



Stop It Now!

Together We Can Prevent the Sexual Abuse of Children

STOP IT NOW! Report #5

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FOUR-YEAR EVALUATION: FINDINGS REVEAL SUCCESS OF STOP IT NOW! VERMONT

BACKGROUND

STOP IT NOW! VERMONT is a child sexual abuse prevention program jointly managed by STOP IT NOW! in Haydenville, Massachusetts and the Safer Society Foundation, Inc., in Brandon, Vermont. The program relies on two key premises: that adults – not children – must prevent child sexual abuse and that child sexual abuse can be prevented using the tools of public health awareness and education.

Children cannot stop abuse. Teaching children about appropriate touch is an important, but limited first step. We must encourage adults to hold abusers directly accountable by supporting them to stop, reporting abuse, and helping abusers and victims get treatment.

Our approach is based on the success of campaigns to stop drinking and driving, to prohibit smoking in public places and to promote safer sex practices. From September 1995 to December 1999 our innovative pilot program, STOP IT NOW! VERMONT, has tested the application of these public health campaign concepts to child sexual abuse prevention by working with the media and with community-based organizations to reach adults in high-risk situations.

STOP IT NOW! VERMONT has gained statewide recognition for increasing the amount of media attention and information available on child sexual abuse. This report documents our media and outreach efforts and analyzes the effectiveness of this campaign.

PROGRAM RESULTS

Finding No. 1: Abusers Will Call For Help

“Will an abuser call for help?” was the most frequently asked question before we launched the pilot program. In the first four years of operation, STOP IT NOW! VERMONT received 657 calls to our helpline, of which 99 (15%) were from self-identified abusers.

People who knew either the abuser, the victim, or both made up 50% of the callers. Such calls typically began with, *“I may be over-reacting but...”* and described a behavior that was a warning sign that someone may have sexually abused a child.

Callers heard of the helpline from various sources:

- 24.5% from traditional media (12.3% radio, 8.5% newspapers, 3.7% television)
- 28.8% from the STOP IT NOW! VERMONT web site
- 25.2% from professionals in the field, other helplines and agencies
- 5.8% from friends, presentations, workshops, or did not answer

Finding No. 2: More Adults Can Talk About Sexual Abuse

STOP IT NOW! VERMONT commissioned Market Street Research of Northampton, Massachusetts to conduct a random digit-dial telephone survey of public opinions and attitudes towards child sexual abuse. The surveys were conducted in 1995, 1997, and 1999 of 200 Vermonters with results showing a margin of error of 4.2% to 6.9%.

A key premise of the program is that we must change how people talk (or refuse to talk) about sexual abuse in order to begin changing the way people respond to this issue. The most dramatic success of our approach shows in a 40% increase in the number of Vermonters who could explain or define child sexual abuse over the past four years.

Our survey also found indicators of awareness and change:

- The percentage of Vermonters surveyed who can explain what child sexual abuse is has increased from 44.5% in 1995 to 84.8% in 1999.
- Overall awareness is high, with 78% of respondents agreeing that child sexual abuse is a problem in Vermont.
- Of Vermonters surveyed, 90% were able to correctly identify scenarios as “definitely sexual abuse” or “might be sexual abuse.”
- The proportion of Vermonters who recognize that abusers are likely to live in their communities increased more than 6 percentage points, from 67.0% in 1995 to 73.7% in 1999.

Finding No. 3: Adults Need Better Skills to Stop Abuse

A second premise of the program is that in addition to talking about abuse, we must also build the appropriate skills and resources to encourage new and positive actions. STOP IT NOW! VERMONT tracked the impact of the program’s educational efforts, showing the following results:

- **Warning Signs:** In 1999, 38.0% of Vermonters can name at least one warning sign in an adult or juvenile with sexual behavior problems, an increase of 10 percentage points over the 27.5% in 1995 who could name a warning sign.
- **Skills:** In 1999, 87.8% of Vermonters said they will take direct action if they definitely *know* about a case of child sexual abuse. If the sexual abuse is *suspected*, only 66.1% are willing to take action. Helpline callers are typically unsure of what action to take and when advised, initially are unable to confront the situation without coaching. Further, the percentage of respondents who would report abuse dropped by nearly half (to 43.3%) when the scenario involved someone they knew as the abuser.
- **Disclosure:** Of the respondents who acknowledged histories of sexual abuse victimization, a third (33.8%) disclosed it at the time in childhood, twice the national disclosure rate. But two-thirds (66.2%) had never disclosed their own sexual assault, and therefore the abuse was never reported.
- **Resources:** While more than three-quarters of surveyed Vermonters know where to refer someone with a drinking problem, slightly more than half (54.4%) know where to refer someone with sexual behavior problems.

- **Belief in Treatment:** Although only 19 % of surveyed Vermonters agree that abusers can stop “if they want to,” a much higher proportion of respondents (68.8%) believe abusers can stop “with appropriate treatment.”

The data suggest that when adults have direct evidence that sexual abuse has occurred, they will report it. But in most situations one can only *suspect* sexually abusive activities. In these cases, only 43.3% of surveyed Vermonters would report the abuse, an increase of 6 percentage points since 1997. In cases where abuse is suspected, adults do not know what to look for or what to do and are unaware of their potentially effective role in preventing child sexual abuse: naming abusive behaviors, identifying emerging problems, confronting difficult situations, reporting suspicions of sexual abuse, or referring someone to a qualified treatment provider.

Finding No. 4: Abusers Stopping the Abuse

We have no formal mechanism for tracking and reporting on the numbers of sexual abusers who take responsibility for their sexually abusive acts by seeking treatment or reporting themselves for prosecution. Anecdotes from child protective services workers, clinicians, or district attorneys suggest that some sexually abusive individuals have taken responsibility for their actions, but no one has formally recorded these data. Through a survey of clinicians and individual telephone interviews in each county prosecutor’s office, STOP IT NOW! VERMONT found that:

- According to clinicians, 118 people have voluntarily sought out help for their sexually abusive behavior problems (20 adults and 98 adolescents to date).
- As reported by prosecutors and victim advocates, 15 adults and 10 adolescents have turned themselves in to the legal system.

These data, combined with the number of abusers calling the STOP IT NOW! VERMONT helpline, demonstrate that some people who abuse are willing to reach out for help. While the number of people identified as stepping forward is small, they reflect a significantly larger number of victims saved from the trauma of sexual abuse.

FUTURE CHALLENGES FACING STOP IT NOW! VERMONT

Giving a Voice to Unheard People

The media have reported primarily stories of survivors who could speak about this difficult issue. More recently, stories of people claiming to be falsely accused of sexual abuse have been pulled into the media. One of the most successful components of STOP IT NOW! VERMONT has been the program’s ability to give involved people a safe environment to tell their stories, including:

- Parents of sexually abusing youth who speak out on what they and their children have done to stop the abuse and what help they ask of their communities.
- Survivors and recovering sex offenders who can talk together about the need for prevention.
- Family members of abusers who have spoken publicly for the first time in their lives about their experiences.
- Recovering sex offenders who talk with adults and adolescents in treatment programs about the necessity of never abusing again (Alcoholics Anonymous model).

These stories, new to most of the public, will help change the hopeless feelings that many have about confronting the warning signs of sexual abuse.

Creating A Language to “Break the Silence”

Just as Mothers Against Drunk Driving and others developed a new language to stop drinking and driving (e.g., “designated driver” and “friends don't let friends drive drunk”), STOP IT NOW! VERMONT needs to develop a new vocabulary to stop the sexual abuse of children. Some of this language has already begun to evolve (“survivor” rather than “victim”; “recovering sex offender”). But more such public health-oriented language is needed to frame new concepts and perspectives.

We need to be able to talk about sexual abuse and how to achieve positive outcomes for recovering abusers, survivors, families and their communities. The 40% increase in the number of people who could offer an explanation of child sexual abuse is an important start. To reduce victim and family trauma and shame we need to be able to differentiate kinds of abuse by their varying effects on children. The treatment of the abuser must also vary depending upon the characteristics and effects of his or her crime. Adults need to be able to talk about and name the full spectrum of sexual crimes, from non-touching (voyeurism or “peeping”; exhibitionism or “flashing”; obscene phone calling) to touching offenses (frottage or rubbing against a person; fondling; cunnilingus or fellatio; digital penetration; vaginal or anal intercourse).

Developing Skill-Based Programs for Adults

Adults do not have the skills or the knowledge to confront sexualized behaviors that make them uncomfortable. Unlike the simple messages and concrete solutions of the campaign to stop drinking and driving (either “offer a ride” or “take the keys”), we are not offering clear and consistent messages about what to do when a person suspects sexual abuse.

Further program strategies are needed to give adults:

- A familiar vocabulary they can use to talk openly about child sexual abuse, especially in situations in which they may need to confront an abuser.
- A list of concrete steps to take if they suspect a child is being sexually abused or if they think an adult or older child they know is sexually abusing a child.

Focus group results suggest that it would be easier for people to talk about child sexual abuse if:

- They were more knowledgeable about the topic.
- They felt more comfortable talking about sex in general.
- They had concrete examples of actions to take and their likely consequences (e.g., how to talk with a family member about inappropriate sexualized behaviors.)

In each solution offered to the public, the strategies must take into account the issues involved in confronting someone within, or close to, the family.

Creatively Collaborating with the Media

Most respondents (81.7%) have listened to, seen, or read news reports or programs about child sexual abuse, representing a notable drop from the 1995 findings, where 89.5% of residents had viewed a news report or program. As a result, STOP IT NOW! VERMONT will increase cooperative media exposure to bring this issue back into the public eye.

Our media efforts will:

- **Target men more than women:** Men are less likely than women to notice information in the media (76.2% vs. 86.9%) and less likely to discuss the issue of child sexual abuse with family or friends (34.9% vs. 57.7%).
- **Emphasize that treatment works:** Vermonters have become less likely to acknowledge that the treatment of sexual abusers can reduce recidivism rates (78.5% agreed that treatment can help in 1995 compared to 68.8% in 1999).
- **Provide the warning signs of potential abuse:** There has been no increase since 1995 in Vermonters' knowledge of warning signs in an adult who may be abusing children. Almost two-thirds (62.0%) thought that there were *no* warning signs in an adult or between the adult and child.

Assessing Costs and Benefits of Taking Action

Most of the calls to the helpline are from family members who are not immediately connected with the abuser or victim, like an aunt or a friend. Many of the calls ask our staff what will happen to them, the people they love, and the community surrounding the abuse, if this abuse is reported.

These calls raise the question: is the cost of *reporting* or *getting help* in situations where sexual abuse is suspected too high for most families in Vermont? If our goal is to protect children and to keep our communities safe, this question must be answered.

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