

PREVENTION OF CHILD SEXUAL ABUSE: AN ANALYSIS OF ISSUES, EDUCATIONAL PROGRAMS, AND RESEARCH FINDINGS

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ABSTRACT

Although the main targets of the effort toward the prevention of child sexual abuse need to be the conditions that cause and support it, a prominent and popular aspect of the prevention effort that has emerged in the past decade involves educational programs aimed at children. Most of these programs are implemented in the schools. The goals of these programs are to provide children with knowledge about sexual abuse, including ways to respond to abusive approaches, and to aid children in disclosing abuse if they have been victimized. Although well intentioned, there is no published research support for the conceptual assumptions (largely involving empowerment) upon which the prevention education programs are based and as yet, sparse empirical support for their effectiveness. Thus, the decision of a school district to adopt and implement a sexual abuse prevention education program is a serious one. School psychologists are in a key position to inform decision makers about the potential and the limitations of child sexual abuse prevention programs and to assist in developing, implementing, and evaluating more effective school-based programs. In addition to discussing general issues about the etiology of child sexual abuse and the relationship of etiology to prevention efforts, five questions are addressed: (a) What is the nature of child sexual abuse prevention programs? (b) Do prevention programs prevent children from being sexually abused? (c) Do prevention programs identify children who have been sexually abused by facilitating disclosure? (d) Is it fair and reasonable to expect children to participate in efforts to prevent their own sexual abuse? (e) What issues do school psychologists need to consider in developing, implementing, and evaluating school-based child sexual abuse prevention programs? Data are presented on the nature of child sexual abuse prevention programs from a research study that systematically evaluated 41 commercially available written materials on child sexual abuse prevention.

Child sexual abuse has been widely recognized in the past decade as a prevalent and detrimental traumatization of children. Although estimates vary, it has been reported that as many as 22% of Americans report being sexually abused as children (Crewdson, 1988). Serious initial and long term emotional and behavioral effects result from child sexual

abuse (Browne & Finkelhor, 1986). Primary emotional effects include feelings of guilt, fear, depression, anger, and hostility. Behavioral effects include persistent, inappropriate sexual behavior with self, peers, younger children, or toys; detailed and precocious understanding of sexual behavior; regressive behaviors; sleep problems; inadequate peer relations or

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inability to make friends; overly compliant or acting-out behavior; pseudo-mature behavior; school problems, including inability to concentrate and sudden decreased school achievement; running away from home; suicidal ideation or actual attempts; and in girls, an extraordinary fear of men or overtly seductive behavior. Long term effects include a lack of basic trust, low self-esteem, pervasive feelings of helplessness and depression, and self-destructive forms of behavior (Vevier & Tharinger, 1986).

Fortunately, steps have been taken in many communities to identify children who have been sexually abused and to secure resources and therapeutic programs to assist these children and their families with the recovery process. School psychologists and teachers have been challenged to be involved in the response to child sexual abuse (Brassard, Tyler, & Kehle, 1983; Caterino, 1987; Downer, 1986; Tharinger & Vevier, 1987; Vevier & Tharinger, 1986). An additional movement has grown out of the awareness of the common and traumatic nature of child sexual abuse — a movement designed to try to prevent it (Finkelhor, 1986; Nelson & Clark, 1986). Although the most important targets for prevention of child sexual abuse are the conditions that cause and support it (Conte, Rosen, & Saperstein, 1986), much of the initial effort has been aimed at educating children about ways they can resist and escape sexual abuse and at promoting disclosure. Programs designed for children began to appear in the late 1970s, and federal funds for the study of such programs were provided in 1980 (Plummer, 1986). Currently, child sexual abuse prevention education programs are being implemented across the nation, most within the schools. It has been estimated that school-based programs have reached over one million children (Plummer, 1986).

Although the intentions of the developers and implementers of child sexual abuse prevention programs are to be applauded, the movement is in its infancy and there is no research support for the conceptual assumptions upon which the programs are based and as yet, sparse

empirical support for their effectiveness (Conte, 1984; Finkelhor, 1986; Wurtele, 1987). Although it commonly has been maintained by the implementers of prevention programs that child sexual abuse prevention programs are effective and that their total effects cannot accurately be measured (Plummer, 1986), it is professionally irresponsible to ignore the need for systematic development, implementation and evaluation of these programs, including attending to possible unintended effects of the programs on children, implementers, and society as a whole. In the rush to respond to the prevalence of child sexual abuse, it appears that many essential preliminary steps in the construction of prevention education programs have been ignored or skipped. The result is that there is a need to examine critically the assumptions, effects, and unintended consequences of child sexual abuse prevention programs (Conte, Rosen & Saperstein, 1986; Krazier, 1987; Trudell & Whatley, 1988).

Teachers have been the school personnel primarily targeted in terms of prevention efforts (Davis, 1986; Downer, 1986; Trudell & Whatley, 1988). However, school psychologists, given their rather extensive backgrounds in psychological and educational theory and research, as well as in measurement, assessment, and intervention, are in a unique position to educate policy makers in the public schools about the potential and the limitations of child sexual abuse prevention programs. School psychologists also are key personnel to be involved in developing, implementing, and evaluating more effective school-based child sexual abuse education programs. In addition, school psychologists can play a central role in reinforcing the idea that programs aimed at children are merely one component of a whole array of needed prevention efforts.

The aim of this article is to increase school psychologists' knowledge of the complex issues involved in preventing child sexual abuse, to review and present findings on the nature of sexual abuse prevention programs aimed at children, to review empirical research findings on

the effectiveness of the programs, and to address the significance of unintended consequences of the programs. The following five questions explicitly are addressed: (a) What is the nature of child sexual abuse prevention programs? (b) Do prevention programs prevent children from being sexually abused? (c) Do prevention programs identify children who have been sexually abused by facilitating disclosure? (d) Is it fair and reasonable to expect children to participate in efforts to prevent their own sexual abuse? (e) What issues do school psychologists need to consider in developing, implementing, and evaluating a school-based child sexual abuse prevention program?

ETIOLOGY OF CHILD
SEXUAL ABUSE AND ITS NECESSARY
RELATION TO PREVENTION EFFORTS

What will lead to a decrease in the incidence of child sexual abuse? To prevent an act from occurring or to decrease its incidence, it is necessary to understand the causes or factors that lead to the occurrence of the event. The model of etiology that has been most helpful in promoting an understanding of what factors contribute to child sexual abuse, and influential in directing prevention efforts is that of Finkelhor (1984).

Finkelhor's Model

Finkelhor's model was developed from an extensive review of the individual/psychological and sociological/cultural factors that have been proposed as contributing to child sexual abuse. The model hypothesizes four preconditions that need to be met for the sexual abuse of a child to occur: Precondition 1 — a potential offender must have motivation to sexually abuse a child; Precondition 2 — a potential offender must overcome internal inhibitions against acting on the motivation to sexually abuse a child; Precondition 3 — a potential offender must overcome external inhibitions against acting on motivation to sexually

abuse a child; and Precondition 4 — a potential offender must overcome or undermine the resistance of the child. It is proposed that all four preconditions must exist for abuse of a child to occur.

For Precondition 1, individual/psychological explanations include the possibilities that the offender may have arrested emotional development, may be re-enacting childhood trauma, may have been exposed to modeling of sexual interest in children by someone else, and may have inadequate social skills. On the sociological/cultural level, it is offered that there is a societal requirement for men to be dominant and powerful in sexual relationships, that child pornography is available, and that children are portrayed erotically in advertisement.

For Precondition 2, individual/psychological explanations include the possibilities that the offender may use alcohol or have an impulse disorder, and on the sociological/cultural level, social toleration of sexual interest in children, weak criminal sanctions against offenders, and social toleration for deviance committed while intoxicated.

For Precondition 3, possible individual/psychological explanations include that the child's mother may be physically or psychologically absent and that the child may not be adequately supervised, and on the sociological/cultural level, an erosion of social networks and lack of social supports for the mother.

For Precondition 4, individual/psychological explanations include the possibilities that the child may be emotionally insecure or deprived, may lack knowledge about sexual abuse, that there may be a situation of unusual trust between the child and the offender, or that coercion may be in effect. On the sociological/cultural level, unavailability of sex education for children and social powerlessness of children are offered as explanations. Finkelhor's model emphasizes the point that the etiology of child sexual abuse involves the transactions of aspects of the offender, the child, the offender's family, the child's family, and society.

What Efforts Will Lead to a Decrease in the Incidence of Child Sexual Abuse?

According to the above model, the incidence of child sexual abuse will be decreased by targeting the individual and societal conditions that lead to motivation to sexually abuse a child, that allow for a potential offender to overcome internal and external inhibitions to sexually abuse a child, and that allow for a potential offender to overcome or undermine the resistances of a child. Some of the needed changes are societally-based and would seem to include the following actions: obtaining federal or state government support and funding to provide children and the adults who care for them the resources necessary to be safe; providing the message that children are not the property of adults and that child sexual abuse is not acceptable; providing the message that alcohol or drug use does not excuse behavior; promoting women's equality and social influence; promoting healthy families where children feel emotionally secure. Changes in societal conditions are difficult and slow in coming as they are deeply embedded in American culture (Conte et al., 1986). In addition, "While many prevention professionals recognize that fundamental change in power relationships in families and in society from a sexist to egalitarian distribution will be necessary to prevent sexual victimization, not enough has been done to link political and cultural life and sexual victimization" (Conte et al., 1986, p. 153).

Other needed changes are individually and interpersonally based, although they are influenced by societal attitudes and economic priorities. They include such efforts as: encouraging disclosure by children so offenders (who also may be victims) can be identified, prosecuted, and convicted; providing treatment for offenders with the goal that they will not re-offend; providing treatment for victims so they can begin to recover from the trauma and not become offenders, be revictimized, or fail to protect their own children from being victimized; providing intervention for caretaking, non-sexually offending

parents (who also may be victims) so they can begin to recover and protect and support their children; and identifying and providing intervention to youth who present with early indication of becoming offenders.

Prevention Efforts Aimed at Children Examined

It is proposed in Precondition 4 of Finkelhor's model (i.e., that a potential offender must overcome or undermine the resistance of the child) that the child's lack of knowledge of sexual abuse and the social powerlessness of children are contributing factors in the etiology of sexual abuse. In response to these factors, programs have focused on children themselves with the message that sexual abuse is partially a function of children's ignorance, their lack of assertiveness, and their lack of power. Although the effort focused on children always has been somewhat controversial, it also has been viewed as having the potential of reaching a large number of children, short-circuiting some abuse before it occurs, increasing the number of victims who get help, and being cost efficient (Finkelhor, 1986). In addition, Finkelhor states that the logic of prevention has grown out of experience working clinically with victims of sexual abuse and that such experience has suggested that many children could have been spared substantial vulnerability and suffering if they had had simple pieces of information, for example, about their right to refuse sexual advances or about the inappropriateness of the behavior in which an adult was engaged (no empirical findings are given or referenced). Thus, this hopefulness has been a catalyst for many of the prevention education programs targeted at children.

As is demonstrated in detail in a later section, the typical method of these programs is to provide children with knowledge about sexual abuse, often without providing knowledge and education about sexuality, and to empower children to escape or resist abusive approaches. However, the concern is raised (and discussed more fully later)

that it may not be appropriate or effective to empower children to prevent themselves from being sexually victimized. An examination of the explanations offered under Precondition 4 of Finkelhor's model reveals that the child's lack of knowledge about sexual abuse and the social powerlessness of children are only two of the six contributing factors presented in the model. The other factors include a child who is emotionally insecure, needy, unsupported or deprived, a child who has an unusually trusting relationship with a potential offender (e.g., a parent-child relationship), a child who is being coerced, and a child who has not been educated about sexuality. A child under these conditions is likely to be more at risk than a child who lacks knowledge about sexual abuse and who is among the ranks of the powerless. In other words, it is doubtful that providing knowledge about sexual abuse and instruction about saying no will counter the emotional insecurity, trusting relationship, possible coercion, and lack of knowledge about sexual thoughts, feelings, and behavior that are the experiences of many vulnerable children. Furthermore, children who are emotionally abused, who are disabled or disadvantaged, or who have poor relationships with their parents are all thought to be even more at risk (Finkelhor, 1986). Attempts to empower vulnerable children to resist abusive approaches may even be harmful, as it may place them in increased danger and may contribute to self-blame if they are unable to prevent or stop the abuse. These concerns, as well as an emerging cautious approach to sexual abuse educational programs for children, are discussed below.

A CLOSER EXAMINATION OF PREVENTION PROGRAMS

In this section, five essential questions for school psychologists are addressed. In responding to Question 1 about the nature of child sexual abuse programs, results of a research study are reported that evaluated 41 commercially available written materials on prevention of child sexual abuse. The study was undertaken

because reviews of program materials to date have been limited to broad descriptions of program dimensions (Conte et al., 1986; Finkelhor, 1986; Wurtele, 1987) and a more systematic and specific analysis was desired. For the review, 46 written programs (books and curricula), targeted for children, teenagers, parents, teachers, and mental health professionals were evaluated systematically, using a protocol developed explicitly for the project (available from the first author). Materials for the review were obtained primarily by writing to authors and publishers. Most of the materials were purchased, although some were donated.

The materials reviewed are not presented as being an exhaustive sample, as it was not possible to review all materials currently in existence in that an estimated 400 to 500 curricula have been developed (Plummer, 1986). The results of the quantitative analysis presented below (see Table 1) are based on 41 of the 46 program materials; 22 (16 books and 6 curricula) designed to be used by children with adults, 8 (5 books and 3 curricula) to be used by teenagers with adults, and 10 (all books) to be used by adults alone. The remaining five materials were designed to be used by children or teens alone, and were not included in the quantitative analysis because of the small group sample size. Materials for adults were included because they are designed to provide an adult, typically a parent, teacher, or mental health professional, with information about communicating with children or adolescents about sexual abuse. The titles, authors, and publishers of all of the 46 materials reviewed, organized by targeted audience, are listed in an addendum at the end of this article. In addition, a narrative summary of each of the 46 materials is available from the first author (Tharinger, Laye-McDonough, Jamison, Vincent, Hedlund, & Friend, 1988).

The 41 materials for the quantitative analysis were reviewed and scored by four graduate students in Educational Psychology who were familiar with the child sexual abuse prevention literature and who had helped to create the protocol. To obtain information on the reliability of

the review process, 50% of the materials were reviewed by two reviewers, and 91% agreement was obtained. Data analyses were descriptive, consisting of computing frequencies of the nature of sexual abuse, the concepts, the conceptual framework, and the sexual language presented in the materials (see Table 1). A developmental, descriptive analysis of the definitions of sexual abuse specified in the materials also was conducted.

Question 1: What is the Nature of Child Sexual Abuse Prevention Programs?

Three recent, descriptive reviews of sexual abuse education programs directed at children are available in the literature (Conte et al., 1986; Finkelhor, 1986; Wurtele, 1987). The review of Conte et al. addressed program dimensions such as content, length of the program, occupation of the trainer, array of materials and training formats, types of abuse covered, assertiveness and self-defense skills, the cognitive focus of the programs, appropriateness of the content, and quality assurance of the programs. Finkelhor's review included a description of the intended audience (i.e., children, parents, and professionals), a discussion of the relationship between sexual abuse prevention and sex education, conceptual dilemmas, and organization issues. Wurtele's article covered mode of presentation (printed materials, theatrical performance, lecture/discussion, audiovisual materials), content (terminology, children's rights, and skills training), audience characteristics (age, sex, SES, culture, and providing for children who have been abused), program length, trainer characteristics, and results of program evaluation research. In addition, a recent article by Trudell and Whatley (1988) focused on the dilemmas present for teachers in implementing school-based sexual abuse prevention programs. The authors described problems inherent for teachers in using predeveloped materials and addressed the issue of teaching sexual abuse prevention without providing sexuality education.

In the analysis presented here, some

of the features of the above reviews are incorporated. However, particular attention is given to the content and conceptual framework of the sexual abuse prevention education programs, and data from the study of written materials is presented. The goals of this analysis are (a) to describe the information that is being presented to children, adolescents, and adults about sexual abuse, (b) to discern the conceptual framework underlying the prevention materials, (c) to examine the concepts of trust and responsibility, and (d) to discuss the issue of child sexual abuse prevention education that is void of sexuality education.

The description of sexual abuse in prevention education programs. The current set of concepts and skills taught in prevention programs are based upon what adults believe will prevent sexual victimization. Although this prevention knowledge is based in part on anecdotal clinical experience, there exists no systematic investigation and report of the processes adults use to engage and maintain children in sexual abuse situations (Conte et al., 1986). Sexual abuse is a very complex and frightening concept, even for adults and professionals. To evaluate the accuracy of the information presented in prevention programs, it is useful to keep in mind the following data about child sexual abuse. Sexual abuse may consist of any one or a progression of the following acts: nudity, disrobing, genital exposure, observation of the child, kissing, fondling, masturbation, oral-genital contact, digital penetration, and vaginal or anal intercourse (Finkelhor, 1986). In addition, children usually know the people who sexually abuse them (Mrazek, 1981). An estimated 77% of reported abusers are parents (57% of the total being natural parents), 16% are other relatives, and 6% are "other" (NCCAN, 1982). In addition, males are reported to be the abusers in 80 to 95% of cases (American Humane Association [AHA], 1982; Conte & Berliner, 1981; NCCAN, 1982). Victims of sexual abuse are most often children of school age (Berliner, 1977; Schultz & Jones, 1983), although

TABLE 1
Content of Sexual Abuse Prevention Materials

Nature of Sexual Abuse	Concepts					
	Materials for Children (n = 23)	Materials for Adolescents (n = 8)	Materials for Adults (n = 10)	Materials for Children (n = 23)	Materials for Adolescents (n = 8)	Materials for Adults (n = 10)
Term "Sexual Abuse" Used	30%	75%	50%	86%	88%	90%
Term "Sexual Assault" Used	17%	75%	70%	64%	76%	100%
Term "Incest" Used	9%	75%	70%	100%	100%	90%
"Touch Continuum" Used	74%	75%	60%	73%	100%	70%
"Confusing Touch" Used	59%	87%	60%	92%	87%	80%
Intrafamilial Abuse Covered	74%	100%	60%	100%	100%	100%
Extrafamilial Known Abuse Covered	83%	100%	60%	78%	100%	100%
Stranger Abuse Covered	65%	88%	40%		50%	80%
Offender Portrayed as "Normal"	87%	100%	50%	65%	0%	0%
Offender Portrayed as Stereotypic	22%	25%	10%	0%	0%	10%
Offender — Male	96%	100%	80%			
Offender — Female	65%	63%	30%	45%	13%	60%
Offender — Youth	74%	100%	80%	65%	63%	30%
Male Abusing Female	96%	100%	80%	44%	13%	0%
Male Abusing Male	74%	63%	50%	35%	63%	60%
Female Abusing Male	48%	50%	30%	30%	88%	30%
Female Abusing Female	24%	40%	20%	17%	63%	60%
Abused at Home	61%	100%	60%	13%	38%	30%
Abused in Neighborhood	65%	100%	50%	13%	50%	50%
Abused at School	35%	38%	20%	4%	50%	50%

cases have been documented from infancy to adulthood (De Francis, 1969). Girls are reported victims of sexual abuse at significantly higher rates than boys, four to one (AHA, 1982; Conte & Berliner, 1981; Kempe & Kempe, 1984; NCCAN, 1982), although data are emerging suggesting that boys may be victims of sexual abuse more often than frequencies based on cases indicate, and that they are abused more often by non-family members than family members (Vander Mey, 1988).

One of the most difficult issues in prevention education programs is how to present the complex phenomena of sexual abuse to children. Its presentation needs to be meaningful and responsive to children's developmental levels and must be sensitive to their need to be protected. To get an indication of how sexual abuse has been described, key terms used and the definitions of sexual abuse provided were examined in the materials reviewed to provide a contrast among descriptions for children, adolescents, and adults. It was found that in the materials for children, 30% used the term "sexual abuse," 17% used the term "sexual assault," and 9% used the term "incest" (see Table 1). In the materials for adolescents, 75% used the terms "sexual abuse," "sexual assault," and "incest." In the materials for adults, 50% used the term "sexual abuse," and 70% used the terms "sexual assault" and "incest."

Of the 10 programs designated for children aged 4 or under (some of the programs extended into the next age range), 6 provided no definition and 4 defined sexual abuse as involving touching, i.e., touching that makes you feel funny, improper touching, someone trying to touch your private parts, and unsafe touching (touching private parts or being made to touch adult's private parts). Of the 13 materials designed for children ages 5 to 12 (some of the programs extended into the next age range), 5 provided no definition; 3 defined sexual abuse as involving touching, i.e., touching private parts, touch in the private zone, and sexual hurt (a grown-up touching the sexual or private parts of your body and a grown-up having you touch his or her

private areas); 3 included touching and concerns about motivation or intentionality, i.e., secret touching, touching or looking at another's private parts without their permission, using touching for one's pleasure when the other doesn't want it; 1 defined sexual abuse as the use of a child for the sexual gratification of an adult or adolescent; and 1 defined sexual abuse as using force, trickery, or coercion to touch or obtain other sexual contact.

Of the eight materials for teenagers, the definitions included aspects of consent, coercion, aggression, and power: (a) when another person forces, threatens, or bribes you into any kind of sexual contact; (b) when an adult or older teenager forces, threatens or bribes you into sexual contact; (c) sexual contact with no consent, possibly with force being used; (d) forced, tricked, or manipulated touch or sexual contact; (e) any form of forced (overtly or by threats) sexual activity, not just intercourse; (f) any sexual contact with a person without his or her consent — it could be seeing a person exposing himself, handling of genitals, oral-genital contact, or intercourse; (g) any unwanted, forced sexual contact, e.g., harassment, exposing, flashing, forcing to pose for pictures, fondling, or rape; and (h) non-mutual sexual contact as a weapon — an expression of hostility, control, aggression, and violence.

Of the 10 materials for adults, the definitions were similar to those provided for teenagers, although in one case more depth was included. In a book for teachers, sexual abuse was defined as the exploitation of a child by an older person for the sexual gratification of the older person. It also was described as a continuum of behavior from verbal abuse to forcible touching offenses ranging from a single encounter with an exhibitionist to confusing occasional fondling by a casual acquaintance, and from years of ongoing abuse by a relative or family member to rape and/or exploitation through prostitution or pornography.

From this descriptive portrayal of definitions, it may be seen that as the ages of the targeted audience increase, so do the accuracy and depth of the definitions.

The greatest difficulty appears to be the depiction of the nature of sexual abuse at a level children can understand. Most of the definitions for children utilized the concept of "touch" to explain sexual abuse. This concept is borrowed from the touch continuum developed by Anderson (1986). The touch continuum includes three categories of touch: good touch (which includes hugs, light ticklings, and kisses), bad touch (which includes kicking, punching or otherwise causing physical pain), and confusing touch (which includes sexual contact and could leave the child confused because sexual contact may feel bad and it also may feel good). The concept of touch and the touch continuum have been influential in a majority of the prevention materials reviewed, regardless of the targeted audience. As can be seen in Table 1, 74% of the programs for children talked about the touch continuum and 59% included a discussion of confusing touch. Of the programs for adolescents, 75% included the touch continuum and 87% covered confusing touch. Of the programs for adults, 60% covered the touch continuum and confusing touch. It remains to be seen if the touch continuum is an effective method of educating children about the complexity inherent in sexual abuse.

A concern about sexual abuse prevention materials has been that they focus on "stranger danger" and depict offenders as sleazy strangers abusing children in a park. However, most of the reviewed prevention materials acknowledged that a family member or other trusted or known person may be the perpetrator of sexual abuse. In the materials for children, 74% mentioned intrafamilial abuse, 83% covered extrafamilial abuse by a known offender, and 65% included stranger abuse (see Table 1). In the materials for adolescents, all of the programs addressed intrafamilial and extrafamilial sexual abuse, and 88% included stranger abuse. In the materials for adults, 60% included intrafamilial and extrafamilial abuse and 40% mentioned stranger abuse. In all the materials reviewed, offenders most often were described as people you would find in normal walks of life and seldom were

described as stereotypical "dirty old men" (see Table 1). In addition, in keeping with current knowledge, offenders were depicted as primarily male, often a young adult, and less often female. The most common depiction was a male abusing a female, with males abusing males next frequently, then females abusing males, and least frequently, females abusing females. Sexual abuse was depicted in all the materials as taking place typically in the home and in the neighborhood, with school related sexual abuse portrayed much less frequently. In the materials reviewed, the ages of the victims of sexual abuse were portrayed to match the ages of children toward whom the materials were targeted.

The conceptual nature of sexual abuse prevention programs — Empowerment. In addition to defining sexual abuse or "touching" in some form and describing possible offenders, nearly all sexual abuse prevention programs attempt to establish three fundamental ideas: that a child's body is the child's "property" over which the child has control (often called body ownership); that a child should trust his or her feelings or intuition as a way of determining whether or not certain touching is appropriate or not; and that a child who is approached or molested must take action, typically described as "saying no" to an abusive adult. In the sexual abuse prevention materials reviewed for children, 86% mentioned body ownership, 64% included trusting one's feelings or intuitions, 100% stressed "saying no," and 73% included teaching other assertiveness skills, such as yelling and running away for younger children and decision making skills for older children and adolescents (see Table 1). In the materials reviewed for adolescents, 88% mentioned body ownership, 75% included trusting one's feelings or intuitions, and 100% stressed "saying no," and teaching other assertiveness skills. In the materials reviewed for adults, 90% covered body ownership, 100% included trusting one's feelings or intuitions, 90% stressed "saying no," and 70% included teaching other assertiveness skills.

Theoretical or conceptual frameworks are not stated explicitly in most sexual abuse prevention programs. However, the implicit conceptual framework underlying the majority of the prevention programs described in the literature and in the materials reviewed is that of "empowerment." Empowerment is represented by the concepts reviewed above, that is, body ownership, trusting feelings and intuitions, and "saying no" and being assertive. Averaging across *all* of the 41 materials reviewed, the theoretical base in 61% of the programs was identified as empowerment (see Table 1). With the exception of 2% of the programs being guided by developmental theory and 2% by learning theory, no conceptual framework could be identified for the remainder of the materials. Considering its prominence in guiding child sexual abuse prevention programs, an examination of the construct of empowerment is necessary.

It is not surprising that empowerment is at the base of most of the child sexual abuse prevention programs since many initial developers of the programs had experience in rape crisis centers or centers for battered women, where empowerment has been a popular construct for enabling women to affect choices in their lives. The term empowerment has appeared with increasing frequency in psychology and mental health literature over the past decade (Swift & Levin, 1987). The concept has captured the imagination of scholars and social activists across multiple disciplines. However, empowerment has no clearly operationalized or consensual definition within the mental health field. It has been suggested that the term "empowerment" has become a catchword among social activists and is applied to a host of political tactics, therapeutic techniques and political principles (Kautzer, cited in Swift & Levin), and this appears to be the case in the area of child sexual abuse prevention. The imprecision in the definition of empowerment and its emotional appeal leads to its use to support many different social programs. Unfortunately, the concept has become overused, even abused,

and the resultant confusion inhibits serious work on its further development.

Empowerment has been discussed explicitly by several abuse prevention professionals (Butler, 1986; Plummer, 1986; Sanford, 1980). Sanford, in her 1980 book for parents on the prevention of child sexual abuse, maintains that "crimes of child sexual abuse are considered in the context of the great discrepancies between the victim's and the offender's power, knowledge, and resources" (p. 36). She goes on to state that the child's best defense against sexual abuse is a sense of his or her own power, knowledge of what constitutes sexual abuse, and resources available for support and protection. Sanford asserts that since the offender plans on an imbalance in each of these areas, without this imbalance abuse cannot take place. Plummer maintains that if children can be informed about sexual abuse and ways to prevent it, they can sometimes be empowered to help avoid or interrupt their own victimization. Plummer contends that it is an adult's responsibility to empower children so if all other prevention methods fail, children will have a last defense against sexual abuse. She believes that "those who are given knowledge, a sense of personal power, and a list of community resources will be enabled to assist in their own self protection" (p. 4). Butler similarly maintains that children must be allowed to feel more powerful in the world. She states that "Programs that teach prevention within the framework of empowerment are premised on the belief that one primary reason children are abused and molested is because they are powerless. Children are potential victims because they are small, vulnerable, without many resources, and with insufficient information or skills to protect themselves" (p. 8).

There have been no published research studies examining the effects of empowering children to ward off sexual abuse and no published research was found by the authors on the effects of empowering children in any domain, although an exhaustive computer search was made of both Psychological and Sociological Abstracts. In addition, no

research or discussion examining developmentally appropriate empowerment behaviors was found in the conceptual papers on sexual abuse prevention education (e.g., Butler, 1986; Plummer, 1986; Sanford, 1980). It seems extremely problematic that key conceptual assumptions of child sexual abuse prevention programs aimed at children are based on a construct that has been borrowed from the adult literature, has mixed conceptual support in the adult literature, and has undergone little conceptual and no developmental analyses. Until further conceptual analysis and research has been conducted, aspects of child sexual abuse prevention programs based on interpretations of empowerment should not be used or used with extreme caution.

Swift and Levin (1987) cite an example of an unsuccessful empowerment effort involving an alternative high school which attempted to empower students and parents through participative decision-making. The failure was cited as due to role inequalities, organizational dynamics, and a fundamental paradox in the idea of people empowering others, that power given can also be power withheld. It is not difficult to imagine similar difficulties being involved in empowering children to prevent sexual abuse within their own dysfunctional families. One of the consequences of failed efforts cited by Swift and Levin is the risk of endangering the target population. The risk is especially high if changes in the power balances are pursued without a full understanding of the formidable and complex forces arrayed against the intended changes. Again, children are the ones who will be endangered by rhetoric to be empowered in situations where they will not be given power. Swift and Levin also caution that because most professionals are among this society's empowered, they must monitor themselves closely so that their efforts to empower others do not, in the end, only serve to empower themselves. This message seems key to professionals who are attempting to empower children who are actual or potential victims of sexual abuse.

Concepts related to trust and responsibility. In addition to addressing sexual abuse or "touching," and the concepts related to empowerment (i.e., body ownership, trusting one's feelings or intuition, "saying no" and being assertive), most child sexual abuse prevention programs include the redefinition of secrets, the availability of support systems, and the understanding that sexual abuse is not the child's fault or responsibility. Secrets are described as sometimes needing to be shared, not kept. The "secrets" concept is coupled with instruction about support systems, that is, the idea that children can turn to a range of persons for help. In the child sexual abuse prevention materials reviewed, 92% of the programs for children included secrets, as did 87% of the programs for adolescents and 80% of the programs for adults. All of the programs included instruction on the availability of support systems, and 78% of the programs for children and 100% of the programs for adolescents and adults addressed the issue that sexual abuse is not the child's fault or responsibility.

In this analysis, the three commonly taught concepts of secrets, support systems, and victim innocence purposely were differentiated from the previous ones dealing with "empowerment." They each concern behaviors related to trust and they each promote disclosure. Consideration of these three concepts and the empowerment-based concepts gives a picture of the complexities inherent in the materials that children are being presented. Children are taught *not* to be silent about sexual abuse, although perpetrators often demand secrecy. Children also are taught to tell someone they trust about the sexual abuse, and if that person does not believe them, to tell someone else. Children are being asked to determine whom they can trust, in the face of a betrayal of trust by at least one person they thought they could trust. Then they are taught that if children are sexually abused, it is not their fault or responsibility. Each of these concepts is essential to promoting disclosure, an essential goal of sexual abuse education programs. However, in addition, children are taught,

or "empowered," to believe that they own their bodies, that they will intuitively know if they have been victimized, and that they should say no and be assertive to ward off sexual abuse. Children in the audience who are victims may feel overwhelmed, confused, and guilty by the content of prevention education programs that attempt to teach them about empowerment *and* disclosure. Again, teaching empowerment-based concepts may negatively affect the vulnerable children they were designed to protect.

Child sexual abuse education void of sexuality education. Allowing children access to age appropriate information about sexual behavior, thoughts, and feelings is crucial to their ability to integrate information about child sexual abuse. Although most people associate sexuality solely with adolescence and adulthood, infants and children are developing sexual beings and they express natural interest and curiosity about their sexuality. However, most adults, in both home and school settings, find it difficult to accept and to allow expression of childhood sexuality, to communicate with children about sexuality, and to provide a positive sexual socialization experience for children (Tharinger, 1987). Given the absence of a context for many children for understanding sexual abuse, genuine concern can be raised about how children process the information presented in prevention programs. The literature on children's understanding of sex and reproduction suggests that young children have considerable difficulty integrating this information and frequently distort, from an adult perspective, the concepts involved (Bernstein & Cowan, 1975). Prevention programs usually have as their goals personal safety, assault prevention, and/or personal empowerment, not sex or sexuality education (Finkelhor, 1986). But can children effectively be taught about sexual abuse and inappropriate sexual approaches without being taught, in a developmentally appropriate way, about sexual thoughts, feelings, and behavior? Why have so many prevention curricula, especially for children, avoided

sexuality education?

It has been suggested that to contend with public squeamishness about sexuality education in the schools, prevention programs have devised various ways for skirting more direct sexual references and discussions (Finkelhor, 1986). It also has been maintained that as part of the attempt to avoid controversy, many materials are marketed under the title of safety education, facilitating their use where sexuality education is not accepted (Trudell & Whatley 1988). Of the materials reviewed, 80% of the programs for children, 100% of the programs for adolescents, and 90% of the programs for adults emphasized personal safety. It appears that sexual abuse prevention educators and publishers are realistic and recognize that if sexual abuse prevention programs were to be linked too closely to sex education, fewer schools would adopt them and fewer children would be educated. However, this separation can become a problem when sexual abuse prevention programs, with vague references to "private parts" and an emphasis on "saying no," constitute the first and possibly only classroom reference to sexuality (Trudell & Whatley, 1988). A sexual abuse prevention program may be the child's first exposure to any sexuality education. The appropriateness of a child's first exposure to the concept of sexual behavior taking place in the context of sexual abuse is highly unfortunate. There is the potential for children to learn that sexuality is essentially service, negative, and even dangerous. In addition, the avoidance of explicit sexual content is likely to be confusing to children because in spite of what adults say, they still do not want to talk in a straight forward manner about sex (Finkelhor, 1986). Lastly, since children often have no practice using words and phrases to talk about sexual activity, disclosure may be hindered.

In the sexual abuse prevention materials reviewed, only 45% of the programs for children, 13% of the programs for adolescents, and 60% of the programs for adults stressed the importance of providing body knowledge (see Table 1). In terms

of language used for sexual body parts, in the materials for children, the term "private parts" was used by 65%, "parts under a swim suit" was used by 44%, "penis" was used by 35%, "vagina" by 30%, "breasts" by 17%, "buttocks" or "bottom" by 13%, "anus" by 13%, and "genitals" by 4%. In the materials for adolescents, the term "private parts" was used by 63%, "parts under a swim suit" was used by 13%, "penis" was used by 63%, "vagina" by 88%, "breasts" by 63%, "buttocks" or "bottom" by 38%, "anus" by 50%, and "genitals" by 50%. These data support the concern previously raised that sexual abuse prevention programs do not sufficiently provide labels for children or adolescents to use when communicating about sexual parts of their bodies.

Question 2: Do Educational Programs Prevent Children from Being Abused?

If the ultimate goal of any program to prevent child sexual abuse is to teach behaviors so that when an adult makes a sexual advance toward a child, the child will act in an appropriate manner by saying no and telling a responsible adult what happened, as is stated by Leventhal (1987), there is no evidence to date that programs have accomplished this goal. In addition, it is not known if sexual abuse programs targeted at children are helping to decrease the incidence of sexual abuse. Research that examines the effectiveness of child sexual abuse prevention programs is still sparse and limited. Available research findings (currently there are 10 empirical, published studies) have been reviewed by Conte (1984), Finkelhor (1986), and Wurtele (1987). Findings and concerns are summarized briefly here.

The populations sampled for prevention research have been children grades K to 6. Boys and girls have been represented fairly equally in all studies. Many samples have been small and non-randomized (Downer, 1984; Plummer, 1984; Ray, 1984) and most designs have used pre- and post-testing for both experimental and control groups. A few included post-tests to examine retention of knowledge (Fryer, Krazier, & Miyoshi, 1987;

Plummer, 1984; Wurtele et al., 1986). Some research projects have designed their own dependent measures and a few have reported reliability coefficients for internal consistency on questionnaires and inter-rater reliability for interviews and vignettes (Binder & McNeil, 1987; Downer, 1984; Saslawsky & Wurtele, 1986; Wurtele et al., 1986). Earlier studies addressed only questions of knowledge gains made by child participants and age and gender effects. More recent investigations have examined additional variables, including a comparison of two types of treatment (Wurtele et al., 1986), the inclusion of a distress scale (Binder & McNeil, 1987), data from parents as well as children (Miller-Perrin & Wurtele, 1986), and data from teachers, parents, and children (Binder & McNeil, 1987).

With one exception (Fryer et al., 1987), the outcome measures have targeted knowledge, attitudes, or intentions to use self-protective actions measured by questionnaires, structured interviews, or vignettes to elicit responses from children and adults. Considering that prevention programs teach knowledge, attitudes, and behavioral rehearsal through role playing, it is not surprising that what is measured in research studies is knowledge. However, it is erroneous to assume that if children have knowledge they will be able to intervene on their own behalf. Results indicate that from participation in sexual abuse prevention programs, children gain in their knowledge about self-protective responses (Conte et al., 1985; Fryer et al., 1987; Swan, Press, & Briggs, 1985; Wolfe, MacPherson, Blount, & Wolfe, 1986; Wurtele, et al., 1986); older elementary-aged children make greater knowledge gains (Conte et al., 1985; Wurtele et al., 1987); children retain knowledge over a 3 month period (Wurtele et al., 1987); parents talk with their children about sexual abuse more following joint participation in a prevention program (Binder & McNeil, 1987); and a behavioral skills training program is more effective than a film alone in enhancing knowledge about sexual abuse (Wurtele et al., 1986).

Fryer et al. (1987) went beyond

measuring knowledge only and measured changes in the children's behaviors by using a simulated stranger to approach the child in a setting in the school. Potential hazards of using simulated strangers are discussed by Conte (1987). Those children who were exposed to the teaching program were less likely than controls to go with strangers. In addition, children in the group who refused to go with the stranger had better pre-intervention scores on a self-esteem measure and better post-intervention scores on a test of knowledge than the children in the group who went with the stranger. This finding regarding self-esteem is not surprising in light of the earlier discussion on factors that increase children's vulnerability to sexual abuse.

Question 3: Do Educational Programs Identify Children Who Have Been Sexually Abused by Encouraging Disclosure?

As a secondary prevention outcome, most programs encourage disclosure of previous or ongoing abuse. Although it is commonly believed and assumed that prevention programs lead to disclosure and there are many anecdotes about children disclosing following participation in a prevention program, findings are rare and usually not published (Beland, 1985; Kent, 1979; Wall, 1983). However, it has been reported that one-sixth of the children attending a particular classroom presentation subsequently revealed a prior sexual assault; of these, one-half had never reported the incident before (Kent, 1979). In addition, Beland (1985) reports that the disclosure rate in schools participating in preventing programs was significantly higher compared to schools not participating. Although these results are encouraging, rigorous and reliable data are needed to convincingly state that sexual abuse prevention programs consistently lead to disclosure and thus identification. Systematic data collection on rates of disclosure needs to be implemented in school-based programs.

Question 4: Is it Fair and Reasonable to Expect Children to Participate in Efforts to Prevent their Own Sexual Abuse?

This question gets to the heart of perhaps the most controversial issue in the prevention movement. The basic issues continue to be whether children can understand the complex concept of sexual abuse in a way that is useful to them and if it is reasonable to expect children to be empowered to respond to approaches of sexual abuse, especially in situations that involve family members and/or threats or coercion. As Krazier (1986) has stated, children are unable to reconcile "bad" touch from "good" people, that is, from people they love.

An analysis of the trends in the past decade of sexual abuse prevention efforts aimed at children suggests that the first response to this question of "Is it fair and reasonable to expect children to participate in efforts to prevent their own sexual abuse?" was a firm "Yes," anchored in enthusiasm and concern rather than in a systematic conceptual and research base. However, experiencing the complexities and dilemmas inherent in asking children to participate in efforts to prevent their own sexual abuse is leading to a second response from prevention educators and researchers; a more tempered and cautious response, such as "It is not fair and reasonable, at least not as it currently is being done." At the Wingspread Meeting of major figures in the field in 1985 reported by Crewdson (1988), all of the leaders were reported to agree that it was unfair to put the burden of preventing sexual abuse on children. Although Conte et al., (1986) stated that "Many professionals involved in sexual abuse prevention programs recognize that ultimately all materials and programs should be viewed as temporary efforts to help children resist and escape abuse until such time as other activities can be successful in changing the conditions which cause and support sexual abuse of children" (p. 153), the question becomes for how long should these temporary efforts be carried out and in what form? As recently stated by Krazier (1986),

"Prevention programs for children are very often created by well meaning professionals as an isolated response to a specific problem without adequately considering or understanding the overall needs of children. They are created from concepts and beliefs that make sense to adults but which consistently are misunderstood by children" (p. 259). Also stated by Krazier, "We need to recognize that prevention efforts can support or damage children in the most fundamental way" (p. 259). An examination of unintended or negative side effects of sexual abuse prevention programs may explicate some of the new found concern and caution.

Possible unintended consequences. Practitioners and researchers have recognized that sexual abuse prevention programs targeted at children may have unintended effects or consequences, often termed negative side effects. Although most of the attention has been focused on unintended effects for the children themselves, such as being distressed or frightened by a prevention program, unintended effects, with serious consequences, also may affect implementers of prevention programs, for example teachers, and society as a whole.

The examination of unintended consequences or negative side effects for children typically has involved observed behavioral changes in children following presentation of a prevention program, such as reluctance to engage in physical contact with adults or changes in children's emotional states (heightened levels of fear or anxiety). Five empirical studies have reported data addressing possible negative effects and the findings are inconsistent. Each study evaluated a different prevention program and used different outcome measures. In a study that utilized a control group and multiple outcome measures, 35% of the children displayed negative emotional reactions and 20% exhibited negative behavioral reactions, based on a parental questionnaire (Kleemeier & Webb, 1986). Along similar lines, Garbarino (1987) studied children in grades 2, 4, and 6 who read the Spiderman comic addressing sexual

abuse issue in 1985 by Marvel Comics in association with the National Committee for Prevention of Child Abuse. He reported that 17 to 50% of the children responded that they were worried or scared afterwards.

In contrast, of a group of K-6th graders who either watched a film aimed at teaching sexual abuse prevention skills or participated in a behavioral skills training program in which the skills were actively rehearsed, the parents of the children reported relatively few negative behavioral changes as a result of the program — 11% of the parents reported negative changes (Miller-Perrin & Wurtele, 1986). Another study evaluated children's and parents' reactions to the 30-minute sexual abuse prevention play entitled *Bubylonian Encounters* (Swan et al., 1985). The children were ages 8 to 11. Only 7% of the parents reported that their child did not like the play, only 5% reported that their child was upset, and none reported that their child felt negative about attending the play. Lastly, and the most free of negative effects, Binder and McNeil (1987) evaluated a school-based child sexual abuse prevention program that consisted of separate 2-hour workshops for children ages 5 to 12, parents and teachers. Following the program, both parents and children reported feeling more confident in the children's capacity for coping with potential abuse situations and no increase in emotional distress was reported by parents following their child's participation in the program. In addition, most of the children reported feeling much or somewhat safer following the program (89%), although 8% of the children reported feeling neither safer nor more scared and 3% reported feeling somewhat more scared. In addition, 94% of the children reported feeling somewhat or much better able to protect themselves, while 6% reported feeling neither more or less able to protect themselves.

In evaluating "negative effects" of programs on children, it is important to assess more than the presence of behavioral or emotional changes or parental satisfaction. There are two other possible unintended effects on children that have

been mentioned in the literature and were referred to earlier. Trudell and Whatley (1988) maintain that to the extent that sexual abuse prevention programs focus on teaching children to protect themselves, they can have the unanticipated consequence of contributing to blaming the victim. The concern is that teaching children to protect themselves may teach them that they are responsible if they cannot or could not protect themselves. Considering the number of children in each audience that have been or will be sexually abused, the concern about victim self-blame is a serious one. Even if programs stress that it is never the child's fault, that message may be hard to reconcile with the message that you can (and should?) say no or take actions to escape. The other unintended effect is that due to all too common separation of sexual abuse prevention and sexuality education, there are concerns that children will learn that sexuality is essentially secretive, negative, and even dangerous.

Unintended consequences or negative side effects for implementers of sexual abuse prevention programs rarely are discussed. However, considering that most prevention programs are being presented in the schools and that most often teachers are the implementers, it is important to address possible concerns (see Trudell & Whatley, 1988). Even when outside experts are used as implementers, school staff must deal with the aftermath of the programs. Unintended consequences for implementers include the possibility that they may feel overwhelmed and unprepared for the responsibility of presenting a program and providing the necessary follow-up, including possibly reporting. Training may not be adequate and support from other personnel and the administration may not be forthcoming. In addition, fears of angry parents, of involvement in the criminal justice system, or of being wrong about, perhaps rendering school staff unavailable to the response to child sexual abuse.

Unintended consequences or negative side effects for society as a result of sexual abuse prevention programs targeted at children are only beginning to be explicitly

addressed. One concern is that "A single-minded pursuit of school sexual abuse prevention programs as a solution can turn attention away from other, perhaps more effective, ways to address the problem" (Trudell & Whatley, 1988, p. 105). A related concern is that by targeting much of the prevention effort at programs for children, a false security will develop. That is, society will slip into the false security that teaching children to say no to sexual abuse approaches is the answer to an extraordinarily complex problem (Crewdson, 1988). Also related is the concern that by targeting children, society is promoting denial that sexual abuse of children is a complex societal problem in need of major societal change. This last point seems ironic in that the existence of child sexual abuse was denied for so long that to deny that extensive efforts and resources are needed to combat the problem sounds too familiar. If these unintended consequences to the child, the implementers, and society are not addressed, it is likely that little will be accomplished in decreasing the incidence of child sexual abuse.

Question 5: What Issues Do School Psychologists Need to Consider When Developing, Implementing, and Evaluating School-based Child Sexual Abuse Prevention Education Programs?

Many of the issues that school psychologists need to consider have been discussed throughout this article. They are examined here in the context of school-based practice. As reviewed, child sexual abuse prevention education programs, typically void of sexuality education and with a goal of empowering children to protect themselves from abusive approaches, are standing on tenuous conceptual and empirical ground. In addition, although research on prevention education programs reports unintended effects consisting of mild to moderate negative emotional and behavioral reactions in children, distressed reactions may not necessarily constitute an undesired side effect that programs can successfully

eliminate. Rather, distress may be part of the process of understanding the serious nature of sexual abuse. Most adults are upset emotionally when they first learn about child sexual abuse. The goal that information be able to be presented to children about sexual abuse, including intrafamilial sexual abuse, in a way that creates no distressed reactions is perplexing. Regardless of the targeted audience, being educated about the sexual abuse of children is disturbing. Thus, the decision of a school district to adopt or to develop and implement a sexual abuse education prevention program targeted at children is a serious one because of the disturbing nature of child sexual abuse and the lack of adequate conceptual and empirical support for prevention education programs. With these points in mind, it is recommended that the goal of school-based sexual abuse education programs clearly be disclosure and identification.

The following guidelines are intended to alert school psychologists to major considerations that must be addressed in reaching a decision to provide sexual abuse education programs. First, the issues must be examined, the local base of support ascertained, and goals set, perhaps by a committee of school administrators, psychologists, counselors, teachers, parents, and community specialists. It is essential that a school district *not* provide prevention education programs in isolation. For example, it is professionally irresponsible to ask a teacher to show a sexual abuse education film in his or her classroom and to consider the job complete. Much preparation needs to occur to set the stage for an effective sexual abuse education effort. School personnel need to be informed about child sexual abuse. They need to be able to recognize signs and identify suspected cases, as well as to feel competent and comfortable responding to disclosures. Administrators need to set and support a clear policy for reporting abuse. School mental health professionals need to be able to respond to disclosures with crisis counseling, to work with protective service and law enforcement agencies, to support and consult with

teachers, to provide direct interventions for children, to educate and consult with parents, and to make referrals to community programs for treatment and support. In short, schools need to be prepared to respond to children who have been sexually abused before they implement prevention education programs (Tharinger & Vevier, 1987; Vevier & Tharinger, 1986).

Following preparatory activities and the determination that a sexual abuse education program is desired, numerous decisions need to be made in the process of planning a program. The format, content, and length of the program must be considered, along with the choice of implementer, means of parent involvement, special population considerations, and targets of evaluation. It is important to avoid being at the mercy of commercially produced programs. A good practice is first to determine what features are desired in a program, then to review a number of available curricula and films, choosing aspects of existing programs that match the plan and developing additional features that are not available. In terms of specific content of the programs, controversy dominates. A key issue to be resolved is the relationship between sexual abuse education and sexuality education. As was reviewed earlier, it is important to provide children with the language necessary to communicate about sexual behavior and *not* to give the message that sexual behavior is usually bad, secretive, or dangerous.

A basic goal of most education efforts is to provide information about the concept of child sexual abuse. However, one of the weaknesses of available programs for children, as opposed to adolescents, is the lack of methods available to present information in a way that is understandable and applicable. Although the touch continuum has been prominent, other avenues need to be proposed and researched. Of the concepts reviewed earlier, it is recommended that the programs include the concepts of body knowledge, secrets, using a support network, and that sexual abuse is not the child's fault or responsibility. Further, it

is recommended that programs *not* include concepts based on empowering children to trust their feelings, to say no, and to be assertive. Empowerment-based concepts may be more applicable with adolescents, although adolescents who are victims are extremely vulnerable and may not be capable of making appropriate judgments and decisions on their own behalf to stop the abuse. Again, adolescent victims need to be encouraged to disclose to and receive help.

The length and duration of a program needs to be considered carefully. One or two presentations is not adequate. Just as teachers rely upon principles based on developmental, learning, and instructional theories, implementers of sexual abuse programs must remember that solid learning requires a breakdown and sequencing of skills over time, as well as reinforcement, review, and practice. Possible program implementers may include staff members, such as teachers or counselors, or consultants or volunteers from local community-based sexual abuse prevention or treatment groups. A major consideration with choosing implementers is the adequacy of their training and whether or not they are in a position to provide ongoing support (see Conte et al., 1986; Finkelhor, 1986; Trudell & Whately, 1988; Wurtele, 1987). In addition, involvement and education of parents is crucial. In healthy families, parents will want to be a part of educating their children about this sensitive topic. In addition, there is some hope that in dysfunctional families at risk for or engaging in sexual abuse, widely educating parents, teachers, and children about sexual abuse may serve as a deterrent. Furthermore, providing education for handicapped or disabled children and adolescents and their parents is essential, as this population is thought to be even more at risk for sexual abuse (Tharinger, Burrows Horton, & Millea, 1988). Lastly, explicit plans need to be made about evaluation procedures for developed programs. Possible targets for evaluation include attitudes of school personnel toward responding to sexual abuse, numbers of disclosures and reports

following the program, and tests of knowledge gains, as well as the consideration of unintended effects. Gathering baseline data on attitudes and on disclosure and reporting rates prior to the implementation of programs is advised as a means to measure change. The key to implementing and evaluating a program is to develop and follow a plan carefully, analyze the evaluation data systematically, and make subsequent program changes based on the evaluation results.

SUMMARY AND CONCLUSIONS

Child sexual abuse is a traumatic and complex phenomena. If a decrease in the incidence of child sexual abuse is to occur, prevention efforts must be targeted at the individual and societal conditions that cause and support it. Sexual abuse education programs aimed at children must be only one, and perhaps a temporary, component of a whole array of prevention efforts that are needed. In the rush to respond to the tragedy of child sexual abuse, many essential preliminary steps in the development of prevention education programs have been ignored or skipped. Consequently, the decision of a school district to develop or adopt and implement a sexual abuse education program is a difficult one. School psychologists who are aware of the issues and research findings on the prevention of sexual abuse and of the foundation and effectiveness of sexual abuse prevention programs aimed at children are in a position to prevent programs from being implemented that are conceptually and developmentally inappropriate for children. School psychologists are challenged to participate in the development, implementation, and evaluation of programs that more effectively address the needs and capacity of children to understand sexual abuse and that promote disclosure and identification of children who have been victimized.

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