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Preventing Child Sexual Abuse through Education: The work of Stop it Now! Wales.

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Preventing Child Sexual Abuse through Education: The work of Stop it Now!

Wales.

This paper presents the findings from an evaluation of education and awareness-raising programmes delivered by Stop it Now! Wales, aimed at engaging parents, carers and professionals in an informed discourse about Child Sexual Abuse (CSA) and how to prevent it. Crucially, the findings presented in this paper show that the majority of research participants saw benefits in attending a programme. However, this varied by the type of programme attended and the nature of the impact reported. These variations are discussed in order to contribute to our understanding about how CSA issues are experienced and understood by parents and professionals; how they experience the transition of new knowledge; and what, if any, preventative action is taken by parents and professionals as a result of attending a Stop it Now! Wales CSA education and awareness-raising programme.

Keywords: child sexual abuse, prevention, educational programmes.

Introduction

Recent developments in Child Sexual Abuse (CSA) prevention provide an alternative to the more reactionary policies of criminal justice legislation and treatment. There are now a varying range of approaches that help to increase awareness and aim to prevent CSA before it occurs. Such interventions tend to focus on educational programmes (Kemshall and Moulden,

2016), the most widely used targeting children through school-based programmes¹ (Finkelhor, 2009; Tabachnick, 2013; Walsh, Brandon, and Chirio, 2015). Increasingly however, educational approaches are also being used to target parents, families and other adults that may be in a position to intervene before a child is sexually abused.

This paper draws on adult educational CSA prevention programmes delivered by Stop it Now! Wales². These programmes are hosted by organisations such as day nurseries, schools, children's charities, and criminal justice and social services, and specifically target parents³ and professionals who work or volunteer with children and young people and/or whose 'clients' work with, or are parents of, children or young people. For both audiences Stop it Now! Wales deliver several different educational programmes, ranging from Internet safety to sexual development in pre- and post- pubescent children. A crucial component of

¹ Such programmes have implemented extensively across the United States. In contrast, sex and relationship education (SRE) is not currently universally taught in schools the UK (Long, 2016). Furthermore, where programmes do exist, they have been highly criticised for failing to effectively incorporate sexual abuse prevention strategies (Brown and Said-Tessier, 2015). Instead, specific CSA prevention programmes targeted at children tend to be delivered sporadically by charitable organisations (such as the NSPCC's 'Speak out. Stay safe', formerly 'Childline Schools Service' see <https://www.nspcc.org.uk/services-and-resources/working-with-schools/speak-out-stay-safe-service/>).

² Stop it Now! is a child protection charity that operates across the UK, Ireland and Europe. Stop it Now! Wales' remit is to protect children from sexual abuse across Wales. For more information about Stop it Now! and the work they do please visit their website: <http://www.stopitnow.org.uk>

³ The targeting approach used by Stop it Now! Wales acknowledges the social changes to modern families. 'Parents' therefore refers to biological parents, who may or may not be living with children, adoptive parents, foster carers, step-parents and other adults who fulfil a social parenting role.

these programmes is to challenge the overly stereotyped characteristics of perpetrators and to provide a more accurate portrayal of their offending. The aim being to educate, inform and equip these parents and other responsible adults with the knowledge and skills to prevent CSA.

The research consists of two key elements. First, quantitative data captured from before and after programme questionnaires, and second, qualitative interviews with past programme participants. The mixture of quantitative and qualitative data is used to provide information on the parents and professionals who engaged in these programmes. The data is also used to measure the programmes impact in increasing participants' knowledge and recognition of CSA, and any action taken about CSA. Comparisons are made between programme participants self-reported confidence in these areas before and after programme, and across five different programmes delivered by Stop it Now Wales. Further comparisons are made between programmes delivered to parents and those delivered to professionals.

Engaging in Prevention

'Stop it Now! Wales believes and acts on the principle that all adults are responsible for protecting children from CSA'. Adults are considered ideally placed to identify the signs and symptoms of CSA and to communicate and strengthen parents, children and young people's awareness of CSA. Professionals working in child protection and safeguarding occupations will be required to undertake mandatory CSA reporting and prevention training. However, research has shown that the quality and availability of this training may vary. It also points to the need to target *other* key groups of professionals (outside child protection professions) in order to expand the number of professionals that are able to contend with CSA issues (Martin, Brady, Kwhali, Brown, and Crowe, 2014; Mathews and Kenny, 2008; Munro and Manful, 2012).

The need to educate ‘parents’ on CSA also seems logical given their unique position to recognise signs of CSA, and educate and talk to their children about CSA prevention⁴. Encouragingly research that has examined parent-child discussions about CSA prevention tends to imply a greater prevalence (Babatsikos, 2010). However details on who talks to children, the topics discussed, knowledge, attitudes and practices, is shown to vary considerably. Studies that have examined the *substance* of this communication also concede that most parents experience difficulties in talking to their children about CSA, few parents use any educational tools or techniques, and that the ‘myths and misconceptions’ about CSA (mirroring those depicted in the media) persist (Babatsikos, 2010; Wurtele and Kenny, 2010). Indeed research that has examined public perceptions of sexual offending frequently shows that the public tend to hold inaccurate, stereotyped and skewed perceptions about sex offenders and offending (Levenson, Brannon, and Baker, 2007; McCarten, 2004; Olver and Barlow, 2010; Mejia, Chayne and Dorfman, 2012; Williams and Hudson 2013). Prevention training programmes aim to engage parents in an informed discourse about the reality of sexual offending and to recognise the behaviours and the more ordinary aspects of humanness of the perpetrators, to help prevent CSA.

Research has however been unable to *prove* that these types of interventions can actually prevent CSA. Alongside the many methodological challenges this poses (DeGue, Valle, Holt, Massetti, Matjasko, and Tharp, 2014; Finkelhor, 2009; Wurtele 2009; Kemshall and Moulden, 2016) a clear limitation of any educational programme is the inability to control the extent to which individuals understand and act on the information given. It is also impossible to predict how much influence external factors (including the media) will have on

⁴ It is of course acknowledged that with most CSA being perpetrated in domestic settings, some parents (and professionals) will also be perpetrators. However, it is unlikely that perpetrators will take part in prevention programmes.

the extent to which the individual understands and acts on the information given, and how this might change over time. This article does not set out to *prove* that these types of interventions can prevent CSA. Instead it contributes to our understanding about how CSA issues are experienced and understood by parents and professionals; how they experience the transition of new knowledge; and what, if any, preventative action is taken by parents and professionals as a result of attending a Stop it Now! Wales CSA education and awareness-raising programme.

Methods

The research consists of two key elements. First, quantitative data captured from before and after programme questionnaires, and second qualitative interviews with past programme participants.

The quantitative data involved the collation and analysis of 252 before and after session questionnaires from programme participants during the research period. The quantitative outputs are therefore time bound in that the before and after questionnaires were administered in all the programmes that ran from July 2015 to September 2015⁵. Overall 27 two-hour programmes were delivered across Wales during the research period, covering five different programmes types. Table 1 provides a summary of the number of participants surveyed before and after each programme. Information adapted from *Stop it Now! Wales* promotional material is also presented about each session. Aside from *Parents Protect!* and *Professionals Protect!*, the other programmes can be delivered to both parents and

⁵ This was the time period available to conduct the research, due to organisational issues within Stop it Now! Wales. Whilst this study included all programmes that ran during this time it is recognised that a continued evaluation of future activities would be useful to see if the observations presented later in this paper are consistent across more activities with more participants.

professionals. However, during the research period the *Internet Safety and Sexual Development in pre and Post Pubescent Children* programmes were delivered to parents only, whereas the *Preventing Child Sexual Exploitation* programmes were exclusively attended by professionals. In total, 169 (67%) before and after session questionnaires were completed by participants had that attended in a professional capacity, and 83 (33%) by participants that had attended a programme as a parent.

[Insert table 1 here]

In total 252 before and after programme questionnaires were captured from 233 participants that had attended a programme during the research period (July 2015 – September 2015). Nineteen session participants had attended two programmes during this time. The following analysis considers responses to the questionnaire by session type irrespective of whether the participants attended the actual same training session as each other.

In line with the aims of Stop it Now! Wales' programmes, the questionnaire data captured the programme participants' self-reported confidence across three measures. These were:

- (1) Knowledge and recognition of CSA.
- (2) Confidence to act on any concerns about CSA.
- (3) Confidence that the actions available will make a difference.

Whilst comparable, the questions used to capture levels of knowledge and actions differed depending on which programme was attended. All the questionnaires asked the respondents to rate their level of knowledge/ confidence using a scale where 1 is not confident and 5 is very confident before and after the programmes. Additional self-report measures were included in the questionnaires to counteract some of the methodological problems related to self-reported levels of knowledge/confidence. This included issues around honesty and image

management, a participants' introspective ability to provide an accurate response to a question, and different interpretations and use of scale points. Unfortunately this data was not routinely collected and cannot be used.

Importantly the questionnaires were administered before and after each programme. As such this paper is able to capture any changes in levels of knowledge/ confidence, mitigating some of the methodological problems discussed above. That said, as the after session questionnaires were administered immediately after a programme, they are only able to measure confidence and not ability or action.

Comparisons were also made between the five different programme types that ran during the study, as well as those delivered solely to professionals and those delivered to parents (see Table 1 above).

The second element of the study consisted of qualitative interviews with past participants of Stop it Now! Wales' programmes. A convenience sampling method was employed relying on past participants to opt-in to the study. Sixteen interviews were conducted. The number of interviews is relatively small however this element of the research was used to provide supporting information on session delivery and content and revisit issues related to self-reported confidence across the three measures outlined above. Importantly, these interviews were also used to help gather information on safeguarding issues and to learn whether any preventative action in response to child protection concerns had been taken as a result of attending a programme. Interviews were also conducted with participants who were employed by the host organisation, which provided a different perspective on the programmes perceived effectiveness.

Findings

The following sections present an overview of the main findings from the research on the use and effectiveness of the prevention programmes delivered by Stop it Now! Wales. It first presents the session participants characteristics, and compares participation on Stop it Now! Wales' programme to what we already know about participation on CSA prevention programmes more generally. The remainder of the findings draw primarily on the questionnaire data. Interview data is used to help contextualise these findings and the implications of them for further research and practice.

Participant Characteristics and Engagement

Despite compelling arguments to engage the public in CSA prevention training, participation on these types of programmes is known to be relatively low, with certain populations remaining 'hard to reach'. The participants' characteristics in this study tend to mirror what we already know from evaluations of prevention programmes (Babatsikos, 2010).

[Insert table 2 here]

Within the research sample only 11 individuals described themselves from being from a Black and Minority Ethnicity (BME) (Gillian and Akhtar, 2006; Hudson, Kemshall, and McCartan, 2014). As in previous studies, women were also more likely to engage in CSA prevention than men (women accounted for 199 (79%) of the questionnaire respondents and 15 of the interviewees). The questionnaire data shows that more women attended each of the programmes than their male counterparts.

[Insert Table 3 here]

Across the programmes men were more likely to attend *Preventing Child Sexual Exploitation*. To reiterate, this session along with *Professionals Protect!* was attended exclusively by professionals (see Table 1). Men were therefore more likely to attend a Stop it Now! Wales session in a professional capacity (n=39; 78%). This corroborates with findings

that suggest that fathers are less likely to communicate about CSA prevention than mothers (Babatsikos, 2010). It is also consistent with research that has examined the engagement of fathers in education courses on child neglect and abuse (Smith, Duggan, Bair-Merrit, and Cox, 2012 p. 250). However, the same was also true for women, with 65% (n=130) attending a session through their employment.

The questionnaires captured the occupation of those that attended a session in a professional capacity (n=169, see Table 1). We know that 128 professionals worked in child protection, while a further 41 worked directly with children (either as teachers, teaching assistants or nurses, and child carers). From the programmes attended by parents (n=83, see Table 1), we know at least four also worked with children in a professional capacity. This accounts for 68.7% of the research sample. These figures could be used to suggest a lack of parental interest, or at the very least, a reluctance to engage in CSA prevention initiatives outside of the home (see Babatsikos, 2010). This would be consistent with the lack of parental engagement in mainstream services (such as schools, family centres and children's centres) more generally (Katz, La Placa, and Hunter, 2007; Henricson, Katz, Mesie, Sandison, and Tunstill, 2001). However, it is important to note that a substantial number of professionals were also parents.

Overall the session participants from this study tend to support notions that it is difficult to recruit to these programmes. The parents interviewed in this study all strongly believed that the general public's reluctance to talk about CSA explained why *others* would be resistant to attend the *Parents Protect!* programmes:

"It's like, it's a bit ew, I think there are people out there that do want to learn about it but they are too scared" (Rosie: Parents Protect).

Suspicion and stigma was also felt to act as a barrier to parents' involvement in Stop it Now! Wales programmes. Some parents interviewed suggested that had been worried that their

friends and family might incorrectly assume that their attendance was directly related to a past or present sexual abuse incident, either as a victim or perpetrator:

"I think a lot of times people think oh if you, why are you going to a sexual abuse course, you know you are actually going to prevent it, not because you want to go a be a predator, you actually want to try and stop this happening to other people..."

Similar fears and suspicions are documented in research looking at mainstream parenting and support programmes (Katz et al., 2007). These studies point to the need to reassure parents that they will not be labelled as ‘failed parents’ for participating. Within the context of CSA prevention programmes, arguments have been made to discontinue the use of the term ‘sexual abuse prevention’. Wurtele and Miller-Perrin (1992) argued that this term was inappropriate for child focussed programmes, and insisted instead that they should be called ‘personal safety’ or ‘body safety’ programmes (see also Wurtele, 2009). This argument could also be applied to education and awareness-raising programmes aimed at parents and professionals. However a clear aim of CSA prevention campaigns, and specifically public education and awareness-raising programmes, is *not* to shy away from the issue: Not to hide behind different terminology, but to encourage the public and communities to talk more openly and accurately about CSA and the protective measures they can take, on behalf of children.

The interview data did suggest that the host organisation played a vital role in alleviating any fears that parents may have about attending a Stop it Now! Wales programmes. Hosting a programme was also seen as a way of increasing dialogue about CSA between the organisation and their ‘clients’/ employees. One host commented on how both attending and hosting a session helped to endorse the organisations commitment to CSA

prevention and demonstrate their willingness to respond to any concerns their clients/employees may have:

“It is also important that [the parents/ clients we work with] see we are still willing to learn too” (Sarah: Parents Protect/Host)

Measuring the Impact of CSA Education and Prevention Programmes

The paper now presents the findings from the analyses of 252 questionnaires. The data draws on session participants' self-reported confidence across three measures:

- (1) Knowledge and recognition of CSA
- (2) Confidence to act on any concerns about CSA.
- (3) Confidence that the actions available will make a difference.

Comparisons across these outcomes are made before and after programmes; across the five different Stop it Now! Wales programmes that ran during this study; and between ‘professionals’ (session participants that attended a session in a professional capacity) and ‘parents’ (session participants that attended a session as a parent).

Figure 1 shows the overall distribution of scores before and after programme for each of the five programmes included in the study.

[Insert figure 1 here]

Crucially the overwhelming majority of programme participants included in this study saw benefits in attending a Stop it Now! Wales programme. However this varied by the programme attended, with the greatest improvements seen in the *Internet Safety* programmes, followed by *Parents Protect!*. Both programmes were delivered to parents within this study. In fact the data suggests that parents benefited the most from attending a Stop it Now! Wales programme. Table 4 shows the proportional differences in scores from before and after session attendance. From this we can see that all the programmes seem to be better at

improving confidence in knowledge and understanding of CSA than they are at improving confidence in action (both to act on any concerns and whether the actions will make a difference). These variations will now be discussed in order to contribute to our understanding on what strategies work best and why.

[Insert table 4 here]

Tackling Internet Safety

The *Internet Safety* programme saw the greatest improvements across all outcomes. Internet abuse is arguably the area that has changed the most dramatically in recent years owing to advances in technology and the popularisation of mobile phones, smart phones, webcams and chat platforms among young people. The high levels of change, particularly in relation to knowledge and understandings of the way people cause sexual harm to children on-line, could reflect the speed of change and subsequent new opportunities for children to be harmed online. All interviewees stated that they had improved their knowledge about on-line abuse, evidently for the same reasons⁶. They all stated that they had a better understanding of the dangers associated with young people's regular, and often unsupervised, use of the Internet or other social media platforms (Livingstone, Haddon, Görzig, and Ólafsson, 2011; CEOP, 2011). This was discussed in relation to issues of cyber bullying, sexting, on-line gaming, and sexual exploitation and grooming.

In relation to the recorded levels of improvement on participants' confidence to act, the actions that can be taught to prevent CSA on-line are also more tangible and practical. This draws on research that shows that programmes that promote self-efficacy through the

⁶ Internet abuse and the growth in on-line sexual offences is covered (to varying degrees) in *all* the education and awareness-raising sessions delivered by Stop it Now! Wales.

teaching of actions that can be easily applied by the individual can enhance the likelihood that the targeted perceptions and behaviours can change (McCartan, Kemshall, and Tabachnick, 2015). The *Internet Safety* programme covers a number of safety tips that can easily be applied depending on the age and maturity of the children concerned (these will be replicated in other programmes to varying degrees). Subsequently, the interviewees all articulated new measures and techniques that they could, and had, put in place to protect children from on-line abuse. These ranged from keeping computers in communal places, to installing additional software to manage and monitor a child's Internet use and to prevent their children from seeing inappropriate or harmful content online. Others discussed the importance of managing their children's behaviour on-line, on social networking and gaming sites; as well as acknowledging the importance of talking to their children about the risks they could be taking:

"I went straight home and I talked to my son ... [he] is 14 and he is gaming and I just wanted him to be aware of how people can bully you online..." (Maria: Parents Protect).

There are of course other explanations that could account for why the *Internet Safety* programme had the greatest improvements across all outcomes. This includes the nature of the respondents attending these programmes, and that the participants on this programme had lower pre-levels of confidence to start with (see Figure 1). *Internet Safety* programmes were for example, attended exclusively by parents. However the *Parents Protect* and *Sexual Development in pre and Post Pubescent Children* programme (also for parents) do not appear to have the same level of impact. But these respondents level of confidence was higher prior to starting the programmes than the parents attending *Internet Safety*. As Figure 1 also shows participants on *Internet Safety* programmes had the lowest pre scores for overall confidence.

This could be used to support findings from previous research that parents do not feel that they have adequate skills to supervise their children online (Livingstone and Bober, 2004; Davidson and Maretollozzo, 2008; Martellozzo, 2011a, 2011b). However, given the programmes lower pre scores, when looking at each programmes relative improvements in confidence (i.e. the difference on the tables) the other programmes can be compared more fairly. The following sections thus examine differences in outcomes primarily across the remaining four programmes.

The Impact of CSA Preventative Programmes on Parents and Professionals

The questionnaire data clearly shows that that parents benefited the most from attending a Stop it Now! Wales programme. Across the different types of programmes *Professionals Protect!* has smaller levels of improvement in overall confidence. It should be noted, and is perhaps expected, that professionals' pre scores were higher than parents. However when comparisons are made between the two programmes designed specially for these two groups, namely *Parents Protect!* and *Professionals Protect!* parents clearly see the greatest benefit, with a 21% improvement in overall confidence compared to a 17% improvement. Consequently even though there is a small difference in pre confidence (favouring professionals) there is still a sizeable difference in improvement.

Greater levels of improvement were reported by professionals attending *Preventing Child Sexual Exploitation* compared to *Professionals Protect!*. The content of *Professionals Protect!* provides an extensive but broad overview of CSA and what professionals can do to protect children within the workplace. In contrast, *Preventing Child Sexual Exploitation* looks exclusively at how child sexual exploitation can happen, what the risks to children and young people are and what action can be taken. It therefore targets a specific type of abuse, and one that has been subject to considerable and recent media and legislative attention

(CEOP, 2011). The specification of the session's content may therefore better reflect training needs of professionals that work with and/or whose 'clients' work with, or are parents of, young people.

The interview data also indicated that professionals had different reasons and motivations for attending a Stop it Now! Wales programme. For both parents and professionals attendance on a session is voluntary. However the professionals interviewed (n=6) acknowledged that their attendance was also linked to their professional training. Those that worked in child protection (n=3) were also more likely to describe their motivation to attend a session to 'refresh' their current knowledge. The perceived benefits were therefore linked to increased confidence in their *existing* skills and expertise, by reassuring them that their working practices were up to date and in-line with current evidence and practice, and in line with their colleagues. In contrast, the interviewees whose employment was not directly associated with child protection were more likely to state that their attendance had not only increased their knowledge but that they had also made significant changes to their working practices. This was also true for the two parents interviewed (having attended *Parents Protect!*) who also worked with children and were employed by the 'host' organisation. Consequently, while this study demonstrates that the programmes delivered to professionals by Stop it Now! Wales are effective more research is needed to fully understand the specific training needs and expectations of professionals, as well as the types of professionals that would benefit the most.

The Impact of CSA Preventative Programmes on Understanding and Action.

The questionnaire data clearly shows that all programmes (including *Internet Safety*) were better at improving knowledge and understanding of CSA. These findings clearly show that participants, having attended a Stop it Now! Wales programme, left with a better

understanding of the realities of CSA, perpetrators, victims and offending behaviours. Most of the interviewees also displayed a greater understanding of CSA. The parents interviewed spoke most about the how the programmes had succeeded in challenging the myths and stereotypes of the predatory sex offender as well as correctly situating CSA within the personal/ familial context (Radford, Corral, Bradley, Fisher, Basset, Howat, and Collishaw, 2011). However, what became evident is that with this new knowledge came a new challenge: How to avoid provoking unnecessary fear? (Jackson and Gray, 2010; Wurtele, 2009). Indeed all of the parents interviewed described some of what they had learnt about perpetrators ‘upsetting’ and ‘scary’:

“It was definitely looking at perpetrators and groomers and the way they work, they can be any age that was quite an eye opener ... they can look so normal, there is no sort of set appearance to it is there?” (Jane: Parents Protect).

“I suppose [the session on the perpetrators] was quite powerful ... and it’s a very stark reminder of how unsafe many children are...” (Emma: Internet Safety)

This paper has already suggested that the host organisations played a vital role in alleviating any fears that parents may have had about attending. The interviews and feedback from the programmes also suggested that the sensitive issues and materials covered in the programmes were managed and delivered effectively and in a manner that was sensitive to the fears and concerns of some of the participants. All interviewees commented positively on the delivery of the session attended and the professionalism of the facilitators. Previous research has also shown that as long as this fear can be converted into constructive action then it can be managed and will not have a corrosive impact on someone’s quality of life (Jackson and Gray 2010; Kemshall 2014). Encouragingly, the interviewees articulated different ways in which they could manage their fear appropriately. In doing so they

displayed a healthier understanding and awareness of the risks associated with CSA; a sense that just because it could happen does not mean to say it will:

“I think it opens your eyes to thinking, ok there is a balance here, as long as we are aware of what could happen, it doesn’t mean to say it is going to, but we can balance it out because awareness is a way of protecting everybody isn’t it” (Lucy: Parents Protect).

“I’m now a little more scared but because I know better how to protect her I feel like I can go out places, like before I didn’t want to go places but now I can go out because I know what I am sort of looking for” (Rosie: Parents Protect).

The fact that all programmes were better at improving knowledge and understanding than they are in taking any action on CSA, or that these actions will make a difference, may of course simply reflect the limitations in the research design. To reiterate the after programme questionnaires were administered immediately after a Stop it Now! Wales programme and therefore were unable to capture safeguarding issues and any preventative actions that may have been taken as a result of attending a programme. Where this data was collected, the research is aware and acknowledges that the interview sample size is small. However, this finding also support the known limitations of education and awareness-raising programmes, that it is inherently difficult to change behaviour (in this instance that programme participants will act on the information given).

Interestingly confidence to act on any concerns relating to CSA was highest within *Internet Safety*, followed by *Sexual Development in Pre and Post Pubescent Children*. It has been suggested that *Internet Safety* offers more tangible and practical actions that can be easily applied. Similarly, *Sexual Development in Pre and Post Pubescent Children* provides a unique opportunity to engage with parents at a time when they have expressed anxiety, or

lack of confidence, in understanding healthy developmentally expected behaviours and behaviour that is not appropriate in their children. Again research has shown that programme participants will be more receptive to what they learn and more likely and able to transfer this knowledge into real life situations, of the issues are live and/ or directly impact on their lives.

The questionnaires also captured data on whether they were likely to discuss what they had learnt from the programme attended with anyone. Ninety percent (n=226; 252 total cases) stated that they would discuss what they had learnt from the session they had attended with someone (see Table 5).

[Insert Table 5 here]

The greatest action taken by the interviewees was also to discuss and reinforce the messages that they had learnt about protection at home with their children. Drawing on the session content, parents stated that they felt it was important for children to have a better understanding of what CSA is; what ‘healthy’ relationships look like; concepts around body knowledge; and to ensure that children know where to go for advice. What became apparent is that this challenged existing perceptions about the appropriateness of engaging children in a discourse on CSA prevention.

Previous research looking at parent child discussions about CSA concede that most parents experience difficulties in talking to their children about CSA (Zeuthen and Hagelskjær, 2013). One concern often raised is that the introduction of themes concerning CSA could make children overly fearful of adults, afraid of an adult’s touch, and/or affection (Zeuthen and Hagelskjær, 2013). A similar concern is the belief that children need to be protected from the adult world of ‘sex’. This is despite an increasing recognition in child protection practice and research that the romanticised notions of the sexually innocent child endanger children (see for example, Gittens, 1998; Kitzinger, 1990, 2004; Renold 2005). Within this study a number of parents with younger children deliberated over the need to

empower children and fear over the loss of children's innocence. Their initial unwillingness to talk of children about sex and CSA were successfully challenged. For most this was attributed to the fact that they had learnt *how* to (Burgess and Wurtele, 1998):

"I didn't talk to him before [attending the course] because I thought oh he is too young... you know at 4, 5 year olds but now it's more, yeah okay we need to do this"
(Jane: Parents Protect).

"I have got twins now who are 3 and they are being potty trained so they are very aware of their body now so you know I now need to say what is ok and what isn't to them without scaring them" (Maria: Parents Protect).

"I used to speak to her before but not in the right way, I was like no one is allowed to touch that, or that or that, but teaching her 'airhostess'⁷is a kid's sort of way" (Rosie: Parents Protect).

These apparent shifts in attitude and behaviour were attributed to how this new information was delivered. The participants were also presented with key actions and behaviours that could easily be applied having left the training room.

Conclusion

This research contributes to our understanding of the efficiency of education and awareness-raising programmes in informing programme participants of the realities of sexual offending and perpetrators, and how to prevent it. Whilst the methodological limitations of the paper

⁷ The 'Airhostess' is a visual way of explaining to young children that no one should touch them where their hands cross over. Other ways of explaining this include the swimwear rule and the NSPCC's Underwear rule: PANTS. <http://www.nspcc.org.uk/preventing-abuse/keeping-children-safe/underwear-rule/>

have been acknowledged, overall the findings are extremely positive. To reiterate, the overwhelming majority of research participants saw benefits in attending a Stop it Now! Wales programme.

Of course these participants, having volunteered to participate in these programmes, are likely to be more receptive, enthusiastic and engaged. However, it would be foolish not to take advantage of this. The majority of participants interviewed stated that they had discussed and reinforced the messages that they had learnt, about protection, at home with their children. Similarly, 90% of the questionnaire respondents stated that they would pass on what they had learnt to others. These programmes thus offer a channel to dispel the myths about CSA more widely, to uninvolved parents/ professionals, so that they can also manage risk more effectively and responsibly.

The findings from this research can also contribute to our understanding on what strategies work best and why. All the programmes seemed to be better at improving confidence in the knowledge of CSA than they were in improving confidence in taking any action on CSA. As with previous studies, this research supports arguments that the audience will be more receptive to what they hear, and more likely and able to transfer this knowledge into real life situations if the ‘message’ is not only tailored to the audience, but also if the issue is ‘live’, and/or directly impacts on their lives.

On-line abuse was an area that participants increased their knowledge *and* were able to apply preventative actions. This is arguably because these programmes offered more tangible and practical *actions* that could be easily applied, and would have a direct impact on the participants’ lives. Given the speed of change and advances in technology that create new opportunities for children to be harmed on-line, there is an increasing demand and need to provide parents and professionals with up to date information about how children can be harmed online and how to prevent it. Stop it Now! Wales can evidently facilitate this.

These findings present possible implications for increasing attendance in CSA prevention programmes. Despite being recognised as a ‘good idea’, there is evidently a general reluctance to engage with the issue of sexual abuse through prevention programmes. Internet safety provides a means to start to engage with parents and other adults about CSA prevention. Once engaged, you can then incorporate fuller discussions surrounding CSA and how to prevent it.

Within this study, the role of the host organisation also played a vital role in the recruitment and retention of participants. The host organisations alleviated the fears that parents had about attending a session, while at the same time endorsing their organisations commitment to CSA prevention. Crucially, the host organisations represented within this study helped to promote specific workplace policies and a shared language of CSA prevention, which is vital to challenge wider societal attitudes towards sexual violence.

Despite their limitations, education and awareness-raising programmes, like those facilitated by Stop it Now! Wales, clearly have a vital role to play in the prevention of CSA. If parents and professionals do not receive the correct information and the proper guidance, how can they be expected to protect children from CSA? If nothing else, they can help ensure that parents, carers and professionals are as best placed as they can be to protect children from sexual abuse.

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Table 1. Programme Information and Attendance by Parents and Professionals.

| Programme and Content | | Total number of programmes delivered | | Total programmes participants | | Attended as 'Professionals' | | Attended as 'Parents' | |
|--|---|--------------------------------------|---------|-------------------------------|---------|-----------------------------|---------|-----------------------|---------|
| | | Number | Percent | Number | Percent | Number | Percent | Number | Percent |
| Parents Protect! | <i>The programme aims to raise awareness of child sexual abuse and provide positive messages about what preventative actions parents can take to prevent child sexual abuse.</i> | 8 | 29.6 | 53 | 5.6 | - | - | 53 | 100.0 |
| Internet Safety | <i>The programme examines the dangers posed by the internet, where the risks lie, how to protect children from abuse online.</i> | 2 | 7.4 | 14 | 36.5 | - | - | 14 | 100.0 |
| Sexual Development in Pre and Post Pubescent Children | <i>The aim of this programme is to educate and build confidence in understanding healthy developmentally expected behaviours and behaviour that can cause harm or increase a child's vulnerability. The programme explores the positive preventative actions to take to protect children from harmful sexual behaviour.</i> | 1 | 3.7 | 16 | 30.6 | - | - | 16 | 100.0 |
| Preventing Child Sexual Exploitation | <i>The aim of this programme is to increase knowledge and understanding of how child sexual exploitation can happen, what the risks to children and young people are, and what preventative actions can be taken.</i> | 8 | 29.6 | 92 | 21.0 | 92 | 100.0 | - | - |
| Professionals Protect! | <i>The programme aims to raise awareness of child sexual abuse and provide positive messages about what positive preventative actions adults can take in their professional roles to prevent child sexual abuse.</i> | 8 | 29.6 | 77 | 6.3 | 77 | 100.0 | - | - |
| Total | | 27 | 100.0 | 252 | 100.0 | 169 | 67.1 | 83 | 32.9 |

Table 2. Research Participants (n= 249)

| | Questionnaire respondents (n=233) | | Interview participants (n=16) | | Total research sample (n=249) | | |
|-----------------------------------|--------------------------------------|-----------|----------------------------------|----------|----------------------------------|-----------|------------|
| Sex | Female | No 181 | %* 77.7 | No 15 | %* 93.8 | No 196 | %* 78.7 |
| | Male | No 49 | %* 21.0 | No 1 | %* 6.3 | No 50 | %* 20.1 |
| Parents | Yes | 133 | 57.1 | 16 | 100 | 149 | 59.8 |
| | <i>1 child</i> | 50 | 21.5 | 6 | 37.5 | | |
| | <i>2 children</i> | 51 | 21.9 | 6 | 37.5 | | |
| | <i>3 children</i> | 24 | 10.3 | 3 | 18.75 | | |
| | <i>4+ children</i> | 8 | 3.4 | 1 | 6.25 | | |
| Age | 16-25 | 31 | 13.3 | 0 | 0 | 31 | 12.4 |
| | 26-35 | 65 | 27.9 | 7 | 43.8 | 72 | 28.9 |
| | 36-45 | 58 | 24.9 | 2 | 12.5 | 60 | 24.1 |
| | 46-55 | 41 | 17.6 | 3 | 18.8 | 44 | 17.7 |
| | 56+ | 26 | 11.2 | 2 | 12.5 | 28 | 11.2 |
| Relationship | Married | 102 | 43.8 | 9 | 56.3 | 111 | 44.6 |
| | Partner | 46 | 19.7 | 2 | 12.5 | 48 | 19.3 |
| | Single | 47 | 20.2 | 4 | 25 | 51 | 20.5 |
| | Separated | 6 | 2.6 | - | - | 6 | 2.4 |
| | Divorced | 13 | 5.6 | - | - | 13 | 5.2 |
| | Widowed | 6 | 2.6 | 1 | 6.3 | 7 | 2.8 |
| | Other | 3 | 1.3 | - | - | 3 | 1.2 |
| Ethnicity | White | 211 | 90.6 | 14 | 87.5 | 225 | 90.4 |
| | Indian | 4 | 1.7 | - | - | 4 | 1.6 |
| | Mixed | 1 | 0.4 | - | - | 1 | 0.4 |
| | Other | 6 | 2.6 | - | - | 6 | 2.4 |
| Religion | Christian | 116 | 49.8 | - | - | 116 | 46.6 |
| | Muslim | 1 | 0.4 | - | - | 1 | 0.4 |
| | Other | 4 | 1.7 | - | - | 4 | 1.6 |
| | No Religion | 100 | 42.9 | - | - | 100 | 40.2 |
| Sexuality | Heterosexual | 211 | 90.6 | 15 | 93.8 | 226 | 90.8 |
| | Gay/Lesbian | 4 | 1.7 | - | - | 4 | 1.6 |
| | Bisexual | 1 | 0.4 | - | - | 1 | 0.4 |
| | Prefer not to say | 4 | 1.7 | - | - | 4 | 1.6 |
| Employment | Full Time | 111 | 47.6 | 4 | 25 | 115 | 46.2 |
| | Part Time | 45 | 19.3 | 6 | 37.5 | 51 | 20.5 |
| | Temporary/casual | 2 | 0.9 | - | - | 2 | 0.8 |
| | Self Employed | 16 | 6.9 | - | - | 16 | 6.4 |
| | Voluntary work | 11 | 4.7 | - | - | 11 | 4.4 |
| | Education/Training | 7 | 3.0 | 1 | 6.25 | 8 | 3.2 |
| | Looking after home or children | 18 | 7.7 | - | - | 18 | 7.2 |
| Unable to work due to age/illness | | 3 | 1.3 | 5 | 31.3 | 8 | 3.2 |

*Percentages include missing responses.

Table 3. Questionnaire Data: Programmes Attended by Gender

| Gender | Internet Safety | Programme | | | | Total |
|---------------|-------------------------|------------------|--------------------------------------|------------------------|---|-------|
| | | Parents Protect! | Preventing Child Sexual Exploitation | Professionals Protect! | Sexual Development in Pre and Post Pubescent Children | |
| MALE | Number | 1 | 9 | 29 | 10 | 50 |
| | % within gender | 2.0 | 18.0 | 58.0 | 20.0 | 2.0 |
| | % within programme type | 7.1 | 18.8. | 31.5 | 12.3 | 7.1 |
| FEMALE | Number | 13 | 43 | 63 | 67 | 199 |
| | % within gender | 6.5 | 21.6 | 31.7 | 35.7 | 6.5 |
| | % within programme type | 92.9 | 82.7 | 68.5 | 87.7 | 92.9 |
| Total | Number | 14 | 52 | 92 | 77 | 249 |

Figure 1. Distribution of Confidence Scores Before and After Programmes

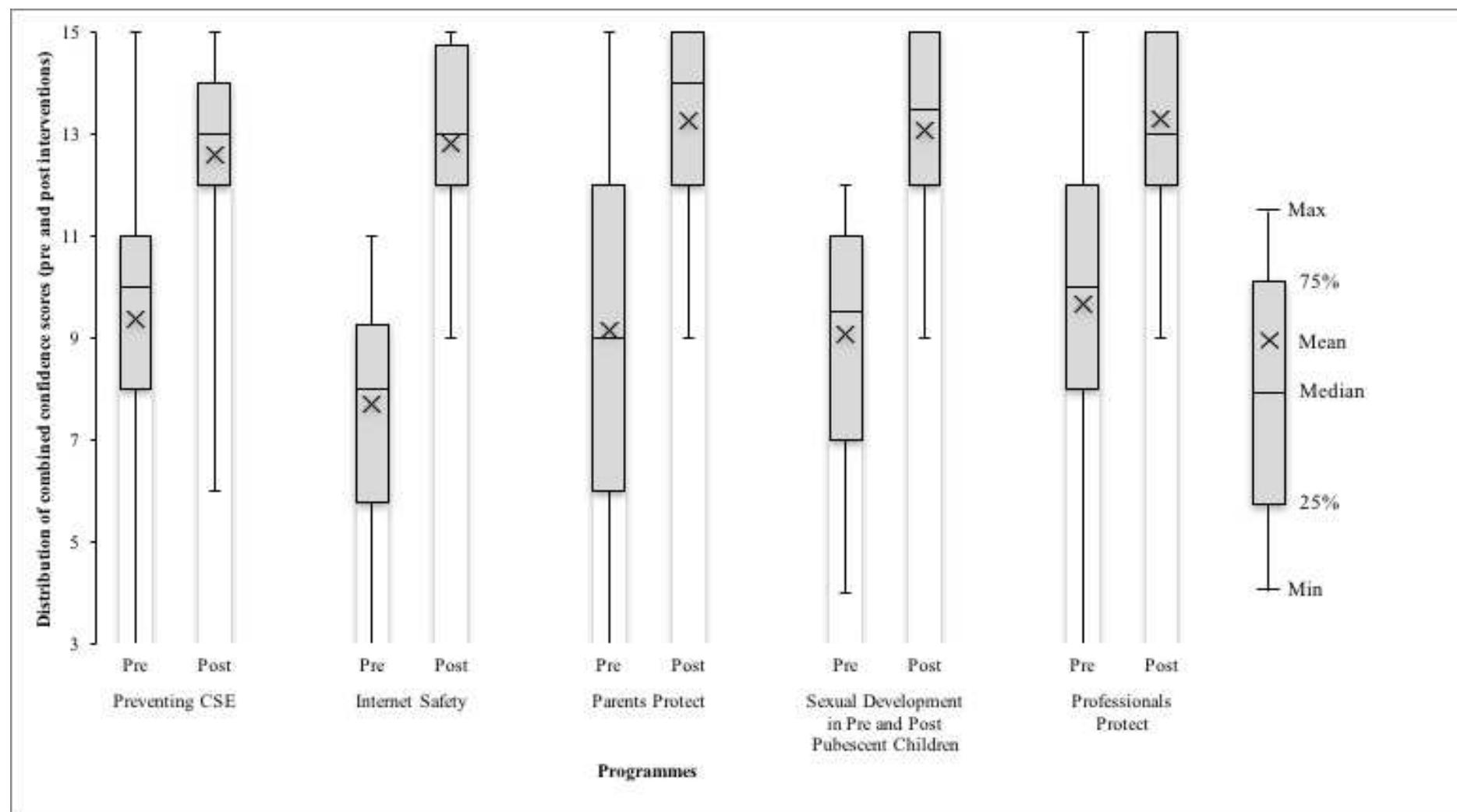


Table 4. Proportional Differences: Before and After Programme Attendance

| Self-reported confidence measures | | Programmes | | | | |
|---|------------------|-------------------|------------------|--------------------------------------|------------------------|---|
| | | Internet Safety | Parents Protect! | Preventing Child Sexual Exploitation | Professionals Protect! | Sexual Development in Pre and Post Pubescent Children |
| Knowledge and recognition | Before Programme | 2.50 | 2.75 | 2.65 | 2.83 | 2.88 |
| | After Programme | 4.42 | 4.15 | 4.05 | 4.33 | 4.31 |
| Confidence to act on any concerns | Before Programme | 2.64 | 3.11 | 3.39 | 3.43 | 2.94 |
| | After Programme | 4.25 | 4.53 | 4.30 | 4.54 | 4.31 |
| Confidence that actions will make a difference | Before Programme | 2.57 | 3.30 | 3.33 | 3.41 | 3.25 |
| | After Programme | 4.17 | 4.42 | 4.23 | 4.41 | 4.44 |

Table 5. Who questionnaire respondents said they would speak to about the programmes attended.

| | Number | % total number of cases (n=252) |
|---------------------|--------|------------------------------------|
| Adult family member | 192 | 76.2 |
| Child family member | 173 | 68.7 |
| Friend | 144 | 57.0 |
| Colleagues | 81 | 32.1 |
| School | 60 | 23.8 |
| Neighbours | 38 | 15.1 |
| Police/ Authorities | 13 | 5.2 |