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To cite this article: Leslie M. Tutty, Danielle Aubry & Laura Velasquez (2019): The “Who Do You Tell?”™ Child Sexual Abuse Education Program: Eight Years of Monitoring, Journal of Child Sexual Abuse, DOI: [10.1080/10538712.2019.1663969](https://doi.org/10.1080/10538712.2019.1663969)

To link to this article: <https://doi.org/10.1080/10538712.2019.1663969>



Published online: 16 Sep 2019.



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The “Who Do You Tell?”™ Child Sexual Abuse Education Program: Eight Years of Monitoring

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ABSTRACT

School-based programs have been the central strategy to educate children about the serious nature of child sexual abuse (CSA) in the hope of prevention or early intervention. While program evaluations consistently show significant improvement in children’s knowledge and skills, it behooves programs to monitor their impacts. Monitoring, or on-going assessments, can take several forms but in the current study refers to monitoring the outcome of knowledge of CSA prevention concepts. The “Who Do You Tell?”™ child sexual abuse education program has been offered for 35 years in Calgary, Canada and was previously evaluated in a randomized pre-test-post-test comparison study with strong positive findings. This article presents the results of subsequently monitoring program outcomes over an eight-year period (2010–2017), examining knowledge/attitudes in 6198 students in 50 schools in a Western Canadian city. All students significantly increased their CSA knowledge/attitudes with large effect sizes. Practice and policy implications are discussed.

ARTICLE HISTORY

Received 20 March 2019
Revised 22 August 2019
Accepted 22 August 2019

KEYWORDS

Child sexual abuse;
school-based prevention;
program evaluation;
monitoring

The sexual abuse of children is a serious and worldwide problem (Barth, Bermetz, Heim, Trelle, & Tonia, 2013; Stoltenborgh, van IJzendoorn, Euser, & Bakermans-Kranenburg, 2011) that commonly results in mental health issues and interpersonal problems that often extend into adulthood (Collin-Vézina, Daigneault, & Hébert, 2013; Lalor & McElvaney, 2010). Given these significant consequences, preventing child sexual abuse (CSA) from occurring in the first place seems the obvious solution. Nevertheless, discourse about how best to focus prevention has been on-going (Rudolph & Zimmer-Gembeck, 2018a; Zeuthen & Hagelskaer, 2012). Prevention options include media and public awareness campaigns (Kemshall & Moulden, 2017; Rheingold et al., 2007; Self-Brown, Rheingold, Campbell, & de Arellano, 2007), parent education (Martin & Silverstone, 2016; Nickerson, Livingston, & Kamper-DeMarco, 2018) especially with respect to very young children

(Mendelson & Letourneau, 2015; Wurtele & Kenny, 2010) and child education, which often includes a parent education component.

Child sexual abuse prevention/education programs were first developed in the 1970s (Plummer, 1999), primarily offered to children in elementary schools (Tutty et al., 2005). Preschool programs, most with a heavy emphasis on involving parents, developed subsequently (Wurtele, Saslawsky, Miller, Marrs, & Britcher, 1986) and are relatively common (Brown, 2017; Wurtele, Moreno, & Kenny, 2008). While originally a focus only in Western countries, more recently child-directed school-based CSA programs have been developed world-wide in, for example, Ecuador (Bustamante et al., 2019); Korea (Moon, Park, & Sung, 2017), China and Taiwan (Chen, Fortson, & Tseng, 2012; Jin, Chen, & Yu, 2016), South Africa (Dunn, 2011), Turkey (Tunc et al., 2018) and Malaysia (Weatherley et al., 2012).

Although commonly offered in the 1970s–1990s in North America, child sexual abuse education/prevention programs are not as available today. Finkelhor, Vanderminden, Turner, Shattuc, and Hamby (2014) studied youth (ages 5–17) participation in violence prevention programming nationally, finding that only 21% had been involved in “sexual assault” prevention, but children aged 5 to 9 were much less likely to have had such exposure.

The current study examines the knowledge gains of students who participated in the “Who Do You Tell?”™ (“WDYT?”™) child abuse education program, monitoring outcomes over eight years. Program monitoring, the ongoing assessment of program effects, typically occurs after a program has been evaluated with strong evidence of efficacy. The rationale is ensuring that the program continues to be effective over time, using methodology that is not as stringent as the original research (Bond & Carmola Hauf, 2004).

Child sexual abuse prevention/education programs

The main rationale for child-focused programs is to provide education about abusers’ strategies to groom or lure potential victims so that children might recognize these and escape, if possible, and seek assistance. Interestingly, McGibbin, Humphreys, and Hamilton (2017) suggest the programs can also teach children who currently or potentially use sexually coercive behaviors that these are inappropriate.

According to Wurtele (2009), the core concepts covered by CSA prevention education typically address the following areas: “(a) helping children to recognize potentially abusive situations or potential abusers, (b) teaching children to try to resist by saying “no” and removing themselves from the potential perpetrator, and (c) encouraging children to report previous or ongoing abuse to an authority figure” (p. 4). Tutty (2000) adds the following: permission to say no to authority figures, understanding that trusted adults might act in ways that are abusive, rules about breaking promises and

keeping secrets and that children are not to blame if they are touched in ways that feel uncomfortable.

Programs use activities or exercises to engage young children such as theater productions (Krahé & Knappert, 2009; Tutty, 1992) and role-playing. Some newer programs incorporate on-line/web-based games or apps to teach CSA concepts (Moon et al., 2017; Müller, Rödera, & Fingerle, 2014; Scholes, Jones, Stieler-Hunt, & Rolfe, 2014). Innovative programs specific to vulnerable populations such as students with learning difficulties (Lee, McGee, & Ungar, 2001) or mild intellectual impairments (Lee & Tang, 1998) have been developed. A recent novel approach targets adolescents with the hope of preventing CSA perpetration (Letourneau, Schaeffer, Bradshaw, & Feder, 2017).

Who should present school-based child sexual abuse prevention content has been debated for decades (Tutty et al., 2005). Arguments for using personnel from external programs, who often have their roots in community sexual assault centers, include that teachers rarely receive pre-service training in child sexual abuse, if anxious about the content in the curriculum might convey nervousness to their young students and lack experience referring to child welfare authorities should the need arise (Gushwa, Bernier, & Robinson, 2018; Scholes, Jones, Stieler-Hunt, Rolfe, & Pozzebon, 2012). Advantages are that teacher-offered curricula can be longer, up to six sessions or more, providing children with more opportunities to integrate what can be difficult to learn concepts such as the fact that abusers such as familiar adults or family members are typically viewed as “good people” implying that they would harm children (Kenny & Wurtele, 2010). Teachers can also integrate the information into other potentially relevant classes such as health and reading. However, some evaluations have concluded that teachers are more likely to emphasize “stranger danger” (Scholes et al., 2012).

In contrast, external programs are taught by professionals who are knowledgeable and comfortable with conveying content about child sexual abuse. Not only are they sensitive to hints from children about possible abuse but they can quickly inform the appropriate authorities to investigate disclosures should any occur. They also train teachers and other school personnel to do the same. Because programs are taught by external staff, these are more often presented in one or two sessions, although two relatively new programs entail five or six sessions respectively (Dale et al., 2016; Weatherley et al., 2012).

In reviewing available programs, the majority are curricula provided by teachers including Safe@Last (Morris et al., 2017), My Body, My Boundaries (Baker, Gleason, Naai, Mitchell, & Trecker, 2013), Project Trust (Oldfield, Hays, & Megel, 1996) and Stay Safe (MacIntyre & Carr, 1999). Examples of external programs involving collaborations with community agencies to present the core prevention concepts include ESPACE (Daigneault, Hébert, McDuff, & Frappier, 2012), Learning to be Safe with Emmy (Dale et al., 2016), Safe Touches (Holloway & Polido, 2018), Keeping Me Safe (Weatherley et al., 2012), Red Flag Green Flag (Wood & Archbold, 2015),

and “Who Do You Tell?”™ (Tutty, 1997), which is also the focus of the current study.

Are CSA prevention/education programs effective?

In a recent meta-analysis of 24 child-focused CSA programs, not only did children’s self-protective skills and knowledge significantly increase after program participation, but the gains were maintained over six months (Walsh, Zwi, Woolfenden, & Shlonsky, 2015). Other reviews and meta-analyses support the positive outcomes of these programs (Fryda & Hulme, 2014; Topping & Barron, 2009). However, despite repeated program evaluations that support children’s knowledge gains in understanding the dynamics of child sexual abuse and how to respond (Daigneault et al., 2012; Dale et al., 2016; Morris et al., 2017; Pulido et al., 2015; Wood & Archbold, 2015), skepticism about school-based programs persists (Finkelhor, 2007; Rudolph & Zimmer-Gembeck, 2018a). Finkelhor (2007) describes the concerns as focusing on two central tenets: 1. That the concepts are complex and cannot be learned by young children and; 2. That, even with such knowledge, children cannot prevent child sexual abuse. These are worth examining in more detail.

Many of the prevention concepts taught in abuse prevention programs involve a child’s ability to ignore or to oppose the wishes of an adult, one domain of moral development (Damon, 1988). Admittedly, concepts such as “sometimes it’s OK to say no to a grownup” are based on family belief systems and are developmental in nature, such that older children are more likely to have the moral reasoning to understand that such imperatives are not always true (Tutty, 2000). Nevertheless, over a number of program evaluations, post-program, children can correctly identify that these concepts are fallacies (Walsh et al., 2015).

Some have criticized focusing on knowledge and attitudes as the outcome variables to determine CSA prevention program effectiveness as insufficient. In-vivo tests with children, usually with a stranger approaching children and asking them to accompany them, have been used to evaluate some personal safety programs (White et al., 2018), however, the intimate grooming behaviors and the fact that the majority of sexual abusers are familiar with or are relatives of victims, precludes in-vivo testing specific to sexual abuse.

Identifying whether CSA prevention/education programs teach concepts that can actually prevent sexual abuse is more difficult. Two retrospective studies suggest that understanding the core concepts can improve knowledge, skills and disclosures (Finkelhor, Asdigian, & Dziuba-Leatherman, 1995) or actually impact child sexual abuse (Gibson & Leitenberg, 2000). Gibson and Leitenberg’s study of 971 women undergraduate psychology students reported that 62% remembered taking part in a “Good-Touch/Bad-Touch”

program in childhood. Of program participants, 8% had been sexually assaulted subsequently compared to 14% who had not had a program, a statistically significant difference.

Further, Leclerc, Wortley, and Smallbone (2011) interviewed 94 convicted child sex offenders concluding that offenders were deterred by some children's behaviors. They reported that, "Saying that they do not want to have sexual contact and saying "no" to the offender are the most effective strategies" (p. 1868), both core CSA prevention concepts taught in programs. Despite such assertions, however, it must be remembered that no matter how knowledgeable children may be about CSA, when perpetrators are stronger and older, children rarely have the means to prevent themselves or escape abusers who are most-often familiar adults or relatives.

A final, well-documented concern about child-focused CSA prevention programs is that they could create anxiety or other negative side-effects in children (Rudolph & Zimmer-Gembeck, 2018a). A meta-analysis conducted by Walsh et al. (2015) reported six studies that included standardized measures of anxiety or fear associated with prevention program participation. These studies found no significant increase in negative reactions post-program. Other studies (Dale et al., 2016; Oldfield et al., 1996), including the previous evaluation of "WDYT?"™ (Tutty, 1997), document a few negative after-effects of sexual abuse programs in a small proportion of children. Program personnel routinely educate teachers and parents who attend in-service training workshops prior to child-focused interventions to be vigilant and respond supportively if children appear upset in any way. In summary, while critiques of the programs are well-taken, there is sufficient evidence from multiple studies that, overall, the programs do not cause harm and that most children learn the key education/prevention concepts.

While well-designed program evaluations are important, they should not be considered the final step in determining whether programs are effective. Monitoring education/prevention programs has been recommended by the US Centers for Disease Control (Whitaker, Lutzker, & Shelley, 2005), however no published articles with respect to monitoring knowledge outcomes of CSA education prevention programs were identified in a recent literature update. The current article reports on an eight-year monitoring study of Calgary Communities Against Sexual Abuse's "Who Do You Tell?"™ Program.

The "Who Do You Tell?"™ CSA education program ("WDYT?"™)

"Who Do You Tell?"™ is a research-based education program that provides elementary school children with the skills and knowledge needed to recognize abusive behaviors, promote healthy relationships, learn about body autonomy, and access support in order to reduce the impacts of sexual violence. First developed in 1983 and updated in the early 1990's by

Calgary Communities Against Sexual Abuse (CCASA), Calgary's sexual assault center, the program uses age-appropriate content and materials to discuss positive, respectful relationships and supports children to develop the ability to access support from a trusted adult. Two educators (bachelor-level education with several years community experience) co-present the program in two sessions of 45 to 60 minutes within a week to classrooms of children. Different formats are used for the youngest children (kindergarten to Grade 2), the middle grades (3 and 4), and the older children in Grade 5 and 6 in that age-appropriate materials and videos are matched to the developmental level of the child. Education/prevention concepts are taught with the aid of discussion, pictures, short videos, and role-plays. Picture cards specific to Muslim and East Asian students are available, as is an Indigenous version of "WDYT?"™.

The program includes teacher training within schools and parental involvement through parent presentations, informational handouts, follow-up communication with children and their parents, as well as continuous evaluation. Parental permission to attend is required with participation in the program monitoring included in the consent form. A new website is being launched that includes information and games for children, tools for adults to supplement the conversation and support disclosures as well as a listing of other community resources.

According to Dusenbury, Brannigan, Hansen, Walsh, and Falco (2005) maintaining the quality of implementation (also known as consistency or fidelity) is the most serious threat to the effectiveness of school-based prevention programs. Assessing fidelity is complex and typically involves examining the program design, training of providers, delivery of the program, and how the program is received (Lynas & Hawkins, 2017). The "WDYT?"™ program has addressed fidelity/consistency in numerous ways including developing manuals for both training educators and delivering the program. Protocols describe delivering the program in a step-by-step manner and the fact that two educators jointly present "WDYT?"™ adds additional oversight that the program is delivered as intended. The hiring process for educators is rigorous and the applicant's philosophical fit with the program is considered essential. Educators are monitored in ongoing ways via supervisor/peer observation, yearly training workshops and teacher checklists. In addition to the quantitative assessment of knowledge/attitudes (the focus of this article), the City of Calgary Family and Community support service an external has a questionnaire that assesses the behavioral intentions of the students post program.

The "WDYT?"™ program was evaluated previously (Tutty, 1997, 2014). The latter was a qualitative study involving focus groups with 116 elementary school children who had recently participated in "WDYT?"™. In brief, even two or three months after the program, the children remembered the core

sexual abuse education/prevention concepts, providing numerous examples of the role-plays and the skills taught. There is a dearth of qualitative inquiries in the field of CSA prevention and education, although authors such as Riger (2001) strongly recommend going to the source – the program participants – when evaluating programs.

The quantitative evaluation (Tutty, 1997) used the Children's Knowledge of Abuse Questionnaire-Revised (CKAQ-33) (Tutty, 1995), a standardized measure with established psychometric properties and subscales on Inappropriate and Appropriate Touch. A total of 231 children were randomly assigned (matched by age) to participate in the program ($n = 117$) or a waitlist control condition ($n = 114$). Children who received the program increased their knowledge levels of both Inappropriate Touch ($p = .000$) and Appropriate Touch ($p = .012$) to a significantly greater degree than children in the control group. Age significantly differentiated the knowledge regarding Inappropriate Touch, with younger children knowing fewer concepts both at pre – and posttest ($p = .000$). Parallel results apply to the Appropriate Touch subscale ($p = .04$). The current study assesses the extent that such knowledge increases are maintained over time.

Method

This study took place in the city of Calgary, Alberta, Canada over an 8-year period (2010–2017). Calgary is a city of over a million people. Although 60% of the population are of European origins, there is considerable diversity of cultural backgrounds, with populations from East Asia, China and the Philippines, making up another 22%. The city has been economically advantaged with numerous employers in the oil and gas industry, however recent significant downturns in that industry have negatively impacted the city and its residents (Wikipedia, 2019).

The “WDYT?”TM program was monitored in 17 public elementary schools; 28 separate schools (Catholic school system) and five private schools (2 Jewish schools; 1 Christian; 1 Indigenous and one summer youth camp for an immigrant-serving organization). Over the eight-year time period, five schools received the program twice and two received it three times.

The Children's Knowledge of Abuse Questionnaire-short (CKAQ-short)

The original Children's Knowledge of Abuse Questionnaire (CKAQ-33) was developed to assess the knowledge levels of abuse prevention concepts for elementary school-aged children in grades one through six. The CKAQ-33 uses a true-false format and has strong psychometric properties (Tutty, 1995). The original measure was composed of a 24-item Inappropriate Touch Subscale (items regarding important beliefs and facts about child

abuse, such as “Even someone you know might try to touch you in ways you don’t like;” and “If someone touches you in a way you don’t like, you should tell a grown-up you trust”) and a nine-item subscale on Appropriate Touch (items about the fact that sometimes doctors may need to see a child’s private parts, and that if lost, it is appropriate to ask a security guard for help, even if they are strangers).

The CKAQ-33 was constructed so that children with no previous exposure to prevention materials could understand the questions. The instructions provide a basic description of the Touch Continuum (Anderson, 1986), explaining the difference between “good,” “bad,” and “confusing” touch, since, without this information, the questions would not make sense to a child with no previous experience with prevention concepts.

The measure has been used in a number of CSA prevention programs evaluations (e. g. Baker et al., 2013; Daigneault et al., 2012; Dunn, 2011; Holloway & Polido, 2018; Oldfield et al., 1996; Pulido et al., 2015). However, for the purposes of monitoring programs, a 33-item measure is much too lengthy. As such, the author worked with then “WDYT?”™ program manager, Annemarie Tocher, to shorten and revise the CKAQ-33. First, Ms. Tocher identified items that were directly addressed in the “WDYT?”™ program curriculum. Next, using data from the Tutty (1997) “WDYT?”™ evaluation, items from the short-list that were deemed the most difficult (i.e. lowest scores at pre-test) were chosen. Since the reading and comprehension skills of younger versus older elementary school-aged children are so different, and following Damon’s (1988) suggestion of subdividing age groups of 6 to 12 into 6 to 7 years and 8 to 12 years because of developmental differences, two separate 10-item scales were developed with eight common items and two different final items for the separate grade groups (Grades 1–2 and Grades 3–6). The internal consistency (Cronbach alpha) for the two scales in the current study was .57 for the CKAQ-10-Gr 1–2 ($N = 1222$) and .70 for the CKAQ-10-Gr 3–6 ($N = 5767$).

The “WDYT?”™ program staff administer the short CKAQ measures immediately before the program and shortly after the second session. For identification purposes and to match the pre – and post-test scales, the children did not use their names but developed a code from the first two initials of their first and last names and their birthdates. As creating this code was difficult for children in Grade 1, many fewer paired pre- and post-tests were available.

Data analysis

Paired *t*-tests were used to compare pre-test and post-test scores on the CKAQ-short measures using *r*-values as the effect sizes (Field, 2009). According to Cohen (1988), *r*’s of .2, .5 and .8 are the small, medium, and

large reference values, respectively. Finally, multiple analyses of covariance compared pre-test/post-test scores with respect to gender and the number of times the program was repeated in schools. Effect sizes are partial eta squared (η^2) defined as “the proportion of variance that is not explained by other variables” (Field, 2009, p. 791).

Results

While almost 7000 students completed the CKAQ-10-item measures before participating in the “WDYT?”™ program, matched pre-test-post-test comparisons were available for only 6198 students. As seen in Table 1, students in all grades significantly improved their scores on the CKAQ-short measures after the “WDYT?”™ program, with large effect sizes. A small number of Grades 3–6 students had perfect CKAQ-10-Gr 3–6 scores of 10 at pre-test ($n = 471$ of 5149 or 9.1%); 10.1% had scores of 9 ($n = 591$). This ceiling effect obviously limits the number knowledge/attitudes concepts upon which students can improve at post-test. In comparison, in Grades 1–2, only 15 (1.3%) had pre-test scores of 10 and 48 (4.2%) had scores of 9 ($N = 1143$).

With respect to gender (see Table 2), in both Grades 1–2 and Grades 3–6, girls begin with slightly higher but non-significant CKAQ-short scores at pre-test ($F = .007$, $p = .93$ and $F = .035$, $p = .54$ respectively), however, both boys and girls improved their scores to a similar degree, with girls scoring statistically significantly higher at post-test but with a small effect size. As noted, the “WDYT?”™ program was repeated in some schools (five received it twice with a range of from two years to five years; two schools received the program three times). As this is only a rough method of assessing program impact, only the CKAQ-10-Grades 3–6 scores were examined – as the younger children would have moved up from the CKAQ-10-Gr 1–2 to the CKAQ-10-Gr. 3–6 and the two measures are not directly comparable. Interestingly, at pre-test, students in the schools that received the program twice had lower pre-test scores than students that were receiving the program for the first time. Notably, though, students in the schools with multiple repeated exposure to the “WDYT?”™ program had significantly higher pre-test scores ($F = 17.6$; $p = .000$; $\eta^2 = .007$). At post-test, all students

Table 1. “WDYT?”™ program outcome by grade level.

CKAQ-10-short		Pre-test Score*	Posttest-Score	<i>t</i> -test	<i>r</i>
CKAQ-10-Gr. 1–2	Grade 1 ($n = 12$)	3.75 ($SD = 1.9$)	5.9 ($SD = 1.4$)	2.9 ($p = .01$)	.66
	Grade 2 ($n = 1118$)	4.7 ($SD = 2.2$)	7.3 ($SD = 2.2$)	38.2 ($p < .000$)	.76
Combined Grades 1 & 2	$N = 1114$	4.7 ($SD = 2.2$)	7.3 ($SD = 2.2$)	38.8 ($p < .000$)	.76
CKAQ-10-Gr. 3–6	Grade 3 ($n = 1448$)	5.3 ($SD = 2.5$)	7.9 ($SD = 2.2$)	41.8 ($p < .000$)	.74
	Grade 4 ($n = 1262$)	5.8 ($SD = 2.5$)	8.2 ($SD = 2.0$)	39.9 ($p < .000$)	.60
	Grade 5 ($n = 1230$)	6.3 ($SD = 2.5$)	8.5 ($SD = 1.9$)	36.9 ($p < .000$)	.72
	Grade 6 ($n = 1115$)	6.7 ($SD = 2.3$)	8.8 ($SD = 1.6$)	36.1 ($p < .000$)	.73
Combined Grades 3–6	$N = 5084$	6.0 ($SD = 2.5$)	8.3 ($SD = 2.0$)	76.8 ($p < .000$)	.73

*Scores range from 0 to 10.

Table 2. CKAQ gender analysis and program repeats.

	CKAQ-10-Gr. 1–2 Pre*	CKAQ-10-Gr. 1–2 Post	F-test	CKAQ-10-Gr. 3–6 Pre	CKAQ-10-Gr. 3–6 Post	F-test
Gender						
Girls	4.78 (<i>SD</i> = 2.3) (<i>n</i> = 561)	7.42 (<i>SD</i> = 2.2)	4.2; <i>p</i> = .04; $\eta^2 = .004$	6.0 (<i>SD</i> = 2.5) (<i>n</i> = 2481)	8.4 (<i>SD</i> = 2)	5.8; <i>p</i> = .017; $\eta^2 = .016$
Boys	4.62 (<i>SD</i> = 2.1) (<i>n</i> = 567)	7.1 (<i>SD</i> = 2.2)		6.0 (<i>SD</i> = 2.5) (<i>n</i> = 2585)	8.2 (<i>SD</i> = 2)	
Program Repeats						
Once only (<i>n</i> = 3542)				5.90 (<i>SD</i> = 2.5)	8.24 (<i>SD</i> = 2.05)	2.1; <i>p</i> = .124
1 repeat (<i>n</i> = 848)				5.79 (<i>SD</i> = 2.5)	8.09 (<i>SD</i> = 2.1)	
2 repeats (<i>n</i> = 681)				6.71(<i>SD</i> = 2.4)	8.7 (<i>SD</i> = 1.7)	

*Scores range from 0 to 10.

Table 3. CKAQ items percent correct pre – and post-test by grade groupings.

Item	Pre-test Grades 1 & 2 (N = 1240)	Post-test Grades 1 & 2 (N = 1222)	Pre-test Grades 3–6 (N = 5765)	Post-test Grades 3–6 (N = 5694)
1. You always have to keep secrets.	49.3%	87.8%	62.1%	91.5%
2. Sometimes it's OK to say "no" to a grown-up.	50.3%	78.9%	76.5%	92.3%
3. Even hugs and kisses can turn into not OK touches if they go on too long.	39.0%	58.1%	63.5%	80.2%
4. If a grown-up tells you to do something you always have to do it.	27.8%	64.8%	62.7%	88.2%
5. Even someone you like could touch you in a way that feels bad.	48.4%	52.9%	53.7%	65.2%
6. You have to let grown-ups touch you whether you like it or not.	47.3%	72.2%	76.4%	88.7%
7. If someone touches you in a way that does not feel good, you should keep on telling until someone believes you.	51.9%	84.6%	65.2%	94%
8. Someone you know, even a relative, might want to touch your private parts in a way that feels confusing.	25.1%	52.9%	36.4%	73.2%
9a. If someone touches you in a way you don't like, it's your own fault.	71.0%	86.8%	N/A	N/A
10a. If someone touches you in a way you don't like, you should just keep quiet about it.	60.0%	81.2%	N/A	N/A
9b. Some touches start out feeling good then turn confusing.	N/A	N/A	50.6%	77.3%
10b. Sometimes someone in your family might want to touch you in a way you don't like.	N/A	N/A	51.2%	76.4%

significantly improved their post-test scores with the pre-test as a covariate ($F = 2439$; $p = .000$, $\eta^2 = .33$, a medium sized effect), although there were no statistically significant differences with respect to the number of program repetitions ($F = 2.1$; $p = .12$) such that, regardless of the number of program repetitions, all students improved their knowledge to a similar extent.

The percentages for the pre-test and post-test items from the CKAQ-short scales for the two grade groupings are presented in Table 3. As would be expected, younger students were less knowledgeable at pre-test than students from Grades 3–6. Although both grade groupings significantly increased the percentage of correct item responses after “WDYT?”™, the percent correct for the younger students was consistently lower than that of the older students. And although younger children did not know the correct answers to a number of CSA concepts before the program, older children also lacked considerable knowledge on several at items at pre-test, with four items correctly endorsed at or less than 54%. This suggests that including all students from Kindergarten to Grades 6 in the “WDYT?”™ program is appropriate.

Discussion

Students who participated in the “WDYT?”™ education program eight-year monitoring significantly increased their knowledge of core CSA education/prevention concepts consistent with the previous more rigorous program evaluation (Tutty, 1997). That students in higher grades know significantly more core prevention concepts at both pre-test and post-test than younger students is consistent with previous research on “WDYT?”™ (Tutty, 2000) and evaluations of other programs (e.g. Czerwinski, Finne, Kolip, & Alfes, 2018; Dale et al., 2016; Pulido et al., 2015) and is congruent with their developmental levels. The low levels of knowledge for both younger and older students with respect to some core CSA prevention concepts at pre-test, supports the need for programs such as “WDYT?”™.

With respect to gender, some evaluations of CSA education/prevention programs have found that girls learn more of the prevention concepts than boys, similar to the current analysis (e.g. Bustamante et al., 2019; Czerwinski et al., 2018), although others found no gender differences (e.g. Baker et al., 2013). Gender differences suggest the need to assess whether some concepts are taught in a manner that engages girls but not boys, which has been a problem in school-based dating violence prevention programs (Tutty et al., 2005).

We found no other evaluations that assessed the impact of multiple repetitions of programs over time. That “WDYT?”™ has been offered for over 35 years provided a unique opportunity to do so. The results were not as straightforward as we had anticipated, as the pre-test scores from schools where the programs had been repeated once were lower than scores in new schools. Notably though, the timing of the one repetition ranged from one school with a sequential year, one with the programs two years apart, one with three years apart, one with four and one with five years apart. The latter two would almost be congruent with new schools.

Interestingly, students in the two schools with three repetitions of “WDYT?”™ started with significantly higher knowledge of CSA prevention concepts at pre-test. Importantly, children in all schools, irrespective of the number of program repetitions, significantly improved their knowledge. Although the ideal for CSA concept retention may be program repetition, students are not at a great disadvantage if the program is novel to their schools.

Monitoring program outcomes is no small task. Typically incorporated into the regular responsibilities of the program staff, it adds an extra burden to what can be a challenging list of activities to complete. Nevertheless, extending program evaluation to assess that positive outcomes are maintained is important. Lynas and Hawkins (2017) and Barron and Topping (2011) have promoted the additional task of fidelity monitoring, to assess that the program is delivered consistently but neither mention outcome data

monitoring. Given the results in the current study, adding an outcome-monitoring component to fidelity monitoring would ensure that a positive impact is maintained.

While child sexual abuse prevention/education programs were common in the late 20th century, the extent to which they are now commonly offered is unknown. Recently, CCASA has experienced some difficulty booking “WDYT?”™ in Calgary schools for several reasons. First, the program involves a considerable time commitment from schools as it is typically delivered to every class in every grade in each school with two sessions for each grade scheduled at least a week apart. The program also offers children an opportunity to speak to the educators regarding any questions with respect to the program or their own experiences. Secondly, schools deal with considerable demands for time from both internal and external programs. In the past 15 years there has been a significant increase in external programs offered to schools around a variety of social issues such as bullying. While encouraging children to seek help and teaching that the abuse is not their fault, bullying programs do not discuss sexual touch or the unique ways in which individuals who use sexually abusive behaviors groom and create an environment of secrecy with their intended victims (Tutty et al., 2005).

Finally, by its interpersonal and intimate nature, child sexual abuse is a complex issue. Communities are often unaware of the extent of child sexual abuse and what is needed to comprehensively raise awareness of and address the problem. School personnel may fear not having the necessary knowledge to talk about abuse with children or the skills to support a child who has disclosed. All of these are potential barriers for schools to consider using the “WDYT?”™ program. Despite these, however, the program has been offered for over three decades in Calgary and clearly retains a strong following from local schools.

Limitations and strengths

While the current study could be seen as limited by the lack of a randomized control group, monitoring does not use the same rigorous standards as full program evaluations. Rather, as these are supplemental to initial positive program studies, the research design is not as comprehensive.

The two CKAQ-short 10 item scales were extrapolated from the full 33-item version associated with the previous “WDYT?”™ program evaluation (Tutty, 1997). While the Cronbach alpha on the older child version was acceptable at .70, the alpha of .57 is somewhat low for the younger student’s scale. In the original “WDYT?”™ program evaluation (Tutty, 1997), students in Grade One were tested individually and the evaluator noted the responses. In the current program monitoring, only 12 children in Grade 1 completed the pre-test/post-test, but administering the measure in a group setting may partially explain the relatively low scores. In continued monitoring, revising

the measure such as changing the responses from true/false to symbols for agreement or not (i.e. smiley faces) could be explored to increase responsiveness.

Conclusion

Recent revelations about widespread child sexual abuse perpetrated by Catholic priests in Philadelphia (Faisal & Barron, 2018) and allegations of the sexual abuse of children by celebrities or coaches in the media (Weatherred, 2015) remind us that, whether historical or current, children remain at risk of being sexually abused by trusted caregivers or relatives. Arming children with the knowledge that this is a possibility and providing skills that could either prevent or result in early intervention is essential. In the US, a campaign encouraging states to pass legislation to make child sexual abuse education mandatory in school curricula has been gaining momentum (<https://www.enoughabuse.org>). Partly in response to this, CCASA has received numerous inquiries about “WDYT?”™. Legislative initiatives like this are a welcome strategy to promote action in preventing child sexual abuse.

Not all students integrate child sexual abuse concepts to the same extent. Holloway and Polido (2018) identified difficulties with the proportion of concepts learned by children from low-income families at both baseline and post-test. Morris et al. (2017) found the opposite pattern reporting that youth in low-income counties responded more positively to the school-based intervention, as did those in counties with low rates of child abuse and neglect. These differential responses suggest the need to research characteristics beyond gender in clarifying best case prevention efforts.

The full range of CSA prevention is needed. While some excellent public awareness programs have been developed such as the US “Stop It Now!” and the Massachusetts’s “Enough Abuse” campaign, these are not necessarily widespread and evaluating the impact is difficult (Kemshall & Moulden, 2017). Parenting programs hold much appeal, but most child-focused programs include a parenting component and reportedly have limited success in engaging parents to attend (Tutty, 1997). In a recent small qualitative study, Rudolph and Zimmer-Gembeck (2018b) found that, despite the fact that parents were aware of the serious nature of CSA, they were unlikely to communicate with their children about this.

As such, we cannot rely on rarely available public awareness campaigns or parent programs to transmit core CSA prevention concepts to our children. CSA prevention and education programs as such as “WDYT?”™ teach ideas and skills that broaden children’s understanding of what is an all-to-common form of maltreatment, whether applying this to their own or to others’ experiences. In a qualitative study of the “WDYT?”™ program, when asked

whether the fact that students sometimes felt uncomfortable with the program content meant that the program should not be offered, a Grade 4 student simply stated, “We need to know” (Tutty, 2014, p. 28). Her statement is even more powerful given that, in the context of the current monitoring evaluation, after participating in the “WDYT?”™ program many of her fellow students learned the core CSA prevention concepts.

Acknowledgments

The authors would like to thank the City of Calgary’s Family and Community Support Services for funding the “Who Do You Tell?”™ program. Thanks also to the “WDYT?”™ educators for engaging young children in learning child sexual abuse education concepts. Thanks to the adults and school staff who made the program information accessible to the children and for inviting us to their school communities. Finally, thanks to the many children who took part in the program and the program monitoring.

Disclosure statement

No conflicts to report.

Ethical standards and informed consent

All procedures followed were in accordance with the ethical standards of the responsible committee on human experimentation [institutional and national] and with the Helsinki Declaration of 1975, as revised in 2000. Informed consent was obtained from the parents of the students included in the study.

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