

# **Exploration of Child Sexual Abuse Prevention Efforts in Washington State**

Over the last two years, WCSAP has prioritized the issue of child sexual abuse (CSA) prevention in Washington State. Our initial motivation was high requests from our programs for resources and guidance in doing this work. We learned there was a lot of interest from communities and excitement from programs to address child sexual abuse. However, in our efforts to provide information and resources that reflected promising practice and effective prevention principles, there were limited tools that we felt met this need. The combination of local program interest and increasing attention on the national scene led WCSAP to invest time into exploring the primary prevention of CSA.

Initial review of CSA prevention research literature and reports revealed there are few programmatic examples of CSA primary prevention initiatives. In 2011 The National Sexual Violence Resource Center conducted a review of existing CSA programs. Many of the reviewed programs are targeted at children. These programs apply a risk-reduction approach. While they do have positive outcomes, such as increased disclosures, less self-blame, and increased knowledge and use of self-protective skills, research has not shown that these programs ultimately prevent CSA. Programming aimed at parents and professionals aim to raise awareness and understanding of CSA, and improve the response to disclosure. While some of these approaches have positive outcomes for short-term knowledge, the programs researched lacked the structure for effective prevention programming.

After reviewing findings from the national research and identifying the gaps in CSA primary prevention models, we assessed current activities, programming, and readiness in Washington to determine what steps are needed to promote a primary prevention approach in our state. We believe Washington sexual assault programs have the capacity to do this work given our state's historical focus and leadership in the areas of primary prevention and advocacy for children and teen survivors.

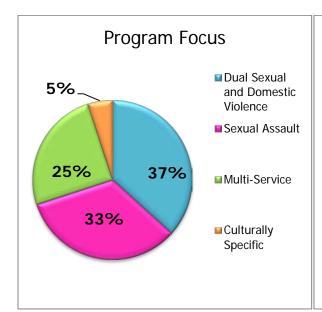
Through our exploration of what a primary prevention approach to CSA would look like, we determined that a comprehensive initiative should include primary prevention, awareness, and intervention. Each of these components serves a distinct role.

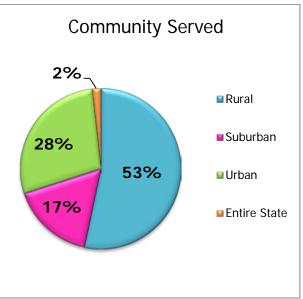


Intervention serves to break the cycle of abuse by mitigating the impacts of trauma, holding perpetrators accountable, and hopefully preventing re-victimization. Awareness breaks the silence, builds community engagement with the issue and increases the likelihood that abuse will be stopped early on. Primary prevention changes the norms and beliefs that support CSA, thereby decreasing its occurrence in the long-term. Since we believe that programs have a higher capacity for CSA intervention and awareness, we focused on identifying components of a primary prevention approach. These include: addressing community-specific root causes of CSA, shifting the focus to preventing perpetration by engaging adults, involving key community stakeholders, adhering to the Nine Principles of Effective Prevention Programs, and engaging communities across the Spectrum of Prevention. This framework guided the creation of the statewide survey and focus groups that will be discussed in the sections below.

## **Statewide Survey and Focus Groups**

WCSAP conducted a statewide online survey to collect data on CSA prevention activities. There were 60 people that participated in this anonymous survey. All of the programs that participated in the survey provide sexual assault services. Three quarters of the respondents serve rural and suburban communities, which accurately reflect the makeup of Washington State counties. Full demographic data of survey participants can be found in the tables below.



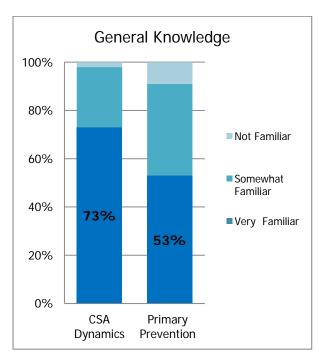


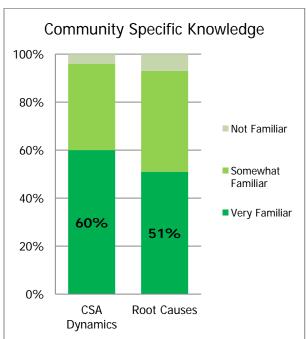


In order to respond to identified needs from the survey and to learn more in-depth information, WCSAP conducted training and focus groups at the Regional Prevention Meetings. Thirty-seven program staff attended one of three meetings in October 2012 held in Spokane, Yakima, and Federal Way. During the focus group the following areas related to child sexual abuse were discussed: child sexual abuse knowledge, community assessment, working with children, working with communities, curricula and programming, barriers, resources, and future directions. The focus group questions are provided in the Appendix.

In the following sections are highlights from the data we gathered through the survey and focus groups, as well as our individual conversations with service providers across the state.

# **Understanding of Child Sexual Abuse in the Community**







# **Community Assessment**

- 23% of survey respondents reported that their program has conducted a community assessment in regards to CSA. Discussion at the focus groups revealed that assessments may be more focused on sexual assault perpetrated against teens rather than young children.
- Program staff shared that an assessment tool and technical assistance would increase their ability to conduct an assessment.

## **CSA Dynamics**

- Although most survey respondents and focus group participants had not conducted a formal assessment, the survey showed that many staff are "very familiar" with the dynamics (60%) and root causes (51%) of CSA in their communities.
- Many programs reported seeing an increase in young child clients, most of whom
  were victimized by family members. This aligns with survey data, in which over
  half of respondents reported that a high number of child clients was a
  contributing factor in their programs' CSA awareness and prevention efforts.
- Community response to CSA disclosures was varied. Some participants have found system and caregiver responses to be supportive, while others reported that many child survivors receive harmful messages and reactions from parents and the criminal justice system. Multiple participants shared that CSA is minimized when the abuse does not involve penetration or when there is a corresponding family court case.
- Focus group participants across the state shared similar ideas about the root causes of CSA in their communities. Recurring ideas included: denial; intergenerational abuse and community beliefs that normalize abuse; intersecting oppressions and marginalization (poverty, adultism, immigration status); unaddressed trauma; the sexualization and devaluation of children.



## **Current Programming and Services Related to Child Sexual Abuse**

#### Awareness/Prevention Programs and Curricula

- During the regional meetings, participants generally agreed that existing
  programming aimed at young children does not constitute a primary prevention
  approach. However, 53% of survey respondents reported that children in grades
  K-6 are an intended audience of their CSA prevention programs. Interestingly,
  only 36% of respondents reported that children in grades K-6 are an intended
  audience of their CSA awareness programs.
- In comparison, parents were the most selected audience for both prevention (80%) and awareness (67%) programs.
- Prevention efforts are also geared at older youth and teens with a focus on preventing perpetration by building knowledge and skills of healthy relationships and sexuality, boundaries, empathy, and social responsibility.
- Survey respondents and focus group participants reported using similar curricula for awareness and prevention, including *Stewards of Children, Talking about Touching, Second Steps, Steps to Respect, Netsmartz, and Let's Get Real.*
- 48% of survey respondents reported that they are collecting data on the implementation and/or effectiveness of their prevention program.
- In general, we have found that some agencies and/or staff may struggle to distinguish between awareness and primary prevention concepts and activities.

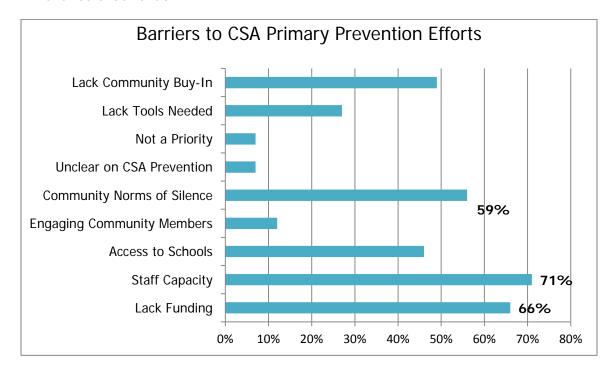
## Intervention/Advocacy

- Only 11% of survey respondents indicated that they were not providing CSA intervention services.
- Agencies are seeing overlap between their CSA prevention/awareness programming and their CSA advocacy services. Working with the schools to offer programming has provided the opportunity to coordinate services and work with children and families following a disclosure. Focus group participants shared that disclosures are common following programming, especially from younger children.



#### **Barriers**

 The top three barriers experienced by programs when attempting or considering primary prevention efforts are staff capacity, funding, and community norms of silence around CSA.

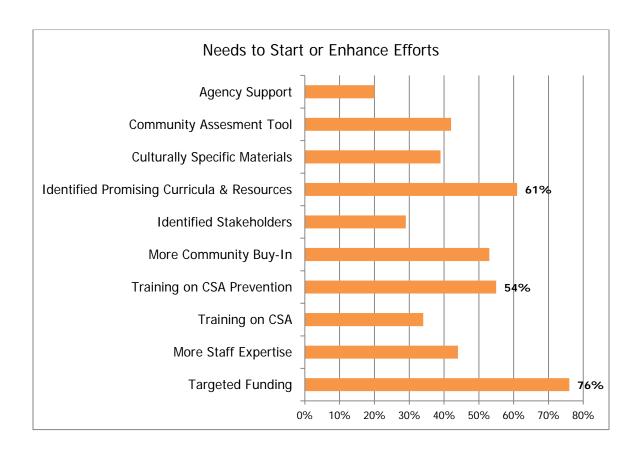


- Staff capacity and funding were often explained as the same issue. The primary concern expressed was a lack of staff time and resources to implement community-specific, comprehensive programming.
- Community norms of silence and lack of community buy-in were explained by focus group participants as:
  - Beliefs that CSA is a family issue;
  - Fears of judgment, isolation, and lack of anonymity, especially in small communities;
  - Poor or inconsistent system responses impact beliefs that CSA is a problem and discourage disclosure, as well as community involvement with the issue;
  - Schools and other community organizations are unwilling to invest in comprehensive programming or allow programming at all.



#### **Needs**

- The top three needs expressed by survey respondents were targeted funding, promising curricula and resources, and training on CSA prevention.
- Focus group participants also shared a need for assessment and evaluation tools, and curricula/resources that meet community-specific needs (LGBTQ, developmentally disabled, Spanish-speaking).
- Foundational knowledge of CSA and primary prevention varies widely across the state. Even for those more comfortable with these concepts, training on the intersection of CSA dynamics and primary prevention principles is needed.
   Additionally, we know that programs experience high turnover, so ongoing training needs will include both foundational and advanced topics.





#### **Agency and Staff Investment in CSA Prevention**

- 90% of survey respondents reported that CSA is a specific focus within their agency's prevention plan and over 75% reported that their agency had been engaged with CSA prevention for more than 5 years.
- Many program staff have shared their passion for protecting children and have expressed interest and excitement in new CSA prevention curricula.

#### **Conclusions and Future Directions**

Through information collected from our survey, focus groups, and continuing conversations with those in the field, WCSAP is confident that Washington State programs are in a great place to move the primary prevention of child sexual abuse forward. WCSAP wants to support programs in responding to the needs of their communities and engaging them in meaningful primary prevention approaches that will be effective in creating community change.

We found that communities and sexual assault programs across the state have varying levels of primary prevention readiness. This indicates the need for continued efforts to improve community awareness and systems coordination. Improving community and criminal justice system responses to CSA will help to eliminate some of the barriers that programs identified this year. These efforts will also help lay the foundation for primary prevention. We recommend that sexual assault programs create a plan to outline the intent and goals of their CSA programming in order to identify the appropriate approaches and best uses of their resources.

In this last year, WCSAP offered a series of CSA primary prevention training opportunities to address some of the requested needs we heard from the field. In order to maintain knowledge levels and bridge any remaining gaps, we will continue to provide trainings and offer one-on-one support to programs doing this work.

During our research, WCSAP identified the curriculum *Where We Live* as one of the most promising and accessible tools to use for primary prevention programming. We culminated our efforts this year by providing two train-the-trainer opportunities that allowed for nearly 40 program staff to get hands on experience with the curriculum.



Over the next year, WCSAP will support Washington State programs in their efforts to implement this program. We will also be providing in-depth support to several programs through a Pilot Site and Technical Assistance project.

In addition to supporting curriculum implementation, WCSAP prevention and CSA staff will continue to collaborate in an effort to promote a comprehensive approach to CSA prevention. By highlighting the intersections of our work and continuing to prioritize CSA programming and services, we can assist agencies in strengthening their intervention, awareness building, and primary prevention efforts.

We look forward to our upcoming work in this area and are excited to help programs engage communities in the primary prevention of CSA. We expect to further our progress through the implementation of *Where We Live* in Washington and will continue to share the successes, challenges, and lessons learned with the field. WCSAP is grateful for the input, expertise, and energy shared by the sexual assault program staff in our state and beyond, which has served to guide and motivate our work on this issue.



# **Appendix: CSA Prevention Focus Group Questions**

## **CSA Knowledge**

- What does CSA look like in your community? What is the community response?
- What are root causes specific to CSA in your community?

#### **Community Assessment**

- Have you done a formal community assessment around CSA?
  - o If yes, what did you ask? What did you find out?
  - o If no, what would you need to do one? (model, time, TA)

# Working with children

• When doing education programs with children, are you getting many disclosures?

## Working with communities

- When you receive community requests, are they usually for awareness (one or two times) or for more comprehensive prevention?
- What do you think your community's readiness is for prevention?
- How is your community responding/receiving your efforts?

## **Curricula & Programming**

- What formal curricula are being used? (name, some description of how it is structured, # of sessions, audience, and consistency with public health approach and the 9 Principles of Prevention)
- If you have created your own program, where do components of a program come from? (same questions as above)
- If you have been collecting data on implementation and effectiveness, what have you found?

#### **Barriers & Resources**

- What do you think is creating the community norms of silence around CSA?
- Who is not buying-in around CSA and CSA prevention in your community?
- What areas of staff or organizational capacity are problems?
- What tools do you need to do this work?
- What type of training on CSA do you need?
- What type of training on CSA prevention do you need?
- What culturally specific materials would be most useful?

#### **Future Directions**

• What do you envision for the future direction of CSA prevention in Washington?