

Connecting the Dots to Prevent the Sexual Abuse of Children Through Collaboration

Prevention Webinar Presented by the Federal Interagency Workgroup on Child Abuse and Neglect

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Presenters: Pat Patrick, Vice President of Prevention and Education, Darkness to Light;
Deborah Donovan Rice, Executive Director, Stop It Now!

Melissa Lim Brodowski: [00:00] Hi, everyone, my name is Melissa Brodowski, and I'm the Child Maltreatment Specialist with the Office on Child Abuse and Neglect at the Children's Bureau. I just want to thank everyone for attending our prevention webinar this month on "Connecting the Dots to Prevent the Sexual Abuse of Children Through Collaboration." We're very excited about the speakers we have today from two national organizations that are just doing a tremendous amount of work on this whole issue.

The two presenters, as you see—Deborah Donovan Rice from Stop It Now!, and Pat Patrick with Darkness to Light—will be sharing information about their programs and their work, and hopefully we'll be able to get into some good discussion as well. And I basically just wanted to share a little bit of background before we get started.

On these webinars, I think many of you might have joined us before, but we've been trying to do these monthly webinars. It's been about a year now that it's been hosted by our Federal Interagency Workgroup on Child Abuse and Neglect, and we actually have a [inaudible] committee. So this Federal Interagency Workgroup really is comprised of over four different Federal agencies from a number of departments across government: Maternal and Child Health, and Substance Abuse Mental Health, Department of Defense, Department of Justice, Agriculture—they've all been tremendous partners in helping to prevent child maltreatment.

So part of what we wanted to do is really share a lot of the work that's been happening across our agencies with our different grantees and different initiatives. So that's really the purpose of all these informational conference calls. We're really trying to provide information and promote hopefully, greater connections from the theme of this call, collaboration, across all our systems and programs at the national, State, and local levels. So, we're excited; there's a lot of interest in today's webinar. I think we have over 100 people registered and a number of folks usually from so many different programs across the country and various Federal staff as well.

Just some logistical notes: We are recording this call, and what we have done in the past is post the recording as well as the slides after the webinar, and since the call is not operator-assisted, when you're not speaking we ask you to put your phone on mute. So if you don't have a mute button it's star 6 to mute and then star 6 to unmute.

That's pretty much what I wanted to share in terms of a general welcome. And then I did want to give an opportunity to our Federal partners and colleagues from the Office of Juvenile Justice

and Delinquency Prevention; they have been doing some work with Stop It Now! and possibly Darkness to Light as well. And Cecilia Duquela is a program manager. Cecilia, are you on?

Cecilia Duquela: [03:41] I am.

Ms. Brodowski: [03:43] If I can just turn it over to you to say a few opening remarks.

Ms. Duquela: [03:46] Great, thank you so much, Melissa. Hi, I'm Cecilia Duquela-Fuentes with the Child Protection Division of the Office of Juvenile Justice and Delinquency Prevention, and I work with Stop It Now! and with Darkness to Light, actually with Federal program managers for them for a couple of their previous grants.

So I just wanted to offer some brief opening remarks and a thank-you to the Office on Child Abuse and Neglect at the Children's Bureau, the Administration on Children, Youth and Families, Stop It Now!, and Darkness to Light for their kind invitation to our OJJDP and its Child Protection Division to participate in this important webinar and to offer some brief remarks today.

OJJDP is so pleased to collaborate closely with these agencies through the Federal Interagency Workgroup on Child Abuse and Neglect, the Federal Missing and Exploited Children Task Force, and OJJDP's Federal Coordinating Council. We're also proud to have supported the efforts of Darkness to Light to protect children from sexual abuse through our Federal grants programs. And to currently work with Stop It Now! to support their efforts to prevent the sexual abuse of children through partnerships with various organizations across the United States.

Protecting children from all types of abuse is critical to making our families and communities safer and healthier. OJJDP supports numerous programs dedicated to preventing child physical and sexual abuse, including, but of course not limited to, the Safe Start Initiative, court-appointed special advocates or CASAs, child advocacy centers, the Victims Act Model Courts Program, Internet Crimes Against Children Task Force Program, Project Safe Childhood, and family and dependency courts and commercial, sexual exploitation of children.

We are especially proud of our efforts to prevent the sexual abuse and exploitation of children and have established important and effective partnerships with national organizations such as the National Center for Missing and Exploited Children, Darkness to Light, and Stop It Now! As part of our Project Safe Childhood Program to keep children safe from online sex predators, we have included links to both Darkness to Light and Stop It Now! on our program websites in order to provide parents and potential predators with important resources and tools offered by these two organizations.

We view the work of Darkness to Light and Stop It Now! as critical to the Federal Government's efforts to prevent and address the sexual abuse of children. The knowledge and the commitment of these organizations and the fact that they do not sugarcoat the nature of the problem and the need to keep raising the public's awareness of this type of child victimization is crucial if we hope to one day eliminate child sexual abuse in the country. So thank you again for your

invitation to provide remarks, for putting this webinar together and we look forward to working ... continuing to work closely with you on this important issue, thanks.

Ms. Brodowski: [06:48] Thank you so much, Cecilia, that was wonderful. So now I'm going to go ahead and pass this on to Pat Patrick from Darkness to Light, who's going to do the first presentation and, I believe, you're going to see some transitioning of controls until Patrick gets his slides up. So I'm hoping ... There we go. Thanks, Patrick.

Pat Patrick: [07:18] OK, thank you. I'd like to first express our appreciation to OJJDP and our other Federal partners for very, very important strategic funding that really helped us to evolve to where we are today. We certainly could not have done that without our Federal partners.

As we think about the topic today, "Connecting the Dots to Prevent Sexual Abuse of Children Through Collaboration," we are all very, very well reminded that we are all experiencing tough economic times. Darkness to Light and Stop It Now! are certainly no different. But we're also aware that as times get tough economically, there is a tendency at times for us to get a little mean and ugly. Regarding our resources and viewing each other as [inaudible] provides an incredible opportunity for us to find creative ways to work together, to support each other around the cause of protecting kids from sexual assault.

Deborah and I have certainly entered into a number of conversations and certainly have a desire to look and create an interagency service array of prevention programs. Look at programs like Darkness to Light, Stop It Now!, there are others that would certainly be in that [inaudible], like Good Touch, Bad Touch, to make sure that we've covered all levels of prevention, primary, secondary, tertiary. [inaudible] When we think about Darkness to Light and what we have to offer, we focus primarily on [inaudible].

Interesting little distraction.

But that's really where our focus is: on primary, secondary prevention. Primary in the sense that we certainly want to prevent sexual abuse from happening in the first place, and, secondary, to make sure that we are reacting responsively, recognizing when abuse has occurred, holding offenders accountable for their behavior, as well as preventing the revictimization of these kids. You will see some overlap in our programs, especially as we address bystander prevention, but you'll also see some specialization. Getting support from communities one of the things that we do [inaudible].

Ms. Brodowski: [09:53] I'm sorry, Patrick—if we can just remind folks to please just put your mute button on by pressing star 6.

Mr. Patrick: [11:20] The other things that we do are work with communities in developing resource lists that they can use to address issues, like referrals in unique kind of behaviors like offender-specific behavior, or concerns around treatment needs. And that's really where collaboration, where Stop It Now! becomes incredibly meaningful. As we think again about connecting the dots, we really need to think about threading this on multiple levels—international levels as well as national, State, and local community levels.

Deborah and I sit on the National Coalition to Prevent Child Sexual Abuse and Exploitation, and they have recently, we have recently, along with about 30 other prevention agencies, have developed a national plan that addresses six key action areas. I mention this because these same areas are interwoven and dovetailed through the community efforts that we provide here at Darkness to Light and that I'm sure Deborah focuses on at Stop It Now!

First is research. Really want to promote the use of research to guide prevention practice and to serve as a catalyst for positive change.

Public awareness is the next item. To increase public awareness of child sexual exploitation and of effective prevention strategies. To end the demand, to identify and reduce the factors that fuel the demand for child sexual exploitation. To address policies and organizational practices, encourage the development and implementation of local, State, and national policies and organizational practices. To advance primary prevention and strengthen comprehensive prevention measures. Collaborative practices, doing exactly what we're doing today to promote multidisciplinary and creative collaborations to align resources to foster successful prevention and positive development initiatives.

And, of course, funding to increase the dollars invested in prevention and positive development. Those areas will certainly dovetail with what I'm going to share with you today in a number of the key elements as we address the issues in how Darkness to Light views connect those dots is really around community implementation or community replication. And those key elements have to do with public awareness, the intervention tools, having a powerful, effective prevention education program, a dissemination process, and making sure that you've got a way of getting programs to the people who really need it.

And to make sure that we're evaluating our impact, we've got to provide feedback groups for both quality assurance and quality improvement. We must continue to challenge ourselves to provide the best prevention products that we can. That they are doing exactly what we want them to do. We also need to focus on improving the response system for kids. We know that our current response system is sluggish at best and often broken. But if we don't provide prevention focus on what we're trying to do today, we'll never challenge the system to address the needs of folks.

As I share information about Darkness to Light, I just want to hit a couple of key things. Ann Lee is our founder and CEO. Ann is also a survivor of child sexual abuse and created this agency in part as a response to a tragedy that occurred here in Charleston, South Carolina, involving a private school.

We've evolved into an international nonprofit; we have facilitators we train to deliver our Stewards of Children Program in 45 States, plus the District of Columbia, and 10 other countries, and we hope to be adding the 11th country pretty soon. We have focused on creating awareness and education campaigns.

Our main focus is to shift the responsibility from children to adults. Child sex abuse, as we all know, is one of the only maltreatment issues where we present programs to kids and often hold them responsible to identify it and stop it. And while we believe programs that help children to find their boundaries—to help keep them safe—need to be coupled with programs that really address the adults since we are the ones that are charged [inaudible]. We really focus and promote research-based strategy prevention, and assisting communities with program replication, and helping our facilitators look at ways of blending public and private funds.

Our mission is very similar to the mission of organizations that use our programs. We have focused on a decentralized business model so that we really can focus on getting effective prevention programs through our dissemination point, which are our facilitators. As a result of both this model and our intent, we collect, we've established an extensive network of facilitators and instructors who are providing prevention programs directly in their community.

Connecting the dots at the community level—effecting real change, in real time, is really where the rubber hits the road. We all know the impact of child sexual abuse, so I feel like I'm preaching to the choir as I share this slide with you. But I do want to point out that if you look at the cost of how we put our Stewards of Children Program together, preventing just one case of abuse can free up funding to train 1,362 adults. So we're really pleased about being able to offer a program that's cost-effective and is going to be able to address prevention in a very meaningful way.

As I go further, I do want to make sure that we have a common definition of sexual abuse. We define sexual abuse as any sexual act between an adult and minor, or between two minors where one exerts power over the other. It is also forcing or persuading a child to engage in any type of sexual act that also includes nonsexual acts such as exhibitionism, exposure to pornography, voyeurism, and communicating in a sexual manner by phone or Internet. We're all very aware of the prevalence: 1 in 4 girls and 1 in 6 boys will be sexually abused by their 18th birthday, and more than 90 percent of children that are abused know their offender.

So now that we have a common language, let's look at what it really takes for a successful prevention initiative. We first have to have a very successful and powerful intervention program. The Stewards of Children program is an evidence-based program that focuses on primary and secondary prevention. We provide it in two formats: instructor-led and online. It's available now in English and in Spanish, and the curriculum is really based on a seven-step program that we created to protect our children. The program itself is DVD-run; it includes survivors, experts telling their stories and reinforcing the seven steps that we've created, and we've added something that we believe makes our training incredibly powerful. And those are consciousness training tools—ways that we can engage adults in a powerful way, helping them to move forward in a community toward resolve.

When we talk about communities, we think not just of geographical areas but also large, youth-serving organizations that really need to partner with us if we're going to be effective in reducing child sexual abuse.

Successful prevention models really need to follow either the social ecological model or the public health model. We're very pleased with how we've structured the Stewards of Children as well as the support of Darkness to Light. We really address both of these models.

[Talking from an attendee]

Jean Nussbaum: [19:35] Pat, just continue, unfortunately ... Just a reminder.

Mr. Patrick: [19:43] This sort of program is often cited as the ideal model of the social ecological model of prevention and, as I mentioned, also closely follows the public health model. We've all probably seen this diagram that talks about the interplay of the individual, a relationship through our social network, impacting community and impacting society. It's really important that we look at all of those factors and how they interplay to really lay out effective prevention programs.

We know from research and our experience, in programs like Stewards of Children that engage folks at the individual level, really move through the social networks, impacting community, large-use serving organizations, [inaudible] society as a whole. We know that part of what helps makes this powerful is that we've created a contamination effect. People who learn the seven steps that we teach in this program actually go back to their agencies and organizations and share that information with others. We're doing exactly what we wanted to do to really effect the kind of change that we want for kids.

As we look at the public health model, I just want to mention, briefly, that again we've put some energy into finding the problem, looking at those seven steps to make sure that we're addressing those issues—in fact, the first step is to learn the facts and understand the risk—that we also spend some energy identifying the risk and those protective factors. We have looked at what the highest risk areas are for kids. Organizational policies, one-on-one situations between kids and adults, older and younger kids, kids not having good information about their bodies, not knowing about sexual abuse.

So our seven steps are designed to address all of those issues. Real quickly, the seven steps are: Learn the facts, understand the risk, minimize opportunity, talk about it, stay alert (in other words, learn the signs of sexual abuse), making a plan, knowing how to react to disclosure, mandated reporting, acting on suspicions, and getting involved.

So we're very pleased that we've landed on some key elements that we know are effective in protecting kids. We know that to be effective—and this is information that we've gathered through the many, many communities that we've worked with to put together successful prevention campaigns—there are some important components that we have to be aware of. We have to look at the structure of the organizations and the community so that they can be positioned in a way to be the most successful in carrying out a prevention campaign.

We have to have education and public awareness programs that are effective. We have to look at the characteristics of those receiving the training—we'll talk a little bit more about that, and what we look at is vertical markets. We need to be very clear and intent about our training goals in identifying the number of adults that we want to train. We want to make sure this initiative is

permanent; we want to make sure that it's cost-effective; and we want to make sure that funding is available for the long term.

The organizations that are most successful in implementing prevention programs, especially Stewards of Children, are those that have extensive community involvement. Our key distribution point continues to be the Children's Advocacy Centers, but we have more and more organizations joining us. As I mentioned we have over 1,700 facilitators, and they represent about as many organizations and nonprofits. For a community to be successful, or an organization, there needs to be a position at least part time that's devoted to this effort.

And there needs to be a network of individuals who can actually carry out a prevention program. For us those are facilitators who actually work together to support each other in making this happen. This is not easy work; we still are dealing with organizations and with communities that would rather not talk about this issue. So a lot of our efforts really need to go into social [inaudible]. In summary, what we need for an effective replication program is a champion, someone who really gets it and wants to move their community forward, an educational infrastructure to actually deliver a training program, and funding to make sure that the initiative is longstanding.

As we work with communities, we have a number of examples at national, State, and regional levels, as well as a county level that I'll talk about a little later, as well as large organizations. But I do want to mention some of the organizations that we worked with and that we've adapted Stewards of Children. That includes education, child welfare, and juvenile justice; but I'll talk a little bit about those a little later.

If you look at successful implementation projects—we want to create something that really has an exponential effect in growing a community. And the best way to do that is really to bring folks together, again connecting those dots at a community level, through a coalition, committees, steering committee—whatever you want to call it—but it's a group that really represents those folks that have an interest in our stakeholders in a prevention movement.

And as you see we have a number of the key organizations listed here, and sometimes, just because of management, you might want a more honorary committee for name recognition and then one that really works to implement the program, kind of again where the rubber hits the road. But as we put this together we're really talking about social activism. Most of us address prevention like we do in our work with our intervention agencies—but for this to be successful I cannot minimize the importance of putting these committees together that can work together to make this happen. Not only to deliver the prevention program but also to support each other. As I mentioned, it's tough work, and we need to be able to support each other to make this happen.

What makes a successful initiative? As I mentioned earlier, we have to have programs that we're delivering that are empirically proven to be effective. We've spent a lot of energy and expense in making sure that Stewards of Children is doing exactly what we want it to do. From the very beginning, when Stewards was first launched back in late 2004, early 2005, we conducted a within-subjects design to look and see whether there was an increase in knowledge, change in attitudes, and most importantly a change in behavior. And we found that that did occur.

There was an increase in knowledge of 38 percent in the initial pilot, a shift in attitudes and specific behavioral changes that went right along with the seven steps that we teach. Following that evaluation, we continued and just completed an evaluation on the online format using a nonequivalent group design where we had an intervention and control group, and we found the same results.

We have since conducted a number of other research projects to include child welfare, juvenile justice, as well as community projects (one of our local counties that implemented Stewards of Children), and we find the exact same trend.

I do want to mention child welfare and juvenile justice specifically. That was a group in which we targeted professional foster care workers, child protective services (CPS) workers, staff, and probation, parole, and the institutions. We were expecting not as much of an increase in knowledge and were hoping for an increase in behavior, and what we found was it was almost 20 percent increase in knowledge among this group, and we found the very same behavioral changes as a result of the training.

What we also found is that we heard back from workers on many occasions that while they have the knowledge to work with their clients, what they learned were skills and ways that they could address the safety of their own children. So we're very pleased about those results. We are currently involved in a Centers for Disease Control-funded study through the National Crime Victims Research and Treatment Center to look at the instructional education model again, the online model, and a comparison between the two.

Our principal investigator, Alyssa Rheingold, and I were talking about the preliminary findings that look incredibly encouraging. We're already seeing a significant difference in knowledge acquisition and in change and behavior, again mimicking what we saw in the previous studies. What we're also seeing, since folks that were chosen for this study—and it's a controlled randomized study—had counterparts who did not receive the training within their same agency. What we're beginning to see is a slight increase in knowledge and behavioral change of those who did not actually participate in the training.

And we're going to be analyzing that further, but we're believing at this point that that really is helping to validate the contamination that we want in this kind of a program so that folks who leave talk about what they saw and share the information, so that we're extending that protection for kids.

I mentioned earlier about vertical markets. Here is a nice listing of folks who need to be at the table and need to participate in prevention training. We spend a lot of time and energy looking at each of these groups to make sure that they're involved in any kind of community replication project that we're involved in.

When I mention schools I'm talking about preschool, early education, K-12, and higher education. Faith centers, I think, is pretty obvious to all of us. Youth-serving organizations would really be those children of advocacy centers, prevention, intervention organizations, community,

residential treatment programs, mentoring programs, etc. There is an emerging group within here that we might want to further categorize at some point, and that is health-care professionals who really need to be focused and impacted in a very specific way. And of course youth-serving ... youth sports organizations and parents. When we say parents we're talking about parents, foster parents, public, and therapeutic parents.

To make an impact in a community, there's a theory that we've come up with based on our pilot evaluations and based on feedback that we've received from our pilot partners. We believe, and again this is an [inaudible] critical mass toward protection. At that point, the theory that we're operating from—we have a number of communities that are getting close to that, and that's actually beginning to validate what our hypothesis was. We know it isn't going to happen overnight, that it takes multiple years to be able to implement this kind of program.

We're seeing already from the number of projects that we have in operation, that within about a 2- to 3-year period, there is truly an exponential factor that seems to kick in. At about the second and third year, organizations start becoming more and more aware through public awareness, through knowing folks who have gone through the training. From word of mouth, and folks are beginning to come to the table more and more asking for the training. So we're really pleased with what we're seeing and looking forward to sharing that information with other communities.

The other item on here is long-term funding. We all know that's crucial for any program to be successful. We also think it's really important that you begin to have conversations about how much of your budget (when you're looking at implementing a prevention program) is going to go toward the infrastructure and how much of that budget is going to be protected to go toward programming.

And so this is what we've found to be most effective with organizations that implement Stewards of Children. We also find that whatever you offer—and with Stewards we do have a revenue stream that comes from Stewards as well as grants that we help our facilitators obtain so that you never turn anyone away. And here's the breakdown that we have found. A third of the folks out there needing the training can always afford what you have to offer. A third will need some kind of partial assistance with scholarships, and a third will need full scholarships. So we make sure that, as we work with organizations, we have the dollars on the table again so that we never turn anyone away.

And again, as you can see here, funding is certainly crucial. Long-term funding ... and it is certainly effective with grantors and philanthropists as they learn about how we implement the prevention program.

Briefly, this is the listing of supports that we provide in our prevention model, Stewards of Children training, that I've spent a lot of time discussing with you. Facilitator training is where we prepare someone to deliver the training. We have a new tier, the instructor training, and as well as education materials, website supports, and a 24-hour hotline that you can call anywhere in the country and it routes you to the 211 helpline in your area for your resources and assistance.

We developed a Prevent Now! model, a funding strategy, to help our facilitators get the resources they need to implement a prevention program of Stewards. And then we have another item, advanced courses that are offered for folks like policy and procedure development, a public awareness media campaign that's available through Darkness to Light, and a brand-new model that truly does connect the dots together at a community level called Prevent-a-thon. I'm not going to have a whole lot of time here to talk about Prevent-a-thon except to say it's a media-led, monthlong event here that can be implemented and replicated in any community that also includes Stewards of Children training as part of that media awareness package.

And we also offer consulting services to our facilitators and anyone that's interested in implementing a prevention program. You know that each communities of it differ with their priorities and their needs. And that we're honored to participate with communities across the globe.

And I mentioned earlier about some of the customization or adaptation that we've done with child welfare, juvenile justice, education, and foster parents. With those kinds of programs we actually go into an organization or a community through focus groups, look at the Stewards of Children training, and see if there are some unique issues or tweaking that we need to do especially around the discussion points.

In the instructor-led model, the DVD stops at three points, and there are facilitative discussions at those three points that engage the audience around resolve. To begin having some tough conversations to make sure that we are reinforcing the learning skills and the training and giving them the support they can continue those conversations once they leave that training. That becomes especially important when you're working with school systems or CPS agencies—to really make sure that we're hitting the key issues that are going to be most important to them.

We have several communities that are getting close to the tipping point. And as I mentioned earlier, we're beginning to see the impact of that. We're beginning to see discussions and impact on response systems; we're beginning to see the demand of Stewards of Children training to continue within those communities; and we're beginning to see an increase in some of the geographical areas in the referrals to CPS and children's advocacy centers. Which is exactly what we would expect in the beginning as you're helping folks to recognize the signs that hopefully you're getting kids identified and getting them to the appropriate resources. So we're very pleased to see where that's leading us.

I know that was a lot of information, and hopefully we'll get a chance to answer some of the questions about specific items, and, just for your information, this is how you can reach us through the website, and also you can reach me to talk more about your community and how we can help you implement a successful prevention campaign, whether it's a geographical area or within your organization. So I'll turn it over to Deborah at this point, and we're going to hold questions until the very end. And, like I say, we'll be able to answer those for ya.

Ms. Nussbaum: [37:44] Thanks so much for the presentation, Patrick. Everyone, this is Jean, and before we move on to Deborah's presentation, I just wanted to remind folks to, please, I just wanted to remind everyone to please mute your line by pressing star 6 just so none of the

background noise is distracting to anyone who's on the call. Again to please press star 6 to mute your line. We will be taking questions at the end of the call, and I will be emailing folks. And I will also be emailing Patrick the contact information.

Deborah Donovan Rice: [38:48] Good afternoon, everybody, I hope you have your cup of tea, or, for those folks in Africa, a big hello and wherever other folks might be pushing into their bedtime to join us today. I also wanted to say "Congratulations" to Darkness to Light for the cultural shifts that were mentioned in those ending slides. That's huge. It's really huge, and Pat and I have enjoyed working together over the years in a variety of ways.

I also wanted to say thanks for having those pictures of those beautiful children to remind us all why we're here. And I just want to comment that this presentation today actually marks a milestone in terms of the childhood sexual abuse (CSA) movement that's been around for 25-plus years, but two national organizations presenting on the same panel is ... I'm not sure that's ever happened before. So I'm pretty tickled.

Now, these trees, I'm afraid to tell you that they are completely covered in snow right now, and it's gorgeous up here. But I wanted to tell you a little bit about how Stop It Now! got started. In the early 1990s, a woman just like you and I, or at least the females in the group, looked out her window at just such a scene and cast her mind back to when she was 14 years old. She was asking herself the question, what would've made a difference for me and my family? Then she realized, "I wouldn't have been able to tell anyone what my father was doing to me."

She loved him, and holding this question, she asked ... she started having conversations with other people about their thoughts. Others who had been hurt like her, those who have sought help for hurting others, and those family members who were also affected. Not stopping there, she had conversations with professionals who have been working for many years to prevent violence, and by now many of you will know I'm telling Fran Henry's story, the founder of Stop It Now!

I think that many of you who are participating probably know the public health story of moving upstream where, you know, you see something is happening, people are getting hurt, as in child sexual abuse, and you want to rescue them, but public health asks us to think about moving upstream to what are some of the root causes. And that's exactly what Fran did in her thinking, and her vision was informed by considering what are the root causes and also by asking the hard questions. She and her founding staff forged innovative programming relying on collaboration as the key.

The central premise of our work is just this. And I don't think we have any argument about that, and that's where we can see some common ground. And then, for today, I wanted to especially bring up this slide, which shows how many of us, those of you are listening as well as the panelists, we are part of an interlocking puzzle here. And that's where we begin to talk about this work and that this common bond—that the right of all children to grow up free of trauma in respectful and nurturing relationships—hopefully, we can get this into some effective programming. And for Stop It Now! it's always been the approach—to have a comprehensive view of what's going on. And our goal was to shift responsibility from children to adults, and, of

course, Fran came up with this at a time when most of the programming revolved around child safety and were child-focused.

The other innovative piece from the perspective of Stop It Now! is that we also wanted to shift responsibility from victims having to protect themselves or being responsible for what happened to the bystanders and the victimizers who were part of creating the situation or collaborating in the situation. Finally, we wanted to add the public health approach to what was already existing in terms of a criminal justice approach.

The Stop It Now! program reached out to adults to preventive use based on very ... you know, this is where there's overlap between D2L and Stop It Now!, we've ... the recognition that research is critical both research of our own programming but also the existing literature around child sexual abuse. And also in the case of Stop It Now! initiating original research around risk and protective factors for first-time perpetration and child sexual abuse.

And then education, public education, public policy, and advocacy—I'm going to talk more about each of these categories as we go forward. And research-based methods. We have relied on public opinion surveys, random digit dial surveys, pre-imposed, any interventions and any of the communities that you see listed here. So we have gathered a great deal of information and eventually, probably later this spring, we'll show the report on our website for anyone to go to look at what these opinion surveys have showed us. And I'll give you a little glimpse into those in just a couple of minutes. We've also used focus groups and interviews to inform our programming and the traditional process in training evaluations.

The meta-analysis is what I want to talk about just briefly, and you can get more information from me back channel if you'd like. But it was a meta-analysis of literature through 1990, and ultimately 89 studies were analyzed to look at the risk factors for first-time perpetration of child sexual abuse. And the quick summary is that harsh parenting was the most correlated attribute that would determine whether someone might go on to become a person who sexually harms children.

I'm not going to go into detail about this slide, but what it does is it illustrates—and you'll have it once this program's over—it illustrates the different levels that we work on that move from individual to community to professionals, and through coalitions our work continues—and changing organizational practice—and also including policies and legislation. So from early on it was always determined that we would work on all these levels to try to have the greatest impact. And then over on the right-hand side you see some samples of our activities, and I'll be talking more about those in a couple of minutes.

Our publication, actually, these guidebooks are available, and you'll see “Do Children Sexually Abuse Other Children?” That's the most recent one to be revised and updated. And these all run about 20 or 30 pages, so they're fairly thick with information.

And then we have our helpline service, and these are the steps that we go through to ensure that our helpline is the service that we want it to be. Our helpline is a toll-free national line that's been in operation since 1995. And we offer confidentiality; limited confidentiality, certainly—if

we have enough information we do file a report. And then we ... these calls [refers to data on slide] this is who calls us, we've got a lot of calls from professionals wanting assistance. We hear from survivors, and we hear from the family and friends, most of whom know both the person that ... the child that they're concerned about as well as the person at risk or the person who's already committed abuse. And we also hear from people who have concerns about themselves.

I think we all would agree that we know families are impacted and that the "stranger danger" myth is just that, and there's the bystander knows both [data on slide]. And building on these years of the helpline we had started in early '08, we started building what we're calling the Online Help Center, and we took the messaging from our callers, which is the "I can't tell anyone," "I'm the only one," situations are different, the powerlessness that they felt, and the shame and anticipated judgment.

So we realized that one way to address some of these needs and possibly reach, well, not possibly but definitely, reach more people is through an online help center. And again it's as anonymous as you can be on the web, and it has tailored information and customized information based on our helpline calls. And it urges people to take action, and I'm going to show you a little glimpse of what it looks like.

This is our Online Help Center, which is just one part of our website, and you would go to it and click on the "Get Started," and from "Get Started" you would get this page, and if you are age 17 or younger, you're given resources that are outside of our site. If you're 18 you are put right into the program, and then it asks you, "What are you most concerned about—a child or a teen in a situation involving an adult?" And I've chosen to show you the one about a child or teen in a situation involving another child or teen. And then it asks a couple of basic questions: "What's the urgency?" "I don't know if abuse has occurred"; that's the one that I chose to show you.

And then you click on "Get Results" and getting results you get onto a landing page that gives you some context for what you're about to read. And if you're in a big hurry, don't have a lot of time, you go over to the right-hand side of the page to your key steps, and you would click on whichever one of these categories would be most seeming to match what you needed at that moment. Or if you have more time you can click on "Your Help Center" or any one of these categories, and that opens up into another menu, another dropdown menu with several other links to other information—not just resources but additional actual knowledge about the issue. So I'm choosing to go, I'm in a hurry, so I'm going to go to your key steps, understanding sexual behavior of children. And this is one piece of what I would get. This isn't the entire chapter in this book, but that's some of what you would get.

So then other than our online help center, we also have had community-based programs over the years. The first one was in Vermont, and that was a collaborative effort with a local church, with Safer Society, an organization that's been around for a very long time to assist and provide resources for anyone wanting to learn about sexual abuse, sexual abuse treatment, and referrals for treatment providers, and they, also, they're a publishing press.

So these are our programs. The Vermont program is no longer in existence, but Virginia, Project Pathfinder, and Prevent Child Abuse (PCA) Georgia all have Stop It Now! programs and Joseph

J. Peters [Institute]. The Project Pathfinder Minnesota program and the Georgia program are part of a pilot study through the CDC.

And then this is the basic tenets of a community-based program model. I think D2L and Stop It Now! share these steps, as well as many other people do in community-based work. And the Vermont collaboration—here's the description. It piloted something called the public dialogue, which was a panel for a person who has been sexually abused: a survivor in recovery, a person who actually has been in treatment for sexual offending, a therapist of each of them. And then it was a public dialogue with them telling their stories.

And then evaluation of the Vermont—this is just to get back to the random digit dial survey. Information that probably everyone already would've guessed to be true, that adults increase ability to talk about sexual abuse, but people at risk to abusing their families call for help, but they don't know what actions to take. And these are the same results that we're getting from our other random digit dial surveys, the more recent ones.

And I'm just going to go quickly through some of the ad campaigns because all of our community-based programs also include a social marketing campaign. This is an early Philadelphia ad. And here is our UK sister organization. Virginia.

And then this is the Minnesota campaign, which is, obviously, the most edgy and was a very successful campaign in doubling the number of calls to our helpline—period. Not just of people concerned about their own behaviors but others as well.

And here's an example of a prevention and action in the Georgia program. They had a helpline call; they coached the person on our "let's talk" method, which is in our "Let's Talk" booklet, and then they got a call from the community asking them to develop a ... to consult with them to develop a community prevention plan, which they did—a 3-hour training—and then that resulted in the publishing of "Ground Rules" in a neighborhood newsletter, for what to do if a sexual offender moves into your neighborhood, among other things. All this is a lovely social ecological model again that you've seen before.

And I just wanted to throw it up here: I think that this is another way to think about how all of our work overlaps. Not just Darkness to Light and Stop It Now!, but those of you who are participating today in the webinar. I think we all work ... our programming either covers all of these or some of these.

I just wanted to put up a frame that begins to help build that commonality. This is one of the ... a quote from a woman who called us on the helpline. With her permission we're allowed to quote her; and these are the kinds of calls that cause no vicarious trauma and make us very happy that someone is being proactive. And then I'm going to quickly go through some of our basic values.

Our core values for Stop It Now! include that children have a right to safety and well-being, and supportive, safe, and nurturing families. We have always held the place for hope and possibility that prevention is not inevitable ... that child sexual abuse is not inevitable, it's preventable. And that there is hope to respond to the possibility, and there is hope for healing and recovery. On our

website you'll see our stories of hope that reinforce that. And that our integrity we express by the fact that we support adults to stop the secrecy and hiding and take action so that they can live in integrity to themselves, their families, and their communities. And that human dignity is a key ingredient; that each person has value and deserves respect.

So this is some of the more out-of-the-box thinking that Fran and the staff and current staff have come up with. Which is that even the person who has sexual thoughts toward children deserves to be valued and respected and held accountable. And everyone has a role to play. These are tried-and-true, certainly, things that we all know and that we're all connected to the problem; therefore, we all have a role to play in preventing it.

And [refers to slide] "Connecting the Dots: Plans for the Web Platform." We built this brand-new website with the intent to make it interactive and for it to be a knowledge-sharing platform. And when I say knowledge-sharing, we built the Online Help Center, which is essentially a book with many, many chapters, and that information is put up in—what is the term that's been kicking around the last year or so?—which is in the creative commons so that anyone can go there and benefit from it, use it, apply it, and then, hopefully, make children safer.

And also make adults more informed so they can take the action before anyone is harmed. And then, so, to make it interactive, our plans going forward—beginning in March we will initiate a prevention forum, and you all and anyone here is invited to participate in that as we send out ... If you give us your contact information we can make sure you know about when it's happening and how it's going to be set up and how you can be involved.

We also are asking people to participate in surveys so that we can take the vast amount of information that has been gathered over the life of Stop It Now! Our trainings from all our work, at the national level as well as the community level, and our guidebooks, and everything, and start to begin to tailor that and determine, well: What is there really a demand for? And how can we put it up on the web in such a way that it's accessible to the most people and the most cost-efficient way? Which would be in the form, we hope, of online trainings.

And then there'll be a blog or multiple blogs, depending on how many people want to join us in that process. And we will continue to do policy and media advocacy with more of a presence on the web that will assist people in doing their own work with policy and advocacy.

Here is the homepage of the new website. And this is an example of what I mean by resource sharing. How many of you are aware of whether or not your State has a sexual violence prevention plan? Maybe most of you are, but for those who are not and are looking for model programs, I can point you to the Minnesota plan, the Virginia plan, and the Vermont plan. The Vermont plan is with the result of a collaborative effort of people across the State in child sexual abuse prevention. And Prevent Child Abuse Vermont was a key supporter and leader in this effort to have a plan that was comprehensive and included some very innovative programming that they're doing that touches on all the levels of prevention.

But these are just training examples of some of the trainings that we've done in the past. Now, whether or not these training examples will be part of it going forward is to be determined by the

feedback that we get from the people who come to our website and that are interested in having programming and bringing programming to their work.

We're most interested in seeing the information that we have to offer being embedded in existing infrastructure and being utilized in ways that make sense for the individuals who want to take it on.

So I'm going to stop here and open it up for questions. [inaudible] Here is my contact information.

Ms. Nussbaum: [1:00:50] [asks a man who is talking to put his phone on mute] ... I'm really sorry about that Deborah.

Ms. Rice: [1:01:10] I guess people could hear what I was saying mostly, though, since it was toward the end: That we really want people to be able to embed the information that we have. Take it, use it, make it yours in your settings and at the same time we have a whole other level of expertise and trainings that can be used. We have organizational policy trainings; I threw up the list, but I don't want to belabor that because I just wanted to be sure to introduce you all to our work.

And I think we'll take questions now.

Ms. Brodowski: [1:01:44] OK, that's great, thank you so much. I mean I think that was a lot of information and really some exciting work that's happening. So I really want to encourage folks now after we've been telling you to put yourself on mute, now, you know, if you do have a question either unmute your line. Press star 6 again, ask a question for either of the presenters. I know that Jean is also monitoring whatever people are typing on the online chat function.

Audience Member 1: [1:02:22] Yes, ma'am. My daughter started humping stuffed animals and pillows, couch arms, items such as that, before she was 2 years old, and she's been disclosing sexual abuse to advocacy center interviews since she was 34 months old or younger, and she's demonstrated with dolls, she's illustrated what's happening to her. She's told who is doing it, and they discredit what she has said every time. They have asked her when it happened, and I know that the manual says a child has no conception of time, distance, or space, I mean so I ask ... the child shouldn't be able to tell you exactly when it's happening, but I mean she has told who and showed with the dolls what's going on. These should have been substantiated cases, shouldn't they have not? By the Department of Human Services (DHS) and Crimes Against Children Division (CACD)? ... Hello?

Ms. Rice: [1:03:57] You're asking if we think they should've been substantiated cases?

Audience Member 1: [1:04:03] Yes, ma'am. With her disclosing the abuse, telling who has done it. She's even showed with the dolls.

Ms. Rice: [1:04:09] I can't comment on your particular case, but what I can say is that I know that we get calls from people who are in similar situations to yours, and it's where it appears that

the system somehow hasn't been able to find a way to give the support to the family and the children in a way that seems to match the needs.

So I know that the complicated picture, I can't really comment on your particular case, but these are very concerning ones, and I don't know what your next steps are. I think that if you ... We have a section on our Online Help Center around what we call system failures, that you could certainly check out—system failures at the Online Help Center. That'll give you some thing to read up on to see if there are other possibilities. You're not alone, and I certainly appreciate your trying to find the help for your daughter.

Audience Member 1: [1:05:38] Yeah, I've been helping for 4 years. They have physical findings, sexual abuse, medical examinations. CADC lied and said that there were no findings. They discredit her every time. Usually, a reason, because of this Federal mandate ... I mean, they've violated every Federal mandate that they're supposed to follow to serve children and their disclosures, and ...

Ms. Rice: [1:06:10] You sound very dedicated to getting more help.

Audience Member 1: [1:06:15] I've been fighting it for 4 years.

Ms. Rice: [1:06:17] I would encourage you to check that out and then maybe give our helpline a call if you'd like, and you can talk some more about it.

Mr. Patrick: [1:06:32] Deborah, if I could just ask as well to the gentleman—I certainly commend him for wanting to get the help for his daughter. And, as you said, Deborah, if was difficult to answer the individual cases. One of the things that we often say to folks as we go into especially education and some of the other [inaudible], is that you feel like a child—that you've made a referral to an advocacy center or child protection service or law enforcement.

If you believe that the child continues to be at risk, at least take it to another level, and have a conversation again with that caseworker or police officer. And perhaps even a conversation with a supervisor, just making sure that everything has been done that would reduce the risk for that child. And get folks the best opportunity to get the information that's needed perhaps for taking the next steps legally. But we do suggest that folks take it to that next level if they believe that their child continues to be at risk.

Audience Member 1: [1:07:46] I've pretty much done everything that he said to do. Well, I don't know, CACD, which is the Crimes Against Children Division of the office of State police, refused to even come to the, what they call the staffing, where they had everybody present to discuss the investigations and how they were conducted. CACD refused to even show up.

Mr. Patrick: [1:08:15] I would suggest that maybe we had a conversation offline.

Audience Member 1: [1:08:18] That would be fine.

Mr. Patrick: [1:08:20] If you would like to give me a call, I'd be more than happy to comment.

Audience Member 1: [1:08:25] Your number?

Mr. Patrick: [1:08:28] 843.565.5444.

Audience Member 1: [1:08:33] And your name, sir?

Mr. Patrick: [1:08:36] Pat Patrick.

Audience Member 1: [1:08:38] Thank you, Patrick, I appreciate your time.

Audience Member 2: [1:08:53] I have another question? This question is kind of related to education more broadly, if people from Stop It Now! and Darkness to Light are still on the line. I sit on a sex offender management task force, and we have a small grant from our county and our State—the county Department of Mental Health and State Office of Sex Offender Management—to do some community education regarding sex offenders, and sort of the reason I've volunteered to be a part of the project is because I really see it as child sexual abuse and child sexual abuse prevention.

And the part that has really led me to your websites and why I'm so happy to be a part of this was I really do believe that the focus needs to be on adults protecting children. And not so much on the “good touch, bad touch” stuff that we do with young kids. And I wondered if you all could speak a little bit to—if you've done any multidisciplinary education—where you go into a community, and you bring the probation officer and a treatment provider and an advocate and do kind of a team ...

Audience Member 1: [1:09:30] Right, that's what all the interviews at the advocacy center were. She has been disclosing since she was 34 months old. I mean the earliest that I have record of was January 3 of '06. Actually that's when they had physical findings of sexual abuse at the children's hospital. And then the interview was done the 17th of that same month in 2006. And they had physical findings and she disclosed in that interview, but they didn't do anything. But they had a multidisciplinary team, or they supposedly did have, where they had the prosecutors, and they've counseled her for inappropriate sexual behavior.

Mr. Patrick: [1:11:09] Sir, actually I believe what the questioner is asking about is when we go into communities and work on a larger scale. But with your individual issue if you'll give me a call offline, we can talk further about your unique situation.

Audience Member 1: [1:11:25] Yes, sir, and I will.

Mr. Patrick: [1:11:27] If you'll mute your phone, star 6, and I'd like to get a chance to respond to the question around community connections.

When we go into a community it is important for us to hold what we often [inaudible], and that's what we bring folks in that community that have an interest and stake in a prevention program. That would include folks with the Department of Education, child welfare agencies, prevention

agencies, traditional partners like those that I mentioned, child advocacy centers (CACs), and others, and nontraditional partners like faith centers, other kinds of organizations that would like to and need to be involved in this effort, Boys & Girls Clubs, etc., etc. Legislators, potential funders—they're all included in that initial meeting to bring folks around the table to make sure that we all understand what the issues are and what are some ways that community can begin to address those issues.

It's often done with our documentary, which shows clips of the training and then helping folks to begin to think about their scope, their reach in moving forward. We are connected to a number of groups that are involved with sex offender management. And we want to take it to a different level, to include basic effective prevention training as a way of educating the community and having that as a complement to offer while they're also putting energy into managing the offender.

That's exactly what we're doing. I'm sure Deborah does something very similar in bringing all those folks around the table, helping them to decide where their community is and what would be the next logical step.

Ms. Rice: [1:13:21] Yes, we also have a stakeholder training, but on our website you can go to—and I was just looking it up—but we have a section on sex offender registries, and we use that terminology not because ... We are well aware of the research that shows that residency restrictions and registries don't, aren't necessarily effective.

But we know that's where the conversation begins, so we have a section on our website, if you go to the home page, on the left-hand side, it will say "Sex Offender Registry FAQs," and within the FAQs there is quite a bit of information. And one of the pieces there is a description of how one community conducted such a, sort of a, neighborhood intervention. Plus, there's additional information about what communities can do. So I think that's a good starting place and then I'll follow-up conversation, be happy to have that as well. Thanks very much.

Audience Member 3: [1:14:25] Could you speak a little more to getting folks around the table? The area I work and live in is a very rural area, with very small-town values. And once we get folks in one-on-one conversations, then it's like a big epiphany; they understand what we're talking about, they understand what we're doing, but to try to get them, even those in the professional capacities, to ... come to the table, to come to a series of children's training, to even have a question-and-answer period—we might have one or two show up.

And this is for anywhere from just parents or community members to those that are involved with protecting children. And so how do you get those folks to the table when they just want to turn a blind eye?

Ms. Rice: [1:15:26] I don't know, but I have several ideas. But the one thing that pops into my mind is, you know, with those few that you do have some rapport with, and I'm going to speak on behalf of D2L, but I think the Prevent-a-thon model, which I know very much about, is a good way to change the norm in a community by creating a sort of ... It changes the gestalt

around the community attitude by people hearing the information in this group setting. Pat, I believe you can take it from there.

Mr. Patrick: [1:16:05] That was actually a beautiful lead-in, thank you so much, Deborah! The Prevent-a-thon model—this is our third year doing that. The first year that we ... actually, it will be our fourth year coming up on this Prevent-a-thon.

Our first year we were just getting started. We started with media to raise the awareness; we started the Prevent-a-thon with a media campaign to make sure folks were aware of our part in our community. We started, as I said, with a documentary showing on our WCIV affiliate to begin to raise that awareness and follow that with a town meeting of folks here in the Charleston area, which is where our home office is. Something about why this is an issue for the Charleston community.

Then every day for a month—as I mentioned earlier we chose the month of August. You do everything else to get your kids ready for school, so, invest in their safety. Help to prevent child sexual abuse. So we use that as kind of our theme. And then we offered free Stewards of Children trainings that were underwritten by the business community—that again brings them into the mix, co-branding the materials. So it's a win-win situation for the business as well as us, in protecting children.

And then, slowly but surely, the word got around. Folks went for those trainings and sometimes we would have two or three people show up for a training in the very beginning. But with word of mouth, people were going back talking about what they saw, talking about how it impacted them. It slowly began to build. Now, the other key component was to bring in folks at the committee level who would bring in their constituents, their staff, their volunteers in those beginning phases so that you've got that contamination factor for folks to leave talk about it to others that continue to build those classes.

In the third year that we just finished, we had up to five trainings a day and as many as 100-plus folks that were at some of those trainings. So again, over time you are able to raise awareness and help folks to realize that this prevention training is something that they need in their community. The social marketing that we all have to do—it's tough out there, knocking on doors and being turned away because we still don't want to talk about the issue and want to pretend like it happens somewhere else. And unfortunately, after a tragedy within a community where a child has been victimized and it's gotten a lot of public recognition, that's when the community is often ready to do something.

But we've got to keep working them at the prevention stage to, hopefully, keep that from happening in any community. But, yeah, I hear your pain in getting folks around the table. I will be in Greenville, Mississippi, which is a very rural area. Very pleased to see the work that they've done in connecting with the right people to bring folks into the same room to begin having this conversation. So please feel free to give me a call or email me, I'd be more than happy to work with you and help provide some materials that might help you engage your community.

Audience Member 3: [1:19:26] OK, thank you.

Ms. Nussbaum: [1:19:28] Pat and Deborah, I have a couple of questions.

Audience Member 4: [1:19:32] Hi, I work at CAIC in Oregon, and I just developed for us a new website, and I'm really looking to use the anonymity factor of the Internet in order to reach some of these people who are having thoughts about offending and having sexual thoughts about children. So of course I'm linking to Stop It Now! because you guys seem to be the most comprehensive outlet for that sort of thing. And I'm curious if there's any research you've done regarding how effective this is with people or what ... how much of the population who does offend would actually utilize such a resource? I know that's really hard data to gather, but what do you have about the effectiveness of that?

Ms. Rice: [1:20:26] Yeah, good question. With the new website we just launched February 4, it's still in beta version. We'll be able to track ... Well, I'm going to just crack the myth right here about anonymity on the website because really, there isn't such a thing, but we all think there is—and we have privacy uses and terms of use, and we tell people that the privacy is very limited on the web.

But, I think, some of you may be aware of Google Analytics? Where you don't have the information on the person's name or who they are, but you know what State they're coming from, and you know what pages on your website they visited. So, there again, there's some privacy built in, but you can tell if somebody clicks on "Concerns About Myself" or where they go, what they're looking for, how long they stay on the site.

So we will have more information in the not-too-distant future about how useful that is, and we'll be sending out surveys to these folks, asking a series of questions. What worked? What didn't work? What might work better? Those kinds of things. So at this moment we're poised to gather that information. That's the kind of activity that having this kind of website would definitely be able to answer those questions better.

But I do think people assume there's a certain level of anonymity and will respond, but you have to do your due diligence around the limitations of privacy and be sure that the terms of use ... You could look at our privacy section and get an idea and then ... Of course, we consulted with lawyers, to be sure. We like to think it's a best-practice privacy policy. So you can be back in touch with me or send me your email and your question, and I'll see what information we have now and then we can just stay in communication about that.

Audience Member 4: [1:22:45] Wonderful, thank you so much.

Ms. Nussbaum: [1:22:58] Deborah, this is Jean, I have another question for you from someone online.

Audience Member 5: [1:23:05] Can you hear me? This is kind of related to that question as I remember when, Deborah, when you were showing the pie chart. I think it said something like "6 percent of users are actual individuals who have concerns about themselves." Is that correct?

Ms. Rice: [1:23:20] Yes. In fact, over the last quarter of last year it went up to 10 percent, and we checked to see if things were happening, you know, in the media or something that might account for that, and we really couldn't determine what might have caused that shift, but we took it as a positive trend.

Audience Member 5: [1:23:38] So those are people that are identifying themselves as possible abusers or abused and then in addition to that, as you were mentioning before, you will be able to track those people who might be visiting certain pages on your site. They might not be identifying themselves, but, based on the pages they visit, it's conceivable that they themselves are abusers so that that percentage might increase, did I understand that correctly?

That it might be clear that people that are visiting your site who clearly ...

Ms. Rice: [1:24:16] Right. It's a little bit apples and oranges as far as comparing actual numbers, but what we might see is that we could take the actual number of calls that we used to get and compare it to how many of these visitors to those particular pages that went and clicked on several and stayed on more than 30 seconds. We don't know when they got off the phone, or what they do with the information.

We don't know what these people will do with the information but the fact is that they are getting it, but we don't know whether they're going straight through to treatment resources. That would be pretty critical. And there's also information in that section about what their legal ramifications are, and that very clearly this could be criminal behavior depending whether they are at risk or have actually done something.

So, I think we can get a better idea of what people are doing, but we can also then put out the survey that asks: "On this particular page of information, what was most helpful?" And then let's say on the resource page: "Would you be willing (just a little tiny box) to let us know if you were able to find a therapist?" Because we do hear back on the helpline sometimes from people.

We got a call in December: "Six months ago we called your helpline; you sent me to this person, and I've been in treatment, and I just was calling to thank you." We hope to continue to get that kind of feedback, only we're being more proactive in getting it. Does that answer your question?

Audience Member 5: [1:26:08] Yes, it does, thanks.

Audience Member 6: [1:26:10] Hello?

Mr. Patrick: [1:26:21] Yes?

Brian Oliver: [1:26:22] Yes. I would like to respond briefly to the question that was raised about, "Do people actually utilize helplines?" My name is Brian Oliver, and I'm a [inaudible] student at the University of St. Louis. I just submitted a paper on the benefits of using a public health approach to preventing child sexual abuse, and I came across two studies about the effectiveness of these helplines. One was by Tabachnick and Chasan-Taber conducted in 2000. They found

that [inaudible] Vermont in its first 4 years received 657 calls at the helpline, and 99 percent were from self-identified abusers.

And the second study out [inaudible] it was from the *Journal of Sexual Aggression* by [inaudible] found that 31 percent of callers were high-risk callers who described a serious intention to abuse, had abused, or were currently abusing—sex offenders requesting help. So there is some evidence out there that these helplines are working. I just wanted to point that out.

Ms. Rice: [1:27:32] Thank you, Brian.

Audience Member 6: [1:27:38] I have a question for Pat.

Mr. Patrick: [1:27:39] Yes.

Audience Member 6: [1:27:41] Pat, I know ... We, we love your organization, it's tremendous, you're doing a good job. Of course the focus is on making sure adults know what to do to be aware, to know what to do to protect children, and also to get them to talk to children in terms of educating kids about what's OK, and what's not OK. Wondering whether or not you would recommend any particular curricula for children? And again I see that as just one piece of the pie, and again, adults are responsible, but if you were to recommend a curriculum for children. Are there any out there now that would complement nicely your efforts?

Mr. Patrick: [1:28:29] Let me first thank you for that nice compliment for what we're doing with Darkness to Light. One of the requests that we often get from our facilitators is exactly that, for information that would be relevant to kids just to help them have some basic, basic prevention information. So we've actually played around with the idea of creating seven steps for children to be delivered by one of our facilitators. Until we get that up and running, there certainly are, or in concert with that there are, some other programs out there that do a nice job in giving kids information.

One program that we're all very familiar with, Good Touch, Bad Touch, has some great information for kids. One of the issues that, I think, we all struggle with is that when we go into some organizations, particularly education, we're not allowed to use anatomically correct terms. So even programs like Good Touch, Bad Touch have to limit what information they share with kids. If they're talking with adults, with parents outside the school system, they're very clear on the importance of using those terms.

So for as far as a curriculum for kids that's currently out there and has some nice research behind it, Good Touch, Bad Touch would certainly be an option for you. But keep in mind that we do think it's crucial that any program that's child-focused must be delivered in concert with a program that is adult-focused. The two must go hand in hand. We really need to not fall trap to holding kids responsible in identifying and stopping their own abuse.

Ms. Rice: [1:30:15] I'll just add to that. The adult component is critical. There are two other programs that I'm aware of, and there are lots out there. In New Jersey, the headquarters of the Child Assault Prevention program, which is also international—I would highly recommend

going to their website and looking at their program. It's been researched; it's one I would recommend.

And then a program that is going on in Vermont. Linda Johnson, Prevent Child Abuse Vermont—the sexual-free environment for teens, sexual abuse-free for environment for teens, the safety program, which is embedded in the health curriculum. It includes a training for the teacher and a curriculum for the middle-schoolers, and, of course a lot of you all will already know this, but the rate of increase in sexual behavior problems for children ages 11 to 14 is growing hugely. It's been hovering in the 30 to 50 percent range, and now it's pushing up closer to 50 percent. The research studies present a range of prevalence, but it's going up higher and higher every year. And that program I think was absolutely designed to reach children at a critical age, just right around puberty or right after puberty starts to hit. So those are two that I would encourage you to look into.

Audience Member 7: [1:31:54] In terms of reaching the Vermont program, what ... ?

Ms. Rice: [1:31:57] PCA Vermont. Prevent Child Abuse Vermont.

Audience Member 8: [1:32:02] I'm sorry, I didn't get the name of the curriculum from New Jersey.

Ms. Rice: [1:32:06] That's Child Assault Prevention.

Audience Member 8: [1:32:08] Thank you.

Katy Tomlinson: [1:32:00] Actually, may I add one more comment to that? My name is Katy Tomlinson, and I previously did education with children in Texas with CAC there, and now I'm in Greenville, North Carolina, with CAC here. The program that we used to educate children pre-K to 8th grade was through the Sunflower House, and it's called P.S. It's My Body. It's a fabulous program.

It doesn't focus so much on "good touch, bad touch" because these type of touches do feel good to children, so it focuses mainly on welcome touch and unwelcome touches, and it gives the children that power to say, "No, this is not a welcome touch, this is an unwelcome touch." Something like that, but that's through the Sunflower House, and I believe they're out of Missouri. But it's called P.S. It's My Body, and it's a fabulous program, and it goes from pre-K all the way to 6th grade. Eighth grade—I'm sorry.

Linda Johnson: [1:33:12] This is Linda Johnson in Vermont at Prevent Child Abuse Vermont. And I'd just like to say that we have had tremendous success in reducing the rate of child sexual abuse in Vermont. Over the last 15 years there are programs that don't focus at all on teaching children to say no and to protect themselves but teach adults how to supervise children, look for signs and symptoms of abuse, teach children the correct name for body parts, and encourage children to come and tell us if they feel mixed up and confused about anything at all.

Make it a developmentally appropriate approach, and a healthy approach that isn't scary, and doesn't give children the sense of responsibility for saying no. Predators are very, very skilled at getting children to cooperate, which would just be silent, and then when children are sexually abused and are unable to tell, which is true of about 90 percent of the time that people don't tell until they are adults. But then they don't have to carry this sense of guilt and shame but just wreaks havoc with their mental health and sexual health during their adult years and adolescent years.

So we have the Care for Kids Program that we've brought down from Ontario, Canada, which is very much like our safety program that Deborah mentioned for middle school, but Care for Kids is for children 3 up to age 8. And we do nurturing training, healthy sexual development training for adults, understanding and responding to the sexual behavior of children for adults, and a plethora of other adult training that really helps adults know what grooming looks like and how to protect children.

Child sexual abuse is down over 60 percent in Vermont, and we're very, very pleased and proud of that. We've reduced the number of adolescent offenders by a third since we've been taking this approach. And anyone is welcome to call 802.229.5724 or reach out to us on the web at www.pcavt.org.

Audience Member 9: [1:35:32] On the last caller, was that contact you had in Ontario, was that a prevention contact, or was that a private organization to Care for Kids?

Ms. Johnson: [1:35:42] Actually, Care for Kids is developed out of a health unit in Ontario, Canada, the Prevent Child Abuse Vermont is the United States center for training for Care for Kids, and we have trained in many, many States across the country, and we also hold national trainings here. So just let us know how you would like the information, and we'll be happy to share it.

Audience Member 9: [1:36:03] My question was this: I've been trying to find out if there are any programs like this in Canada. I'm calling from Vancouver, and I first heard about that one in Ontario, so I'm glad you pointed that out.

Ms. Johnson: [1:36:16] Denise Gaulin out of the Ontario Health Unit at Leeds, Grenville, Ontario. Just give us a call, and we'll give you their number.

Audience Member 9: [1:36:31] Can I just get your number here again quickly?

Ms. Johnson: [1:36:36] Sure. 802.229.5724.

Audience Member 9: [1:36:40] Thank you very much.

Ms. Johnson: [1:36:45] You're welcome.

Ms. Brodowski: [1:36:50] Great, well, goodness, it's so great to see all these connections happening as we speak. I know that we're actually have run out of time, but I just wanted to

check, I guess, if there's maybe one last quick question that somebody wanted to ask of the presenters.

OK, great. So I just really want to thank both Deborah and Pat again for the excellent presentation and the discussions afterwards. As you see from the final slide we're going to be posting the recording of the webinar with all the various interruptions, so ... And the slides will be made available as well. Thanks again for your interest on this important topic.