



Introduction to the Primary Prevention of Child Sexual Abuse

In the last few years, there have been increased requests for and research directed towards promising practices for preventing child sexual abuse (CSA). The emergence of this movement focus has prompted WCSAP to prioritize exploring the state of CSA primary prevention across the nation and in Washington State. In an attempt to pool CSA prevention resources and frameworks from across the nation, WCSAP staff identified programming gaps occurring in national dialogue and reviews – not surprisingly, the same gaps were found to exist upon completing assessments of programming statewide. Many of the tools that preventionists can access fill the need for awareness and early identification or risk reduction programs, yet do not meet the criteria for primary prevention programming. Additionally in our statewide assessment, we learned programs are interested in training and resources that are tailored to primary prevention.

In this resource document about CSA primary prevention, we are focusing on programs and approaches that address the abuse of children in situations where there are significant age differences and/or power disparities. While we know that peer-on-peer sexual violence also constitutes abuse, we have chosen to narrow our focus based on where we have identified gaps in knowledge and resources.

Overview of Primary Prevention

What is primary prevention? The simple answer is that it means preventing violence before it occurs. Not raising awareness, reducing risk, or better supporting survivors – but changing conditions that allow for or support sexual violence to occur. While all of these areas are important, this resource document is focusing largely on conceptualizing primary prevention. In order to do this, we must review the frameworks that guide this work.

The term prevention is applied in many contexts. Often it is classified into three types: primary, secondary, and tertiary. Primary prevention focuses on stopping sexual violence before it starts. Secondary prevention aims to reduce potential short term harm that can result from sexual violence by improving how people respond to survivors, ensuring access to services, and raising awareness/educating the community. Tertiary prevention aims to reduce further harm to survivors.

In order to contextualize the concept of primary prevention, the phrase “moving upstream” has been widely used as a metaphor. This metaphor essentially describes the process by which we identify and deconstruct the root causes of an issue or problem in order to better understand the ways in which we can stop it from happening. In this story, we use the idea of people falling into a river. While one person can heroically jump in to save the fallen person, we find that this is a solution with limited impact. As more and more people fall in to the river - many more than can be rescued by a single person - it becomes apparent that attention upstream is required to find out why people are falling in the river and to eliminate whatever is causing it. In this story there are many easy solutions or root causes that can be identified – for example, the bridge that needs repair. While sexual violence is much more nuanced and personal, this story helps illuminate the concept of unveiling root causes of a problem and dismantling the mechanisms which allow this problem to exist in the first place.

The approach of getting to root causes benefits survivors, communities, and sexual assault programs. This allows us to message preventing sexual violence to our communities in a way that shifts the burden off of victims to protect themselves and instead looks to communities to stop sexual violence. Through community education about root causes we are able to reduce victim blaming and community silencing. Additionally for sexual assault programs, this is a more sustainable approach to the work since it does not rely solely on social services but asks communities to take ownership of the issue and get involved in changing the climate. Once communities become engaged with this work, we can begin to change the conditions that contribute to a culture that supports and allows for sexual violence. By doing so we are more likely to reach our desired long term outcome.

Primary Prevention Paradigm

In our field we consider sexual violence to be a public health problem. The public health approach views sexual violence as a collective health problem; therefore it benefits all of society to prevent it. In order to be most effective at creating change, this approach encourages work that is designed to reduce risk factors for perpetration and promote protective factors. There is a gap in the research around protective factors; therefore efforts have been largely centered on reducing risk factors and underlying causes of perpetration. This emphasis on preventing perpetration also helps



to take the focus off of victims to protect themselves and shifts the accountability to communities.

Once we understand that sexual violence is a public health problem, we can start thinking about what is needed to create change in individual actions all the way to larger societal norms. Sexual violence is a complex issue; it's not due to just one reason but instead it's woven into our social norms and then reinforced by others. In order to better understand the process of behavior change we use the Social Ecological Model. There are four levels of this model: individual, relationship, community, and societal. Essentially people are like human sponges – we soak up information that shapes our behavior. We do this from a combination of individual experiences, modeling behaviors and creating values from our friends and family, observing the norms in our close environment such as school, work, or recreation group, and finally through societal structures such as laws and pop-culture. When working towards primary prevention, it is most effective to create programs that address as many levels of the Social Ecological model as possible.

The last component that we rely heavily on in our work is the structure of programming. Most often we use "The 9 Principles of Effective Prevention Programs" to guide our work. Research was conducted to determine characteristics of effective prevention programs and was synthesized into a list to help with program structure. Since we know sexual violence is complex and resources are limited, it is important we design programs that will be effective and support true social change.

Overview of Child Sexual Abuse

Child sexual abuse (CSA) can be defined as the sexual touching or penetration of children, and this generally includes attempts as well as completed assaults. CSA also includes non-contact behaviors that are illegal and/or abusive, such as exposure, peeping, taking explicit photographs, or sexual harassment in the form of talking in a sexually inappropriate or intimidating way.

Children and youth are at very high risk for abuse. In order to better prevent CSA from occurring, we must understand some of the root causes and community norms that contribute to this violence.

- Our culture often promotes a sexualized image of children and youth. This contributes to victim blaming and the normalization of CSA by individuals and communities.
- There is a lot of shame and secrecy, not only around CSA but also around discussions of healthy sexuality in general.
- Intergenerational abuse often contributes to an acceptance of CSA in families and communities.
- There is a general lack of accurate information about CSA which perpetrators capitalize on to groom victims and communities. Additionally, even when adults understand the problem, there is a gap between awareness and action.
- Unsupportive and inadequate system and community responses discourage offender accountability and contribute to silence and shame.
- Children are typically given limited power, agency, and credibility.
- Similar to sexual violence broadly, the use of violence and the abuse of those who are vulnerable is a means of gaining power.

In our work to support child survivors and change community norms related to CSA, it is important to consider why children do not disclose or why they tell and then recant. These factors can highlight many of the core dynamics of child sexual abuse. One of these significant factors is the process of grooming. This is an intentional, often long-term process undertaken by perpetrators to gain trust and build relationships to facilitate abuse. It is often thought of in terms of the child, but grooming of the family and community is equally important to creating a situation in which abuse can occur, disclosures are doubted or minimized, and perpetrators are not held accountable.

CSA has many impacts on children, families, communities, and society. There are three primary factors that influence the impact that sexual abuse can have on a child:

1. The child's previous experiences and history of other trauma
2. Nature of the sexual abuse and the child's reaction (for example, the child's relationship to the perpetrator, the duration of the abuse, whether the child believed that s/he was in extreme danger)
3. Responses by others, especially caregivers, upon disclosure of abuse

It is important that we do not promote the idea that CSA leaves children irreparably damaged. However, we also do not want to minimize its potential short-term and long-term effects. Sexual abuse will affect every child differently. It can interfere with a child's typical developmental path (emotions, coping, relationships/boundaries, self-



esteem). Generally, the sooner they have the needed support and resources to get back on that path, the better the outcomes.

Overview of National Review of CSA Programs

In 2011 the National Sexual Violence Resource Center conducted a review of existing CSA prevention programs and the available research on their effectiveness. This information helps us to be clear about the goals and outcomes of these programs so we can be intentional about how and why we use them. The research was divided in to four main audiences of CSA programming: children, parents, professionals, and the general public.

The programs that were aimed at children were most often found to apply a risk-reduction approach. Usually the goal was to teach children to recognize CSA, provide skills to avoid abuse, and encourage reporting. They are most effective when they are broken into multiple sessions, engage children through modeling, group discussion and role-playing, and incorporate parents. One of the widely used tools for this audience is the curriculum, *Talking about Touching*. This curriculum, and others similar to it, was found to have positive outcomes such as increased disclosures, reduced self-blame and increased knowledge and use of self-protective skills. However, research has not shown that these programs ultimately prevent CSA.

The programs aimed at parents were very encouraging. The goal of these programs was most often teaching parents how to protect their own children from sexual abuse, educating their children about abuse, recognizing abuse and responding appropriately, and strengthening healthy family dynamics. While all of these concepts are important in preventing CSA, the structure of the programs was not typically consistent with best practice. Some of the identified barriers to more in-depth parent engagement were time, belief they already understand the problem, disbelief their children are at risk, and feelings that CSA cannot be prevented. Parental gains include increased comfort in and knowledge about talking to their children about sexual abuse. Programs aimed at parents have shown promise in raising awareness and have potential for primary prevention outcomes.

Programs aimed at professionals were usually designed for adults that work with children such as teachers, healthcare providers, and daycare staff. The goals of these programs were usually to teach adults how to educate children about CSA and how to



identify and report CSA. There has been limited evaluation of these programs but there are some positive impacts. Providers expressed increased knowledge and more confidence in making a mandated report. These programs are useful in improving CSA response and encouraging early intervention.

The programs aimed at the general public used educational presentations and media campaigns. The goals of these programs are to increase general knowledge about CSA, change behaviors that encourage sexual abuse, and encourage bystander action to prevent and intervene in sexual abuse. Research has shown that people who feel responsible to act *and* feel comfortable in their intervention skills are more likely to do so, therefore programs should include opportunities for participants to learn and practice these skills.

One of the common programs aimed at the general public is *Stewards of Children*. This program engages the community through PSA's, a website, informational materials, and a training session. The training is aimed at recognizing, preventing, and responding to abuse. While this program includes a large portion of the identified necessary content, it lacks the program structure for a primary prevention approach and does not allow for parents to practice skills. Multiple evaluations of this program have found improvements in attitudes about CSA and an increase in adult protective behaviors.

Another commonly used source for this audience is *Stop it Now*, which incorporates a state-based media campaign, national helpline, and trainings aimed at increasing social and offender responsibility and awareness, and addressing problematic or abusive behavior. This is a very useful public awareness and resource tool. Evaluation has found increases in knowledge and willingness to take action, increases in helpline calls, and reduced incidence of reported CSA. Both of these programs, and others with similar structure, are useful components of a comprehensive approach to CSA.

Conceptualizing the Primary Prevention of CSA

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.

The national findings on existing CSA programs are helpful in locating resources to raise community awareness, improve early identification and reporting of CSA, and support children and families that experience CSA. However, there were limited examples of the components of a primary prevention approach. Therefore, we suggest the following list of components to guide programs in this approach:

- 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
- Engaging communities across the Spectrum of Prevention

The combination of primary prevention programs, community awareness, and appropriate survivor response are necessary for a comprehensive approach to CSA.