

COMMENTARY

Prevention of Sexual Abuse Through Educational Programs Directed Toward Children

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ACATHOLIC MEDICAL Association (CMA) Task Force issued a report in October 2006 on the sexual abuse of children and its prevention¹ in response to initiatives by Catholic dioceses across the country, which were reeling from abuse scandals and have been seeking to improve their sexual abuse–prevention efforts. This report argued strongly against what it called “child-empowerment programs” aimed at preventing sexual abuse. It argued that these programs were “ineffective at preventing sexual abuse” and “inconsistent with the science of emotional, cognitive, neurobiological and moral development of the child.”

This report reiterated a number of arguments that have been raised over 2 decades against classroom-based prevention education by various critics.^{2–5} However, the research evidence and the available meta-analytic reviews do not give much support to these criticisms,^{6,7} and the reappearance of these arguments in a high-profile public policy context merit discussion and rebuttal.

The programs of concern to the CMA and others are programs that instruct children about sexual abuse and sexual victimization and try to impart a variety of messages to children (and their parents) about how to identify abuse, how to react when approached, and what to do in the aftermath of abuse. These programs are typically delivered in school settings or other youth service environments. They typically have components directed toward parents, teachers, and youth service staff, as well. Well-known examples of such programs are “Talking About Touching” from the Seattle-based Committee for Children and the Child Assault Prevention program used statewide in New Jersey. Although the CMA report refers to these as “empowerment” programs, they have a variety of philosophies. I will refer to them as “school-based prevention-education programs” or “prevention

programs,” for short, because this is how they are referred to in the literature more frequently than as “empowerment” programs. Although recent information about their use is not available, studies from the 1990s suggested that a majority of school systems and two thirds of children had been exposed to such programs.^{8,9}

The claim that these programs are ineffective are based on 2 central arguments: (1) that the concepts are misguided, cannot be understood and implemented by children, and fundamentally will not work even if implemented and (2) that no empirical evidence has established that they do work. I will refer to these as the “conceptual” and “empirical” critiques, respectively.

The conceptual critique focuses on several arguments:

- that many of the concepts contained in these programs are complicated and cannot be understood by children at the preschool and elementary school levels;
- that sexual abuse, as a highly motivated activity of devious and powerful adults, intrinsically cannot be prevented or deterred by the actions of children; and
- that some of the concepts and their implementation may actually endanger or harm children rather than protect them.

Abbreviation: CMA, Catholic Medical Association

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The empirical critique argues that research has failed to find that the prevention programs actually prevent the sexual abuse. Among those studies often cited are a 1995 study by me and my co-workers that did not show a lower incidence of sexual assault or decreased injury among children who had been exposed to prevention programs⁸ and a 2003 study by Bolen.¹⁰

ANALYSIS

Complexity of Program Concepts

The CMA and other critics have argued that many of the concepts contained in these programs are complicated and cannot be understood by children at the preschool and elementary school levels.

1. Scholarly opinion about the conceptual basis of the programs indeed is not unanimous, and some scholars have been dubious about concepts used in certain programs such as appropriate and inappropriate touching, child empowerment, and teaching children that they have rights.^{2,3} However, the majority of the published reports on prevention education have supported it.^{6,7,11}
2. A majority of reviews have found that children at all ages do acquire the key concepts that are being taught.^{6,7,11-13} In fact, younger children show more learning than older children.⁶ Although that does not establish that children can necessarily implement them, it is an argument against the broad claim made by critics that the concepts are categorically too complicated to be learned.
3. The critique of the concepts boils down to a claim that some of the concepts are inappropriate for some of the children (eg, younger children). However, this is not the same as an argument that the programs are worthless. Even if the concepts were grasped by only some children (eg, older children), they may be beneficial. Also, some of the concepts, such as emphasis on the importance of telling an adult about an incident, are generally seen as noncontroversial and easy to understand and may be helpful for most children, even if some of the other concepts are complicated.
4. A variety of other school-based programs with very similar theoretical underpinnings have been proven effective in high-quality randomized, controlled evaluations.¹⁴ These include school-based programs to prevent bullying and drug use and to improve interpersonal skills. All of these programs have some components that are cognitively complicated and involve judgments about the intentions of other people, and they all have components that could be described as "child empowerment" in the sense that they try to train children to resist pressures from other, in many cases, more-powerful people. The scientific literature

is conclusive that this type of approach works as a general prevention strategy.¹⁵

In distinction to the critics' conclusion that the concepts are not appropriate or learnable, a fairer assessment of the scientific literature is that although there has been some scholarly criticism of the concepts, the balance of the literature suggests that young people can learn and understand many or most of the program concepts.

Impossibility of Children Preventing Assaults

The CMA and various other critics have argued that sexual abuse cannot be prevented or deterred by the actions of children. "Children are vulnerable to victimization because they are smaller, weaker, and less sophisticated compared with the larger, older, aggressive, and crafty offenders."^{1(p14)} This argument is based, in part, on studies of incarcerated offenders who said they were highly motivated to abuse, unlikely to be deterred, and used forceful or sophisticated strategies to engage their victims.¹⁶

This characterization of abusers and abuse dynamics is a great oversimplification, and it fails to accurately represent the wide variety of offenders and offense situations.¹⁷ In many of offense situations, prevention strategies could work in principle.

1. Up to one third of sex offenses against children occur at the hands of other youth and peers.¹⁸ Some adult, as well as juvenile, offenders abuse children on impulse or in a situation of opportunity without considerable planning.^{19,20} Some sex crimes occur in abduction situations,²¹ and most authorities and parents believe that it is useful to teach children to resist child abductions. Many offenders, including adults, have some ambivalence or fear about what they are doing, including a fear of getting caught.²⁰ Even highly motivated offenders report that they do make discriminations among potential victims on the basis of how amenable they may be to their manipulations.²² In all these situations, it is possible that some of the resistance skills taught by prevention programs may make a difference between a child being victimized or not.
2. Even if they were only successful in a relatively small percentage of situations, given the widespread occurrence of sexual victimization, resistance and other prevention strategies might be of assistance to a considerable number of children.
3. The impression that offenders are unstoppable is largely based on conversations with and information from samples of offenders who are not representative of the full spectrum.²³ Correctional and treatment populations are not representative of all offenders. They are individuals who have committed more serious and more repetitive offenses. Many of the po-

tential offenders who might most be deterred by children's resistance are not incarcerated and may not even have been caught.

The claim that sexual abuse cannot ever be prevented by children is far too categorical. Children may be able to prevent some or much sexual abuse. Even if difficult, children themselves would undoubtedly prefer to have the knowledge and skills to try. We give children skills for other challenging and unequal prevention situations such as stranger abduction. Ultimately, the arguments about how much sexual abuse can be prevented are currently in the realm of speculation. Research is needed to settle the issue, and little of that research has yet been done. However, it is certainly premature to abandon the strategy solely on the basis of speculative arguments.

Very importantly, school-based prevention-education programs have additional, important objectives beside those of preventing victimization, including promoting the reporting of victimization, reducing the stigma and self-blame that victimized children feel, and educating parents, teachers, and other community members about the problem. There is evidence that they accomplish some of these goals (see below). The programs could be justified solely on the basis of these goals even if actual prevention was relatively uncommon.

Empirical Findings About Effectiveness

The CMA argued that no empirical evidence has established that prevention-education programs work to reduce the likelihood of sexual abuse. Hence, they should be abandoned.

Our 1995 study,⁸ cited in the CMA report, did indeed fail to find that children with previous exposure to prevention programs had fewer subsequent victimizations. However, the findings of this study were not definitive and have a variety of explanations.

1. Most important, it is very difficult for any evaluation study of this issue to assess subsequent victimizations accurately. Because programs encourage children to disclose abuse and help them define what abuse is, it may create additional disclosures from children who have been exposed to the programs in contrast to nonexposed children. Thus, exposed children may tell about more even when they experience less. This can give the misleading impression of no effect or even greater victimization among children who have been exposed to prevention programs.
2. There were, nonetheless, positive findings in our 1995 study that are often overlooked. Exposure to prevention education was associated with an increased likelihood that children would disclose victimizations, an increased likelihood that they would see their actions as having successfully protected themselves, and a decreased likelihood that they

would blame themselves for the episode. These are not trivial outcomes, because they may determine what impact the abuse has on these children.

In addition to our equivocal findings, another nonexperimental study had stronger findings consistent with the possibility that exposure to prevention programs did help to prevent sexual abuse. On the basis of a survey of 825 college students, Gibson and Leitenberg²⁴ concluded that "adult women who had not participated in a school prevention program during childhood were about twice as likely to have experienced child sexual abuse as those who had participated in a program." This, like our study, was a relatively weak, nonexperimental design. However, it contradicts the broad assertion made by the CMA and other critics that no study has found a suggestion of effectiveness in preventing victimization.

The CMA endorsed a conclusion from an earlier critique, a 2003 study by Bolen and Scannapieco,²⁵ that prevention education was likely ineffective because sexual abuse rates had not declined subsequent to the implementation of these programs. However, much better and more recent evidence suggests that, contrary to the results of Bolen and Scannapieco, there have been large declines in sexual abuse.

1. More recent studies with designs better suited to detect trends have found large declines in sexual abuse since 1993. National data on sexual abuse cases substantiated by state child protective agencies have revealed a 49% decline in sexual abuse from 1993 to 2004.^{26,27} Data from the National Crime Victimization Survey revealed a 67% decline in sexual assaults against youth 12 to 17 years old from 1993 to 2004. Many factors have played a role in these declines. The declines did occur in the period subsequent to the dissemination of prevention-education programs, but the declines may or may not have resulted from this dissemination. However, it is wrong to claim categorically, as the CMA did, that there have been no declines when some studies show that there have been substantial ones.
2. The study by Bolen and Scannapieco,²⁵ was not a study that was well designed to draw conclusions about changes in the rate of abuse since the 1980s (when these prevention programs were implemented). Their study was a meta-analysis of surveys of adults performed with different methodologies at various points in time from 1983 to 1997, the most recent one being of adults of all ages interviewed in 1997. Extremely few of the adult participants in those studies were young enough to have been exposed to the prevention-education programs that became widespread only in the late 1980s, and certainly not to the more-refined programs that are the basis of current practice.

In addition, even if prevention-education programs conclusively failed to prevent the occurrence of sexual victimization, the programs have a number of other objectives. These other objectives could justify implementation, and the programs need to be evaluated on these merits. These other objectives include:

- the promotion of disclosure by victims;
- the prevention of negative outcomes subsequent to victimization such as guilt feelings, self-blame, and shame; and
- the creation of a more-sensitive environment among adults, other children, and organizations in general to respond to and help child victims.

The literature is virtually unanimous in showing that the programs promote disclosure, and at least 1 study has found that program exposure reduces self-blame.⁸ These are important. Disclosure may result in much better outcomes for a child, because it may terminate and shorten the duration of the abuse, mobilize assistance, and reduce isolation. It may also allow the identification of perpetrators and reduce future offending. Reductions in self-blame are believed to be associated with better mental health outcomes.²⁸

Possible Negative Effects of Programs

The critics of prevention education have also suggested that programs may provoke negative effects including undue fear, failure to comply with the reasonable demands of adults, false reports, increased injuries at the hands of abusers, and distortions of healthy sexual development. Unfortunately, there has not been comprehensive research conducted on every one of the potential negative adverse effects that have been articulated. However, research on several of the most frequently mentioned adverse effects has not supported the concerns.

Anxiety

Studies have not found increased levels of anxiety among children in the wake of program exposure.^{29–32} When children do report worry after program exposure, it seems to be a level of concern that is appropriate to an increased vigilance about the problem and is associated with favorable views of the program.⁹

Failure to Comply With Authority

Few parents and teachers report adverse reactions in the wake of program exposure.^{9,29,30,33–39} In contrast, studies have found increases in parent-child communication after involvement in prevention education.^{8,29,30,33,34,37,40}

False Reports

Studies have not found that children are more likely to misinterpret appropriate physical contact in the wake of

prevention-education exposures and make false allegations.^{38,41}

Increased Injuries

One study did report somewhat higher levels of injury to program-exposed children in the wake of victimizations of all sorts (not just sexual assaults), but the difference was not statistically significant and could have been the result of chance.⁸ Moreover, the program-exposed children in the same study simultaneously reported a greater sense of success in their resistance activities when threatened with victimization, a result that was significant.

Sexual Development Problems

There has been no research to address fully the concern about negative sexual development. However, some research has shown that program-exposed children do have more correct terminology for and positive feelings about their genitalia.^{42,43} Another study did not find any increase in sexual problems among adults who were exposed to prevention programs during childhood.²⁴ However, prevention-education programs are not sexual education programs, and they typically have minimal discussions about the sexuality of adults or children. Given the amount of news coverage about sex crimes, it is unlikely that prevention programs represent children's first exposure to the topic, and they are almost certainly not the most frightening exposure to the topic children are likely to have.

Unfair Burden on Children

A popular argument among prevention-education critics is that it is not "moral" or fair to use prevention strategies, such as prevention education, that raise any expectation for children to be able to thwart sex offenses or that place the burden for doing so in their hands. Instead, the burden of victimization prevention should be exclusively on adults.

There is broad agreement that the burden of preventing victimization should not lie exclusively in the hands of children. However, if there are potentially effective things that children can do, it would also be morally reprehensible not to equip them with such skills. Comparisons to other prevention challenges illustrate this point. It might be said that the responsibility to protect children on bicycles from collisions with automobiles should be in the hands of adult motorists, but few would argue against urging children to always ride with their helmets on. It might also be said that the responsibility to protect children from kidnappers should be with adults and law enforcement, but few would argue against teaching children not to get into cars with strangers.

The burden-of-responsibility argument means that adults should do everything they can. In fact, most school-based prevention-education programs do try to

mobilize parents and teachers. However, it is not an argument against providing children with potentially useful prevention skills.

CONCLUSIONS

The weight of currently available evidence shows that it is worth providing children with high-quality prevention-education programs:

1. Much research has suggested that children acquire the concepts.
2. Some research has suggested that the programs promote disclosure.
3. One study found lower rates of victimization for children who were exposed to these programs.
4. A study found that children who are exposed to prevention education have less self-blame if they are victimized.
5. There have been declines in sexual abuse since 1993 that may possibly be related to the dissemination of prevention education.

It is also true that some studies have not found effects, and some scholars have questioned the conceptualization of these programs. No true experimental studies exist. The programs' effectiveness would have to be described as suggestive and certainly not conclusive.

Other prevention strategies should also be undertaken, such as campaigns to deter and control offending behavior among adults. The weakness of evidence at this point would certainly not justify sole reliance on prevention education by itself. There is likely enormous variation in program quality.

On the other hand, no alternative prevention strategy has as much positive evidence in its favor as prevention education. It would be a mistake to abandon a strategy that has a tentative but inconclusive evaluation record, including some positive results, for other strategies that have little or no empirical evidence in their favor yet, however appealing they may sound in theory.

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CHILDHOOD POVERTY IS FOUND TO PORTEND HIGH ADULT COSTS

"Children who grow up poor cost the economy \$500 billion a year because they are less productive, earn less money, commit more crimes, and have more health-related expenses, according to a study released on Wednesday. 'The high cost of childhood poverty to the US suggests that investing significant resources in poverty reduction might be more cost effective than we thought,' said Harry J. Holzer, an economist at Georgetown University and the Urban Institute and one of the four authors of the report. Mr. Holzer was one of several poverty experts who testified Wednesday to the House Ways and Means Committee as the report was released. The new chairman of the panel, Representative Charles B. Rangel, Democrat of New York, said the experts were appearing 'not as bleeding hearts, but to calculate the costs of poverty to our economy and society.' 'We're talking about saving money and making productive people in the age of globalization,' Mr. Rangel said."

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