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PREVIEW

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**Evaluation of Good Touches/Bad Touches: A program to  
prevent child sexual abuse in school-age children**

**Crowley, Kevin J., Psy.D.**

**Pace University, 1989**

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PREVIEW

Evaluation of Good Touches/Bad Touches: A Program  
To Prevent Child Sexual Abuse In School Age Children

Kevin J. Crowley

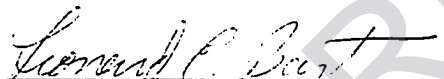
A Doctoral Project


In

School/Community Psychology

Presented to the Graduate Faculty of Dyson College of  
Arts and Sciences of Pace University in Partial  
Fulfillment of the Requirements for the Degree of Doctor  
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1989

  
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PREVIEW



## Abstract

This study evaluated the effectiveness of the Good Touches/Bad Touches (GT/BT) program developed by the Mental Health Association of Westchester County and designed to teach sexual abuse prevention skills to school age children. Fourth and fifth grade children (N=293) were randomly assigned to one of four groups; two experimental groups who received the prevention program (Groups 1,3), and two wait listed control groups (Groups 2,4). Measures included two pencil and paper questionnaires designed to assess children's knowledge of sexual abuse prevention concepts. The children's scores on the Sexual Abuse Knowledge Inventory (SAKI) and the Personal Safety Questionnaire (PSQ) were subjected to statistical analysis to determine the effectiveness of the GT/BT program in increasing their knowledge of prevention concepts. Results indicated that the GT/BT program was effective in increasing the knowledge base of the children with regard to sexual abuse prevention concepts. Furthermore, knowledge gained through exposure to the GT/BT program was maintained at a high level over three months. Finally, no significant pretesting effects were noted, resulting in similar scores for groups receiving both a pretest and a posttest measure. Implications of these findings are

discussed in terms of further prevention efforts, as well as alternate measurement techniques which may be useful in assessing the effectiveness of child sexual abuse prevention programs.

PREVIEW

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## CHAPTER ONE

INTRODUCTION

The sexual abuse of children is currently recognized as a major societal problem with adverse consequences for children during the time of their victimization and, for many victims, throughout the remainder of their lives (Conte, 1985). Although estimates of the prevalence of the problem of child sexual abuse vary due to a number of factors, i.e. different definitions as to what constitutes sexual abuse, reporting rates, etc., large numbers of children appear to be victims. A recent methodologically sound survey of 900 households in California indicated that 38% of the female respondents in that study had been victims of abuse involving direct physical contact before their 18th birthday (Russell, 1983). The results of Russell's 1983 survey were supported by survey results reported by Mann in 1984. Of 1200 college age women, 28% reported having sex with an adult before age 13. It is presently unclear how many male children are sexually abused, although it is estimated that 10% of all males are victims (Conte, 1985). Furthermore, it is also estimated that 60% of all child sexual abuse victims are under 12 years of age at the onset of the

abuse (Conte 1985, Conte & Berliner, 1981). Victims of child sexual abuse are found in every segment of our society, from the wealthy to the poor, from urban dwellers to rural residents, and across all racial and ethnic lines. Law enforcement officials estimate that more than 1,500,000 children are sexually molested or exploited each year in the United States (ACVF, 1985), and the New York Assembly Task Force on Women's Issues estimated that within the next decade, 28 million children will be sexually abused; 25 million of the victims will be girls (Post, 1987).

Society has attempted to respond to the problem of child sexual abuse in several ways. Laws have been passed in each of the 50 states, the District of Columbia, and the US territories which define child abuse and neglect (of which child sexual abuse is one form of abuse), and mandate the reporting of suspected cases of child abuse and neglect (U.S. Dept of Health and Human Services, 1984). Media attention is yet another way society is responding to the problem of child sexual abuse. There has been a flood of newspaper articles, television reports, and coverage of several recent criminal cases all involving some form of child abuse and neglect. Finally, there has also been a proliferation of mental health programs designed to

address the problems of child abuse and neglect, and specifically child sexual abuse (Conte, 1985). These programs often involve prevention of the problem as one of their stated goals. The concept of prevention may be examined from several viewpoints. Doek (1985), stated that there are three major modalities for the prevention of child sexual abuse which are as follows:

*Tertiary prevention:* any after-the-fact program initiated after abuse has occurred, the intent of which is to keep the abuse from happening again (in this context prevention may be equated with treatment).

*Secondary prevention:* any program of maneuver that is implemented to help an individual or group of individuals who have been identified as coming from a very high-risk environment (the identification of and intervention with high-risk populations).

*Primary prevention:* any program designed to insure the well being of children. Primary prevention projects encompass all efforts specifically aimed at insuring that child abuse should never befall a child. These efforts cover a broad area of child welfare including the right of every child to be protected from any



form of abuse.

Educational as well as school based programs which have as their stated goal the prevention of child sexual abuse through the imparting of a body of knowledge, fit the definition of primary prevention noted above. That is, these programs are designed to insure that child sexual abuse should never happen to a child.

The Good Touches/Bad Touches (GT/BT) child sex abuse prevention curriculum is one such effort at the primary prevention of child sexual abuse (Mental Health Association of Westchester County, 1984). Through a series of structured lessons, this program seeks to empower kindergarten through sixth grade school children with the knowledge base necessary to prevent or at least halt sexual abuse. Unfortunately, like many other educational programs designed to deal specifically with the prevention of child sexual abuse, the GT/BT program has been widely accepted and adopted by many school districts without rigorous and systematic evaluation.

The major purpose of this study, therefore, is to investigate in a methodologically and scientifically sound manner the overall effectiveness of the GT/BT child sexual abuse prevention curriculum. Specifically, this study will seek to evaluate the effectiveness of the GT/BT program in significantly enhancing the

knowledge base of children exposed to the program in the area of sexual abuse and sexual abuse prevention.

Secondly, this study will also seek to answer questions related to a possible loss of knowledge and skill after a three month period. Finally, it has been suggested that pretesting may sensitize a child to the particular topic under investigation and that the use of a control group without initial measurement is necessary to examine such effects (Peterson & Johnson, 1984). This study will, therefore, seek to evaluate any pretesting effects inherent in systematically evaluating the GT/BT child sexual abuse prevention curriculum.

PREVIEW

## CHAPTER TWO

REVIEW OF THE LITERATUREHistorical Perspective

As a specific subset of child abuse and neglect, child sexual abuse has almost certainly existed for thousands of years, according to modern society's definitions of what constitutes child sexual abuse (Rush, 1980). References exist in the Bible that describe the rape of a child as a crime, but not a crime to the child's person. Rather, this was considered a crime of the theft of the virginity of the child, with compensation delivered to the father of the child (Roche & Toole, 1984). Rush (1980) stated that the Talmud allowed the betrothal by sexual intercourse of girls older than "three years and one day". Rush further noted that intercourse with a child younger than three years was not a crime, but was invalid as a betrothal. Despite the acknowledgement of an extensive history of the sexual abuse and exploitation of children, it has only been relatively recently that this topic has been a focus of societal attention.

Child Abuse and Psychopathology

In their landmark paper, Kempe and his colleagues

defined the Battered Child Syndrome as a clinical condition in young children who have received serious physical abuse, usually from a parent or a foster parent (Kempe, et al., 1962). Since 1962, there has been an extensive literature published focusing on the problems associated with child abuse and neglect along with a wide variety of laws and statutes which directly address child abuse and neglect.

In the earlier years of the clinical literature on physical child abuse and neglect, it was possible to find many commonly held but over generalized beliefs. Victims were thought to grow up to have certain predictable characteristics as a result of their experiences (Weinbach & Curtiss, 1986). Furthermore, these authors asserted that statements reflecting oversimplified beliefs in cause-effect phenomena (e.g., "an abused child will grow up to be a child abusing parent") often went unchallenged.

Current research (Gomes-Schwartz, 1985; Smith, 1984) points out the need to reassess much of what has widely been accepted as truth. It has also resulted in greater awareness among professionals that child abuse and its sequelae exist along a continuum, and that widely differing patterns of abuse exist. Weinbach and Curtiss (1986) stated that the early literature assumed

that victims bore deep resentment toward the perpetrator for their treatment, and suffered later from a variety of psychological difficulties. In addition, lists of victim characteristics were often seen, though few lists were in agreement. One presumed emotional aftereffect, low self-esteem, continued regularly to be cited in the professional literature, as were a collection of certain traits such as hypervigilance and anxiety. Although Weinbach and Curtiss (1986) did describe one population which seemed not to suffer from feelings of low self-esteem, namely an adult prison population who largely were unaware that they were victims of abusive situations, most authors assert that serious psychopathology is often seen in abused individuals.

Kaplan and Pelcovitz (1982) reported that several authors have documented the impact that abuse has on intellectual ability. They cited a number of studies in which investigators found that abused infants scored significantly lower on standardized measures of mental development when compared with controls. Furthermore, a higher incidence of mental retardation and placement in special education classes was also noted. Finally, these authors concluded that research on the emotional sequelae of abuse consistently revealed serious effects on emotional functioning.

Livingston (1987) also stated that serious developmental, behavioral, and emotional sequelae of physical and sexual abuse has been reported. In a methodologically sound investigation, Livingston compared physically abused children to sexually abused children's performance on the Diagnostic Interview for Children and Adolescents (Herjanic, 1977), a diagnostic instrument sensitive to a wide variety of psychopathology. Both groups of children were noted to experience significant psychosocial stressors in their lives. In addition, Attention Deficit Disorder was also noted quite frequently in both groups (20 of 28 children). Differences noted between the two groups included a significantly high degree of Conduct Disorder on the part of the physically abused children, while the sexually abused children demonstrated Major Depressive Disorder, psychosis, and anxiety disorder to a greater degree. In addition, the sexually abused children were noted to have been referred for sexual misbehavior as a common presenting complaint (Livingston, 1987).

The variety and extent of the psychopathology of the sexually abused children, noted by Livingston (1987), has also been reported by several other authors (Corwin, 1985; Gomes-Schwartz, 1985; and Kaplan & Pelcovitz, 1982). Of note are short term effects such as

regression to earlier behaviors, eating disorders, sleep disorders, enuresis, tics, or excessive fears. Corwin as well as Kaplan and Pelcovitz also reported that victims of sexual abuse have been described as demonstrating a lack of inhibition of sexual impulses, a preoccupation with sexuality, developing sexual dysfunctions such as promiscuity, frigidity, or failure to marry, and finally, as being depressed and physically harmful to themselves.

In a recent study of the severity of emotional distress among sexually abused preschool, school-age, and adolescent children, Gomes-Schwartz, et al. (1985) presented important and interesting results. All children and families who participated in the study were asked to complete a variety of research measures. Of the three groups, preschoolers (age four to six) demonstrated the fewest signs of psychopathology overall, but did exhibit more increased behavioral disturbances than nonsexually abused age peers. On the Louisville Behavior Checklist, the adolescents (age 14 to 18) tended to exhibit significantly greater signs of anxiety, depression, and obsessive concerns than their age peers. However, on the remaining 10 scales of the Louisville Behavior Checklist, the sexually abused adolescents exhibited fewer signs of psychopathology

than nonsexually abused psychiatric controls. Of marked contrast to the other two age groups, the school-age children (age 7 to 13) demonstrated significantly more psychopathology in every area (14 of 16 scales) except somatic complaints and a lack of socially valued interpersonal skills than their age peers, and more disturbance on five of the 16 scales than an age matched psychiatrically referred control group (Gomes-Schwartz et al., 1985). These authors concluded that their data suggest that school-age children who experience sexual abuse are the most vulnerable group for developing psychological dysfunction within a short time after the abusive situation takes place. Finally, they concluded that intervention programs are needed to assess the individual needs of the child and to treat emotional disturbances that can range from minimal harm to serious disturbance.

#### The Law and Child Abuse

In response to the early clinical literature describing the phenomenon of child abuse and neglect and demonstrating its ill effects, as well as to increased societal attention, the legal system began to assert a more active role in the early 1960's to combat the problem of child abuse. By 1966 all state legislatures