude about CSA and more confidence in their ability to handle issues around CSA. In person education programs were preferred to online ones. Media campaigns and school provided programs seemed most effective at reaching parents.

Better CSA educated parents will educate their children better about CSA. There is some conflict between parents not being comfortable providing comprehensive education to their children and also wanting to be the primary educator on CSA issues. If parents support CSA prevention education in schools but would like to themselves be the primary educator than it may be beneficial to educate parents about CSA through their child's school. Sustainable programs through school and family yield more discussion and more detailed discussion over time. Given the pervasive, persistent, and hidden nature of CSA, efforts to combat this widespread public health problem require a multi-prong approach that includes, but is certainly not limited to, research, legislative, and educational efforts.

SECTION III – Potential Offenders

Beier, K. M., Ahlers, C. J., Goecker, D., Neutze, J., Mundt, I. A., Hupp, E., & Schaefer, G. A. (2009). Can pedophiles be reached for primary prevention of child sexual abuse? First results of the Berlin Prevention Project Dunkelfeld (PPD). *The Journal of Forensic Psychiatry & Psychology*, *20*(6), 851-867

Abstract: "The Berlin *Prevention Project Dunkelfeld (PPD)* aims to prevent child sexual abuse (CSA) by targeting men who fear they may sexually abuse children, and who seek help without being mandated to do so. This article aims to demonstrate that a pedophilic or hebephilic sexual preference is very common among these men, to show how these men can be reached, and to document their determination to find help." (851)

Sample: One intervention involving 241 males

Description of intervention: Outreach to potential offenders through media campaign.

Method: "Two main assumptions guided the methodology: (1) a media campaign may successfully reach individuals sexually interested in children and (2) men with a genuine sexual interest in children are potentially motivated participants in a preventive treatment program." (855) "The target group was informed of the project and encouraged to respond via a media campaign. A telephone screening was conducted over the first 18 months. Of the 286 who completed the screening (60.1% of the respondents), 84.3% ($N = 241$) were interviewed by a clinician." (851)

Results: "Of the interviewees, 57.7% ($N = 139$) and 27.8% ($N = 67$) expressed a sexual preference for prepubescent and pubescent minors, respectively, and 10.8% ($N = 26$) for mature adults. The remaining 3.7% ($N = 9$) could not be reliably categorized. As (potential) child molesters with a respective sexual preference can be reached via a media campaign, efforts to prevent CSA ought to be expanded to target this group." (851)

Implications: "These men can be reached by a media campaign if they are not exposed to moral evaluation concerning their sexual preference. Once they gain trust and comply with treatment, they may learn how to permanently exercise self-control over their impulses. Obtaining this ability would be the most effective means of preventing CSA. This trust is, of course, enhanced by the favorable German legislation regarding confidentiality, which does not allow therapists to report committed or planned CSA offenses." (865)

"Within the community, there is an obvious lack of qualified treatment options for pedophiles seeking help. Meanwhile, despite the fact that the evaluation of the treatment's effectiveness is not complete, psychiatrists and psychotherapists from all over Germany, even from specialized institutions, refer their patients to the PPD, requesting advice regarding diagnosis and treatment services." (865)

Paradise, J. E. (2001). Current concepts in preventing sexual abuse. *Current Opinion in Pediatrics*, *13*(5), 402-407.

Abstract: "Most efforts to prevent sexual abuse have focused on teaching school children to resist abuse after it starts and to report it promptly to trusted adults. These programs increase children's knowledge and skills and the likelihood that children will disclose sexual victimization but have not been shown to reduce the incidence of abuse. A recent, unique approach to prevention is a Vermont social marketing campaign that encouraged sexual offenders to seek treatment. During the campaign, 50 persons voluntarily sought treatment for sexual offending or sexual behavior problems, and eight offenders presented themselves voluntarily to state attorney offices. Recent evidence indicates that many sexual offenders were themselves molested and that lack of family support about that molestation is an important risk factor for sexual offending. However, the number of treatment programs for sexually reactive children and adolescent sexual offenders in the United States declined from more than one thousand in 1994 to 337 in 2000. In nine states, no adolescent treatment program is currently available. There is an urgent need for methodologically sound research aimed at delineating the causes of sexual deviance and at measuring and improving the efficacy of treatment for sexual offenders." (402)

Sample: N/A

Description of intervention: "STOP IT NOW! VERMONT is a unique program that employs social marketing techniques and public education to emphasize adults' responsibility for preventing sexual abuse of children. Taking the position that adults, not children, must confront abusers and challenge them to change, the program provides a toll-free helpline for sexual abusers that offers information about the legal system, referrals to treatment programs, and opportunities to speak with "offenders who have completed treatment and know what it is like to be abusing without anyone to talk to'". (403)

Method: Review of meta-analyses

Results: School-based prevention programs are effective at increasing children's knowledge and skills. Children's ability to thwart offenders is not significantly tied to prevention instruction. Increasing self-confidence and reducing passivity makes children less likely to be targeted by sexual offenders.

Implications: "During the past decade, efforts to prevent sexual abuse have focused almost exclusively on teaching children to resist abuse after it starts and to report it promptly to trusted adults. These self-defense programs increase children's knowledge and skills and the likelihood that children will disclose sexual victimization but have not been shown to reduce the incidence of abuse. True prevention would require potential molesters not to approach children in the first place. Barriers to preventing sexual abuse in this fashion include the low and declining number of treatment programs for sexual offenders, the harsh social stigma attached to sexual offending that may discourage offenders from seeking treatment, and the paucity of research efforts aimed at delineating the causes of sexual deviance and at showing and improving the success of treatment for offenders [25]. Hunter and Figueredo's research suggests that an important and as yet underutilized way to prevent sexual abuse may be to provide comprehensive treatment for

adolescent sexual offenders and for boys who have been sexually abused and their families." (406)

Wortley, R., & Smallbone, S. (2006). Situational prevention of child sexual abuse.

Note: Unable to attain full version

Abstract: The book begins with two chapters that present a framework for applying situational analyses to understanding and preventing sexual offenses against children. Another chapter uses data from the new U.S. National Incident-Based Reporting System (NIBRS) to show that patterns of sexual offending against children suggest prevention strategies that target prevalent situations and opportunities in which child sexual abuse occurs. This is followed by a chapter that considers how the principles of situational crime prevention can be combined with knowledge of adolescent and adult sexual offender criminal methods (modus operandi) to inform sexual abuse prevention policies and practice. Another chapter presents the results from a qualitative study of interactions among "boy lovers" and between these men and the adolescent males with whom they seek a sexual and emotional connection. A chapter then applies situational theories of crime to the Internet as a currently low-risk vehicle for viewing, distributing, and promoting child pornography and the sexual abuse of children. Prevention tactics are suggested. A chapter addresses some of the situational elements and related treatment methods pertinent to child molesters who are intellectually disabled. This is followed by a chapter that encourages prevention and treatment methods that guide child molesters into positive behaviors and interests that reduce their attraction to situations that stimulate their deviant sexual drives. The concluding chapter reports on a study that found distinctive differences between child molesters who used persuasive tactics to draw victims into sexual activity and those who used aggressive tactics.

SECTION III Synthesis

True CSA prevention lies in keeping potential offenders from approaching children in the first place. Broad reaching media campaigns can be effective in targeting potential offenders. Trust and confidentiality are imperative in targeting potential offenders. There is an obvious lack of accessible, qualified treatment options for potential offenders and offenders.

SECTION IV – Multiple Intervention Targets

Finkelhor, David. "The Prevention of Childhood Sexual Abuse." *The Future Of Children* Fall 19.2 (2009): 169-94. Print.

Abstract: "David Finkelhor examines initiatives to prevent child sexual abuse, which have focused on two primary strategies: offender management and school-based educational programs. Recent major offender management initiatives have included registering sex offenders, notifying communities about their presence, conducting background employment checks, controlling where offenders can live, and imposing longer prison sentences. Although these initiatives win approval from both the public and policy makers, little evidence exists that they are effective in preventing sexual abuse. Moreover, these initiatives, cautions Finkelhor, are based on an overly stereotyped characterization of sexual abusers as pedophiles, guileful strangers who prey on children in public and other easy-access environments and who are at high risk to re-offend once caught. In reality the population is much more diverse. Most sexual abusers are not strangers or pedophiles; many (about a third) are themselves juveniles. Many have relatively low risks for re-offending once caught. Perhaps the most serious shortcoming to offender management as a prevention strategy, Finkelhor argues, is that only a small percentage of new offenders have a prior sex offense record that would have involved them in the management system. He recommends using law enforcement resources to catch more undetected offenders and concentrating intensive management efforts on those at highest risk to re-offend." (169)

"Finkelhor explains that school-based educational programs teach children such skills as how to identify dangerous situations, refuse an abuser s approach, break off an interaction, and summon help. The programs also aim to promote disclosure, reduce self-blame, and mobilize bystanders. Considerable evaluation research exists about these programs, suggesting that they achieve certain of their goals. Research shows, for example, that young people can and do acquire the concepts. The programs may promote disclosure and help children not to blame themselves. But studies are inconclusive about whether education programs reduce victimization. Finkelhor urges further research and development of this approach, in particular efforts to integrate it into comprehensive health and safety promotion curricula.

Finkelhor also points to evidence that supports counseling strategies both for offenders, particularly juveniles, to reduce re-offending, and for victims, to prevent negative mental health and life course outcomes associated with abuse." (169)

Sample: NA

Description of intervention: Offender management and school-based educational programs. Justice System Strategies include: offender registration, community notification, mandatory background checks, residency restrictions, sentence lengthening and civil commitment, enhanced detection and arrest, mental health treatment, and community reintegration and supervision. Other initiatives include: educational programs, community prevention of offending, and harm mitigation as prevention.

Method: Literature Review

Results: "No strong scientific evidence points as yet in the direction of one strategy or program to prevent sexual abuse." (185) There was not enough significant evidence or research to support the efficacy of offender registration, community notification, residency restrictions, sentence lengthening and civil commitment, enhanced detection and arrest, and community reintegration and supervision. Background checks have "become such standard practice that evidence about their efficacy would have much effect on policy." (175) Mental health treatment showed favorable results in preventing additional reports of abusive or inappropriate behavior. Educational programs are effective in reducing abuse associated with program exposure however access to programs is limited. Community prevention that targets potential offenders is shown to have positive effects. "Sex crimes against children appear to have declined dramatically in recent years. Several salient features of the declines are worth highlighting to identify possible lessons for prevention. The declines occurred, not alone, but in the context of large reductions in crime in general and in physical abuse as well, and at a time when many other child welfare indicators, including teen pregnancy, teen suicide, running away, and drug abuse, were improving." (184-185)

Implications: Educational programs using school settings deserve priority for further development. An increased focus in sustainability within a school setting is necessary for the success of school based educational programs. "There is a clear need to rejuvenate evidence-based practice in offender management policy."(186) "Treatment services should be made available to children who have been victimized and have symptoms or other disturbances and concerns in the wake of abuse. Solid evidence shows that certain forms of cognitive-behavioral therapy reduce such problems." (187) Across the board more research of and investment in child sex abuse prevention strategies will be necessary to continue the decreasing trend.

Itzhaky, H. (2001-07). Child sexual abuse and incest: community-based intervention. Child abuse & neglect, 25(7), 959-972.doi:10.1016/S0145-2134(01)00249-6

Abstract: "The primary aim of this article is to determine the effectiveness of community intervention in the case of child sexual abuse. The article describes and analyses an actual case in a small urban community in Israel. As the number of reported cases of child sexual abuse increases in the western world annually (Lurigio, Jones & Smith, 1995), the need to find new and different treatment and prevention interventions grows. Most intervention techniques described in the literature are based upon the individual, the family, and the small group. We will try to show why a community practice model, using a systems approach, is an effective model when it is known or suspected that child abuse and/or incest is prevalent in a community. We will introduce a case study of this kind and describe the interventions used by human service workers. Then we will attempt to generalize and to strengthen the case for integrated community practices for prevention and treatment, advocated in recent years, by, among others, Barton, Watkins, and Jarjoura (1997); Earls, McGuire, and Shay (1994); Morrison, Howard, Johnson, Navarro, Plachetka, and Bell (1997); and Mulroy and Shay (1997)." (959-960)

Sample: One intervention.

Description of intervention: Community intervention with the objective of empowering and "increasing the autonomy and growth of the neighborhood through constructive cooperation between the residents of the neighborhood and the workers in the various services, and among the workers themselves." (962)

Method: "After several incidents of child sexual abuse, much of it incestuous, were brought to light in the community, they were discussed openly, contained, and punished. A community campaign, in which community activists as well as all the service providers were involved, was organized by community social workers. Individual, group, and community interventions were used." (959)

Results: "The continuation of the abuse has been checked and there is no evidence to suggest its resurgence. Community apathy to child sexual abuse seems to have been halted and reversed. The involvement of community residents, particularly the activists, has increased, and this appears to be the major factor in changed community norms toward child sexual abuse." (959)

Implications: "An integrated program of intervention practices is advocated to contain and prevent the incidence of child sexual abuse and incest." (959) "The analysis of this case shows how community development provides a firm basis for trust and cooperation between residents and professional workers and the empowerment of both. This basis may even be strong enough to allow for extensive changes in existing community norms." (969)

> Schober, D. J., Fawcett, S. B., & Bernier, J. (2012). The Enough Abuse Campaign: Building the Movement to Prevent Child Sexual Abuse in Massachusetts. *Journal of Child Sexual Abuse*, *21*(4), 456-469.

Abstract: This case study describes the Enough Abuse Campaign, a multidisciplinary, statewide effort to prevent child sexual abuse in Massachusetts. The study uses the Institute of Medicine's Framework for Collaborative Community Action on Health to provide a systematic description of the campaign's process of implementation, which includes: (a) developing a state-level infrastructure for child sexual abuse prevention, (b) assessing child sexual abuse perceptions and public opinion, (c) developing local infrastructures in three communities and implementing training programs focused on preventing perpetration of child sexual abuse, (d) facilitating changes in local communities to child-sexual-abuse-related systems, and (e) inviting Massachusetts residents to join an advocacy-based movement to prevent child sexual abuse. This case study concludes with future directions for the campaign and topics for future research related to child sexual abuse.

Description of intervention: "The present study describes the Enough Abuse Campaign, a statewide education and community mobilization effort to prevent CSA" (457) "The Institute of Medicine(2003) report further highlights the importance of "focus on a combination of individual and community factors" in achieving widespread change in behavior and risk (and protective) factors (p. 196). Although the main focus of the community trainings was to teach individual adults about CSA, the Enough Abuse Campaign also provided a platform for

community discourse about the issue, attempting to promote community responsibility for preventing CSA." (463)

Method: Description of application the Institute of Medicine framework for community health to this comprehensive child sexual abuse prevention initiative.

Results: "In 2007, the campaign was evaluated by an external evaluator; this evaluation provided an assessment of campaign members' perceptions regarding the achievement of its goals. The results suggested that progress was being made in key goal areas." (465) "....evaluations identified the Enough Abuse Campaign's state and community level response to CSA prevention as strength. The campaign also addressed areas for improvement such as the need to increase support among trained trainers and expand prevention efforts to new communities:" (465)

Implications: Community and state-level initiatives (can) play a vital role in preventing and reducing the numerous harms of CSA and ensuring safe and caring relationships for all children. (467)

Smothers, M. K., & Smothers, D. B. (2011). A sexual assault primary prevention model with diverse urban youth. *Journal of Child Sexual Abuse*, *20*(6), 708-727.

Abstract: "In this study, a nonprofit community mental health clinic developed a socio-ecological model of sexual abuse prevention that was implemented in a public school. The goal of the program was to promote and create community change within individuals and the school community by reducing tolerance of sexual violence and sexual harassment. Participants were 5th–12th graders at a school from a Midwest city. Completed measures were obtained from 202 students, and a quasi-experimental time series research design was developed to evaluate the effectiveness of the prevention program. The program was found to be effective at increasing participant's knowledge of sexual abuse, awareness of school and community sexual assault support resources, and identification of components of healthy and unhealthy relationships." (708)

Sample: One intervention (202 students in a Midwest school district)

Description of intervention Three-phase intervention: I) Consisted of building relationships with the school personnel, students, and parents; II) Consisted of targeted developmentally sensitive trainings to students; III) Consisted of an exit strategy developed in collaboration with school administrators and staff.

Method: Evaluation of data collected with the Sexual Assault and Attitude Questionnaire.

Results: "Consistent with findings by Nation and colleagues (2003), our findings suggest an ecological-based prevention program utilizing varied teaching methods, trained professionals, and a focus on building relationships was effective in increasing student knowledge, attitudes, and beliefs about sexual assault and harassment across a diverse groups of students." (723)

Implications: "The results of the present study provide additional support regarding the components of effective prevention programs. Our findings suggest that children and adolescents can be taught healthy relationship skills that might protect them from predatory behaviors or maladaptive peer relationships. Classroom instruction can be a useful format to reach both potential victims and offenders while also reaching school staff and faculty, as they may often be in a position to report or catch early warning behaviors. Similar to past findings and suggestions for future programming (Davis & Gidycz, 2000; MacIntyre & Carr, 2000), the inclusion of repeated exposures and the inclusion of peer-facilitators may have contributed to the present results." (723)

SECTION IV Synthesis

Multidimensional, multi-pronged educational approaches to CSA prevention are ideal. School-based programs paired with other methods of outreach can boost effectiveness if the school can offer a central location to serve as a hub for community outreach and coordination. The most beneficial programs were comprehensive, holistic approaches that focused on direct CSA issues, general well being of the child, and reducing risk factors in the environment.

 "An ecological-based prevention program utilizing varied teaching methods, trained professionals, and a focus on building relationships was effective in increasing student knowledge, attitudes, and beliefs about sexual assault and harassment across a diverse groups of students." (Smothers, 2011, pg 723)