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ASSESSING THE FEARS AND ANXIETIES OF SECOND AND THIRD GRADERS AFTER PARTICIPATING IN A SEXUAL ABUSE PREVENTION PROGRAM

presented by

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ASSESSING THE FEARS AND ANXIETIES OF SECOND AND THIRD GRADERS AFTER PARTICIPATING IN A SEXUAL ABUSE PREVENTION PROGRAM

By

Karen B. Kiemel

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ABSTRACT

ASSESSING THE FEARS AND ANXIETIES OF SECOND AND THIRD GRADERS AFTER PARTICIPATING IN A SEXUAL ABUSE PREVENTION PROGRAM

By

Karen B. Kiemel

The present study employed a pre-post test experimental design to examine whether, as compared to a control group of children, second and third grade children demonstrated an increase in fear and anxiety as a result of participating in a sexual abuse prevention program. One hundred and nineteen children participated. Dependent measures included the (1) the Revised Children Manifest Anxiety Scale (Reynolds & Richmond, 1978); (2) the Childhood Fear Scale--Revised, which measures children's fear of sexually abusive, benign, and common childhood fear situations; (3) the Apprehension Scale, an open ended questionnaire which assesses children's reasoning behind their fears, and (4) the "What If" Situation Test--Revised, which measures children's knowledge of sexual abuse prevention. The results indicated that, as compared to the control group. children did not evidence an increase or decrease in fear or anxiety levels as a result of participating in a sexual abuse prevention program. However, on average, all participants demonstrated a significant decrease in common childhood fear situations at post-test. Girls had higher levels of sexual abuse and common fear situations than did boys. In addition, older children had greater fear of benign situations. On average, all participants demonstrated a decrease in anxiety level at posttest, with children who received the curriculum demonstrating less of a decrease than those who did not receive the

curriculum. Moreover, children with high anxiety levels (regardless of group) had a greater knowledge of sexual abuse prevention concepts than children with low anxiety levels. These results indicate that children can be exposed to sexual abuse prevention programs without incurring anxiety or fears due to participating.

This dissertation is dedicated to my brother, Tim, whose enduring support and "words of wisdom" kept me on the path to completion.

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INTRODUCTION

The effects of participating in a sexual abuse prevention program on children's fears and anxieties have not been adequately investigated. Therefore, the purpose of this study is to determine whether such effects occur. To help understand the background to this research question relevant background will be discussed in relation to the following areas: (1) defining fear; (2) exploring factors that influence children's fear; and (3) examining previous research on children's fears and anxiety in relation to sexual abuse prevention. Then, based on this information, the rationale for the present study will be offered.

It is estimated that one-fourth of all girls and one-sixth of all boys will be sexually abused before they reach the age of 18 (based on a national prevalence survey by Finkelhor, Hotaling, Lewis, & Smith, 1990). The emotional and social consequences for these victims of child sexual abuse include—in the short term—sleep disturbances, bed wetting, withdrawal, clingingness, conduct problems, and school difficulties (for a review see Beitchman, Zucker, Hood, DaCosta, & Akman; 1991) and—in the long term—depression, poorly defined identity, low self-esteem, and unstable interpersonal relationships (for a review see Beitchman, Zucker, Hood, DaCosta, Akman, & Cassavia, 1992).

To protect children from these harmful effects, many schools have implemented programs that teach children about sexual abuse prevention (Plummer, 1986), and in some states they are mandatory (California, AB 2443, 1984; Wisconsin Act 213, 1985).

Prevention programs first teach children that the abuser's intentions are wrong (Finkelhor,

1984); without proper instruction, many children are too young to "fully understand the nature of the behavior forced upon them" (Conte, Rosen, Saperstein, & Shermack, 1985, p. 320). Children then learn to discriminate between appropriate and inappropriate touches, as well as to identify situations that may lead to abuse, such as bribes and secrets. Finally, they are taught the necessary assertiveness training and help seeking skills to get out of potentially abusive situations (Finkelhor, 1984).

Although sexual abuse prevention programs are meant to protect children from potential harm, they are not yet universal due to resistance by various educators and parents. Some adults oppose sexual abuse prevention programs because they are concerned that prevention programs may elicit fear and anxiety in children (Binder & McNiel, 1987; Conte & Fogarty, 1989; Garbarino, 1987; Miller-Perrin & Wurtele, 1986; Swan, Press, & Briggs, 1985; Wurtele & Miller-Perrin, 1987); that, as a result of learning about sexual abuse, children may become more scared of sexual abusive situations (for example, threat of children's private parts being touched), benign situations (such as hugs), as well as common childhood fear situations (such as thunderstorms and strangers)--and, that having these fears may then make children more anxious. The present study will examine whether such concerns are valid by assessing whether second and third graders' fears and anxieties increase as a result of participating in a sexual abuse prevention program.

Definition of Fear

In order to discern whether such effects might occur and whether these outcomes are accepted as appropriate or deemed detrimental, an understanding of children's fears is necessary. Fear is conceptualized as an emotional reaction to a stimulus or situation

(either real or imaginary) that an individual is encountering or anticipating. The emotional reaction is characterized by a cognitive, behavioral, and/or physiological component that may or may not occur concurrently (Dodge, 1989; Frijda, 1993; King, Hamilton, & Ollendick, 1988; Marks, 1987; Murphy, 1985; Ohman, 1993). The cognitive component reflects an individual's thought content. It is an emotional experience relating to consciousness whereby an individual reflects on him or herself, for example, thinking "I'm feeling scared of this large dog that is barking at me." The behavioral component is manifested by an individual's emotional expression in terms of voice tone, facial displays, posturing, and action. For example, through a trembling voice, wide eyes, cowering, and/or walking away, a person may reveal fear of the dog. Finally, the physiological component is an emotional state characterized by an individual's activation of the sympathetic portion of the autonomic nervous systems that includes an accelerated heart rate and a heightened galvanic skin response. When assessing fear, studies typically focus on only one of these three components. Physiological or behavioral measures are often employed when studying infants or young children (Jersild & Holmes, 1935; Lewis & Brooks, 1974). Cognitive measures (such as self-reports and/or parental reports) are commonly used with both younger and older children (e.g., Jones & Borgers, 1988).

Fears are a common and natural phenomenon which evolved due to their protective function. The purpose of the fear experience is to warn an individual of impending danger (either real or imaginary) (Hodiamont, 1991). Based on this warning, an individual will try to ward off the danger by controlling or avoiding the threat and/or

the individual's expression of fear will elicit help from those around him or her (Charlesworth, 1974). Therefore, fear is adaptive by eliciting a "positive self preserving and motivational quality" (Robinson, Rotter, Fey, & Robinson, 1991, p. 187). However, if an individual's fear becomes too great, an inhibiting or debilitating effect may ensue.

Infants and children demonstrate a variety of fears, some of which are transitory in nature and appear and disappear at particular developmental stages (Bauer, 1976; Ferrari, 1986; Hall, 1897; Jersild, Markey, & Jersild, 1933; King et al., 1988; Marks, 1987; Maurer, 1965; Morris & Kratochwill, 1983; Staley, & O'Donnell, 1984). Ollendick (1983) found that children's fears can be grouped into five factors: failure and criticism (such as school); the unknown (the dark or thunderstorms); minor injury and small animals (dogs); danger and death (getting lost); and medical fears (going to the doctor). Other studies also have found children to report such fears (Angelino, Dollins, & Mech, 1956; Croake & Knox, 1973; Derevensky, 1979; Gullone & King, 1994; King et al., 1988; King et al., 1989; Miller, Barrett, Hampe, & Noble, 1972; Ollendick, Yule, & Ollier, 1991; Pintner & Lev, 1940; Spence & McCathie, 1993; Tikalsky & Wallace, 1988). Several different factors influence whether children will demonstrate these fears. Factors Influencing Children's Fear

Children's cognitive level, individual traits, and temperamental characteristics as well as their personal life-course events and experiences influence the parameters of the objects, people, and situations that they fear. Such factors will influence whether children reveal fear as a result of participating in a sexual abuse prevention program.

Cognitive Development. Children's stage of cognitive development is one factor

that will determine the parameters of the objects, people, and situations that they fear by influencing the manner by which children perceive, conceptualize, discriminate, and anticipate stimuli in their environment. According to Werner's (1957) orthogenetic principle of development, children's developmental states begin globally displaying syncretism whereby children combine distinct qualities of an object under the same representation. The states then proceed to become increasingly differentiated and specific, thereby reflecting hierarchic integration or "marginal control" (Polanyi, 1966).

Therefore, in terms of perceiving and identifying fears, children are limited to their input and output system, represented by both verbal and iconic symbols, which become more distinctive and elaborated as children become older (Stevenson, 1972). Children must reach a certain maturation level (in terms of cognition and physical ability) for some fears to appear and other fears to disappear (Marks, 1987). For example, to fear strangers requires that an infant is able to identify, remember, and anticipate what is familiar and discriminate it from the unfamiliar (Hodiamont, 1991; Kagan, Kearsley, & Zelazo, 1978; Scarr & Salapatek, 1970). Therefore, at a few months of age, an infant is only startled by big changes in stimulation, such as loud noises. Yet, as the infant grows and gains the ability to perceive and anticipate more subtle and complex discrepancies, such as distinguishing the familiar from the unfamiliar, he or she will begin to fear strange objects, situations, and persons (Kagan et al., 1978; Scarr & Salapatek, 1970).

At age three, children are still likely to perceive formless objects on which they perceive imaginary objects; they are unable to differentiate internal representations (imaginary objects) from objective reality. Therefore, between the ages of three- and

five-years-old, children begin to fear imaginary creatures such as monsters and ghosts (especially when they are in the dark) as well as objects in their dreams (Angelino, Dollins, & Mech, 1956; Draper & James, 1985; Graziano, DeGiovanni, & Garcia, 1979; Jersild, 1950, Piaget, 1955, 1962; Sigel, 1964; Vandenberg, 1993; Werner, 1957; Werner & Kaplan, 1952). Other fears of children this age include doctors, animals, thunderstorms, and separation from caregivers (Bauer, 1976; Draper & James, 1985; King et al., 1988; King et al., 1989; Morris & Kratochwill, 1983). By the age of seven, many of these fears persist, except for fears of imaginary objects, because then most children are able to separate reality from their mental images (Bauer, 1976; Graziano et al., 1979; King et al., 1988; Morris & Kratochwill, 1983). In addition, children's fears begin to reflect central concerns in their lives and are more realistic and specific involving bodily injury, physical danger, and social fears (Angelino et al., 1956; Gullone & King, 1994; King et al., 1988; Moracco & Camilleri, 1983; Morris & Kratochwill, 1983; Ollendick et al., 1991). Children are often scared of getting lost and/or kidnapped, airplane rides, getting into fights, and personal injuries. By the age of ten or eleven, a time when scholastic achievement and feeling accepted becomes critical to surviving and adapting in children's everyday life, fears relating to school performance, physical appearance, and social relations begin to appear and persist during adolescence (Gullone & King, 1994; King et al., 1989; Ollendick et al., 1991).

Finally, once fears develop, children's cognitive ability in terms of discrimination and conceptualization, will determine the extent to which their fears generalize to other related stimuli. This is a function of children's perception of the similarity between the

feared stimulus and the other stimulus or stimuli. For example, a child who has a fear of dogs may become scared when encountering a cat if he or she conceptualizes dogs and cats at a more global level, such as "animals," rather than viewing cats and dogs as separate categories under the more general category of "animals." Therefore, if children are scared of persons and situations relating to sexual abuse, the extent to which these fears generalize to benign people, situations, or other fears is related to children's perception of the similarity and conceptualization of such objects, people, and/or events (Kendler & Kendler, 1956; White, 1963).

Individual Differences. Individual differences will also influence whether children reveal an increase or decrease in fear and anxiety as a result of receiving a sexual abuse prevention curriculum; there are significant differences among same-aged children in the objects that they fear (Jersild, 1968; Robinson et al., 1991). Individual differences in childhood fears are due, in part, to different past experiences. Some children have been exposed to physical and sexual abuse which may make them more vulnerable to experiencing fears and anxiety when participating in a sexual abuse prevention program because the curriculum reminds them of their fears. Similarly, some children may have had previous frightening interactions with strangers, babysitters, and/or relatives; therefore, learning or be reminded that these people could become sexually abusive may exacerbate the fears and anxiety of these children while not affecting the fears and anxieties of other children (Wolfe & Gentile, 1988). Alternatively, children without such a history may be more emotionally susceptible when exposed to a prevention program

because they have a lower baseline (at pretest) of fears and anxieties than children with previously established fears and anxieties.

In addition to differences in past experiences, personality characteristics may attribute to individual differences: fearfulness has been identified as a trait by some theorists (Bronson, 1969, 1971, 1987; Marks, 1987) or as a temperamental characteristic by others (Kagan & Moss, 1962). Therefore, for some children, fearfulness appears in infancy and persists throughout childhood; yet, other children reveal an increase or decrease in their level of fearfulness as they grow (Kagan, 1986). Therefore, children who demonstrate more fear, in general, at the time when they participate in a sexual abuse prevention program may be more prone to inciting fears or demonstrating an increase in fear levels as a result of participating in a sexual abuse prevention program.

Children's Fears and Sexual Abuse Prevention

Previous studies offer some indication of possible effects of sexual abuse prevention on children's fears and anxieties. However, the exploration of children's fears and anxieties are often narrow in focus and entail methodological limitations. Thus, the results have been inconclusive.

Only one study has assessed in a general fashion whether children indicate fears as a result of receiving a sexual abuse prevention curriculum by asking participants (age five to eight) "what made them feel 'unsafe or scared'?" (Briggs, 1991). There was no significant response differences between children who were exposed to a sexual abuse prevention program and those who had no exposure; however, no pretest assessments were made.

Only three studies have specifically assessed for increases in children's fear of situations involving sexual abuse. Ratto and Bogat (1990) found that, after participating in a sexual abuse prevention program, preschoolers when compared to controls, revealed a slight (although nonsignificant) increase in fear, while Kiemel and Bogat (1991) found no increase in fear. An assessment of second, fourth, and sixth graders by Garbarino (1987) found that, after reading the Spiderman comic about sexual abuse, approximately 38 percent of the girls and 28 percent of the boys were worried or scared because they read that sexual abuse might happen to them--however no comparison was made with a control group.

Studies have also examined whether children's fear of sexual abuse generalizes to people and circumstances that do not pose a threat of abuse, yet the circumstance might be interpreted as such by children because they could approximate a sexually abusive situation. For example, a "babysitter" is generally considered a benign person, unless he or she would instigate a form of sexual abuse. Similarly, "a hug" is a form of positive physical affection, unless it is misunderstood as a form of abuse. Assessments have explored whether children reveal an increase in fear of benign people and circumstances, such as, "positive physical affection" (Hazzard, Webb, Kleemeier, Angert, & Pohl, 1991; Wurtele, 1990; Wurtele, Kast, & Melzer, 1992; Wurtele, Kast, Miller-Perrin, & Kondrick, 1989; Wurtele & Miller-Perrin, 1987), "babysitters" (Ratto & Bogat, 1990; Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1992; Wurtele & Miller-Perrin, 1987), "relatives" (Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1992), "leaving the house" (Hazzard et al., 1991; Miller-Perrin & Wurtele, 1986; Wurtele & Miller-Perrin, 1987),

"going to school" (Hazzard et al., 1991; Miller-Perrin & Wurtele, 1986; Wurtele & Miller-Perrin, 1987), "taking a bath" (Wurtele & Miller-Perrin, 1987), and "going to doctor" (Wurtele et al., 1989; Wurtele et al., 1992). Overall, the findings indicated that there was no significant increase in fears, except for "babysitters" and "going to school." Wurtele and Miller-Perrin (1987) found that children did report a significant increase in fear on these two items (however, children's fear levels were still reasonably low). Although the findings of these studies indicate that, for the most part, children do not become scared of benign people and situations as a result of participating in a sexual abuse prevention program, assessments have methodological limitations which qualify any conclusions.

Rather than assessing for increases in fear on all of these examples, most studies assessed only a few examples at a time. Moreover, common forms of physical affection, such as "hand holding," "arm around shoulder," and "sitting on laps" were not included. Also, the studies examining the fears of older children (in grades 1 through 6) neglected to assess for increases in fear of any type of physical affection (except for Hazzard et al., 1991).

Furthermore, aside from a few exceptions (Hazzard et al., 1991; Ratto & Bogat, 1990; Wurtele, 1990; Wurtle et al., 1989), control groups were not used. Therefore, it is impossible to verify what effect the prevention program actually had on children's benign fears. In addition, samples sizes were generally small [except for Binder & McNiel (1987), Hazzard et al. (1991), and Wurtele et al. (1992)] and studies of elementary-school-aged children failed to assess participants' own reports of fear (Binder & McNiel,

1987; Hazzard et al., 1991; Miller-Perrin & Wurtele, 1987). Instead, parental reports were used, and parents are not always cognizant of their own children's fears (Lapouse & Monk, 1959).

These methodological limitations also frequently occurred when studies assessed and found no increase in children's common fear of "strangers" (Binder & McNiel, 1987; Hazzard et al, 1991; Miller-Perrin & Wurtele, 1986; Miltenberger & Theisse-Duffy, 1988; Ratto & Bogat, 1990; Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1991; Wurtele et al., 1992; Wurtele & Miller-Perrin, 1987). Other types of common fears--such as "the dark"--have been assessed with preschoolers only and, again, there have been no increases in fears (Kiemel & Bogat, 1991; Wurtele et al., 1989; Wurtele et al., 1991; Wurtele et al., 1992). However, except for the study by Kiemel and Bogat (1991), which examined nine common fear situations, studies have only examined one or two common fear items at a time.

Children's Anxiety and Sexual Abuse Prevention

If children do display an increase in fear as a result of participating in a sexual abuse prevention program, they may also show an increase in anxiety. Anxiety is an emotional state that is more general and diffuse than the fear reaction. Accordingly, rather than responding to a specific immediate threat, anxiety's purpose is to anticipate an array of possible future dangers to oneself (usually centered around a specific domain) and is characterized by high vigilance and preparation for such threats. Anxiety consists of a worry, social concern, and physiological component (Reynolds & Richmond, 1978).

The worry component represents the cognitive element of anxiety and includes rehearsing possible aversive situations and outcomes as well as methods to avoid or cope with them (Lehrer & Woolfolk, 1982; Morris, Davis, & Hutching, 1981). This mental rehearsal consists primarily of verbal rather than visual content and typically reflects prevailing life problems (Borkovec & Inz, 1990). Worrying becomes maladaptive when it is excessive and/or is based on imaginary situations that have little connection with happenings in the real world.

The social concern component of anxiety is characterized by the belief that peers are nonaccepting and critical of the child. Finally, the physiological component is reflected by sympathetic responses of the autonomic nervous system such as an increase in heart rate and galvanic skin response (i.e., sweating), which often interferes with concentration and is similar to the physiological response of fear.

Consequently, some children may become more anxious as a result of learning about sexual abuse prevention. They may become preoccupied with the danger of sexual abuse and will be hypervigilant to potential abusers and abusive situations as well as worrying about abusive encounters. Alternatively, children who are predisposed to high levels of anxiety may become more fearful and anxious when learning about sexual abuse prevention because they are predisposed to sense danger in all situations that they encounter.

Sexual abuse prevention studies have assessed whether children reveal an increase in emotional distress (anxiety) as a result of learning about sexual abuse prevention program. Emotional distress is likely to occur if children feel vulnerable to the danger of

sexual abuse (Lazarus, 1969). Theoretically, participating in a prevention program may either increase or decrease children's feelings of vulnerability.

Findings thus far suggest that most children do not become either more or less upset after participation. Several studies found that none of the participants showed evidence of emotional distress (Binder & McNiel, 1987; Daro, Duerr, & LeProhn, 1987; Hazzard et al., 1991; Miller-Perrin & Wurtele, 1986; Miltenberger & Theisse-Duffy, 1988; Nibert, Cooper, & Ford, 1989; Swan et al., 1985; Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1992; Wurtele & Miller-Perrin, 1987); a few studies found that a small percentage of children revealed emotional disturbances (Miller-Perrin & Wurtele, 1986; Nibert et al., 1989; Swan et al., 1985), and only two studies found that some participants demonstrated a significant increase in several behaviors that indicate emotional distress (Wurtele et al., 1989; Wurtele et al., 1992).

However, again due to methodological problems, these findings must be interpreted cautiously. Only five studies used control groups (Hazzard et al., 1991; Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1992). All studies, except one (Hazzard et al., 1991), assessed children's emotional distress by parent and/or teacher report. Children, therefore, may be suffering from anxiety that is not overtly expressed to their parents; parent-child correlates of anxiety are generally low (Barrios, Hartmann, & Shigetomi, 1981; Johnson & Melamed, 1979; Jones & Borgers, 1988).

Children's Fear/Anxiety and Knowledge

Although the limited evidence suggests that children do not reveal an increase in fears and anxieties as a result of participating in a sexual abuse prevention curriculum,

assessments, typically, have not measured whether children demonstrate an increase in fears and anxieties in relation to their knowledge about sexual abuse prevention.

Learning how to prevent sexual abuse may minimize or negate children's fear of sexual abuse; according to Lazarus (1976), "the intensity of the threat depends on how well the person feels that he can deal with the danger or harm which may occur" (Cox, 1980, p.23).

Only two studies have assessed whether children's knowledge of sexual abuse prevention influences their fears and anxieties. Wurtele et al. (1989) found that preschoolers receiving the Behavioral Skills Training (BST) program did not show evidence of a negative behavior change or an increase in fears and the children demonstrated that they had learned the concepts of the program (sexual abuse knowledge, prevention skills, and the ability to identify a sexually exploitive situation). However, boys, who had participated in the "Feelings Program" showed evidence of difficulties in identifying appropriate and inappropriate touch situations and displayed a significant increase in crying and noncompliance (as compared to both the BST participants and a control group of children) suggesting that emotional distress resulted because the boys felt vulnerable to the threat of sexual abuse. Kiemel and Bogat (1991) found that, independent of participating in a sexual abuse prevention program, preschoolers with a high fear of sexual abusive situations showed greater knowledge about sexual abuse prevention than children with lower fear. However, these studies only focus on preschoolers and do not assess benign fears or specific anxiety levels.

Description of Children's Fears

In addition to the methodological limitations cited above, previous studies have neglected to understand the reasoning behind children's fears. It is possible that participating in sexual abuse prevention programs may affect children's fears at a deeper level by changing the rationale for their fears. For example, before a program, a child may be scared of "neighbors" because they could yell; and, after the program, the child may be scared of "neighbors" because they could become sexually abusive.

Rationale for the Present Study

Much remains to be understood concerning the effects of sexual abuse prevention programs on children's fears and anxieties. It is still unknown whether children perceive sexual abuse as a danger, and, thus, experience fear pertaining to certain events and/or people. If children do, indeed, reveal an increase in fear after participating in a sexual abuse prevention program, it is unclear whether these fears are specific to potentially abusive situations and people or generalize to benign circumstances. Further, research has not yet examined whether signs of emotional distress also occur as a result of participation and whether children ruminate and worry about sexual abuse. Moreover, if children are fearful of sexual abuse, it is unclear whether learning the prevention curriculum diminishes or exacerbates the fear.

To date, prevention studies have failed to accurately assess whether, after participation, children reveal fears related to sexual abuse, benign situations, and common childhood fears. In addition, large sample sizes, control groups, pretest assessments, and children's self-reports were generally not used. Moreover, studies have failed to examine children's fears and emotional distress concurrently. Finally, most studies have neglected

to assess whether knowledge of sexual abuse prevention impacts on children's fears and anxieties. Based on these limitations, there is a need for a more thorough assessment of the effects of a sexual abuse prevention curriculum on children's fears and anxieties. Therefore, the purpose of this study was to answer the following two research questions: (1) Do second and third grade children incur an increase or decrease in fears related to sexual abuse, benign touch, and/or common childhood fear situations as a result of participating in a sexual abuse prevention program? and (2) Do second and third grade children incur an increase or decrease in anxiety as a result of participating in a sexual abuse prevention program? When participants' gender significantly correlates with fear and/or anxiety pretest measures, these research questions will also be considered in light of children's gender. Similarly, when participants' age significantly correlates with fear and/or anxiety pretest measures, these questions will be considered in light of children's age.

In order to answer these questions, this study employed a large sample size, a comparison group, random assignment, and pretest and posttest measures. Using a variety of examples, children's levels were examined based on three types of situations-sexually abusive, benign, and common childhood fears. Children's anxiety level was assessed using the Revised Children's Manifest Anxiety Scale (Reynolds & Richmond, 1978). In addition, children's fear and anxiety levels were examined in relation to their knowledge of sexual abuse prevention. Finally, an individual interview explored the rationale for children's fears as well as whether children's fears interfered with their everyday lives and/or incited excess worrying.

METHOD

Sample

The participants were 119 second and third graders (56 boys and 63 girls) who attended an elementary school in a town forty miles from Michigan State University. Due to either absenteeism, attrition (one child dropped out of the study), or children choosing not to answer one or all of the questionnaires, not all participants fully completed pretest and posttest measures. Therefore, the sample size is slightly smaller than 119, depending on which analyses were conducted.

Participants had not been previously exposed to a prevention program through this school. Children were predominantly Caucasian with a median age of 8.6 years (ages ranged from 7.3 to 10.4 years).

Materials

"Talking about Touching". "Talking about Touching" (Seattle Institute for Child Advocacy, 1985) is a child abuse prevention curriculum designed for children in grades 1 through 3. It is widely used (for example, Tutty, 1992) and has been shown to be effective in teaching children about sexual abuse prevention (Downer, 1984). The curriculum was modified for this study to involve five, thirty minute presentations (over the course of one week) which focused on sexual abuse prevention. Children learn a "NO, GO, TELL" message by discussing picture stories as well as role-playing. In addition, the curriculum includes take-home activities (related to each presentation) that each participant completes with a parent.

Revised Children's Manifest Anxiety Scale (RCMAS). The RCMAS (Reynolds & Richmond, 1978) measures children's anxiety and consists of 37 items (see Appendix A). According to Reynolds and Richmond (1985), 28 of the items reflect either a physiological (10 items), concentration (7 items), or worry/oversensitivity component (11 items) of anxiety and the remaining nine items consist of a lie scale. Children circle YES if the item is true about them (scored as one point), or NO (scored as zero points) if it is not. Children's anxiety scores on the total RCMAS range from 0 to 37; the RCMAS scores (excluding the nine lie items) range from 0 to 28.

The internal consistency for the total RCMAS (excluding the lie items) was .87 (including the lie items, it was .84); this is in accord with the reliabilities reported in other studies (Martorell, Peiro, Llacer, Navarro, Flores, & Silva, 1990; Reynolds & Richmond, 1985). Furthermore, the validity of the RCMAS has been demonstrated by several studies (Perrin & Last, 1992; Reynolds & Richmond, 1985).

Childhood Fear Scale--Revised (CFS-R). The CFS-R adds five questions to the 20-item Childhood Fear Scale (Bogat & McGrath, 1988) and assesses children's level of fear about sexually abusive, benign, and common childhood fear situations (refer to Appendix B). Participants indicate how scared they feel about each examples by circling either "very scared," "a little scared," or "not scared" (scored 3, 2, 1 respectively). To ensure that each item reflected the appropriate situation type (sexual abuse, benign, or normal childhood fears), a factor analysis was conducted on participants' pretest CFS responses (using a three-factor solution with a principal components analysis and a varimax rotation). Due to double loading, five items were deleted. The remaining items

were examined to determine whether they conceptually belonged together--resulting in the deletion of two more responses that did not pertain to sexually abusive situations. Consequently, 18 items were used for analyses: five reflecting sexually abusive situations (with an internal consistency reliability of .90 based on pretest scores and test/retest reliability of .82 based on the control group scores); seven reflecting benign situations (having an internal consistency of .85 and test/retest reliability of .64); and six reflecting common childhood fear situations (having an internal consistency of .70 and test/retest reliability of .74). CFS-R scores, on the total scale, could range from 18 to 54. Possible scores for sexual abuse items range from 5 to 15; scores on the benign items could range from 7 to 21; and scores on the common fear items could range from 6 to 18. Concurrent validity of the CFS-R is indicated by the significant correlation (based on two-tailed test of significance) between the total CFS-R and the RCMAS (excluding the lie items) $[\mathbf{r}(115) = .33, \mathbf{p} < .01]$ as well as the common fear factor $[\mathbf{r} = .32 (115), \mathbf{p} < .01]$ and the lack of correlation of the benign factor with the RCMAS [r (115) = .07, p > .10]. Anxiety and fear have found to be related (Dong, Yang, & Ollendick, 1994; Ollendick, Yule, & Ollier, 1991); other fear scales are validated through their correlation with anxiety scales (e.g., Dong et al., 1994; Ollendick, 1983).

"What If" Situation Test--Revised (WIST-R). The WIST-R is a modification of the WIST developed by Saslawsky & Wurtele (1986) and measures children's knowledge of sexual abuse prevention concepts (see Appendix C). Comprised of four scenarios (three portraying sexually abusive situations and one depicting a benign touch situation), the WIST-R assesses children's knowledge across five dimensions: ability to

discriminate between appropriate and inappropriate touch (RECOGNITION), to escape the potentially abusive situation through words (SAY), such as saving "no:" to act (DO). for example, by leaving the situation; to tell adults (WHO), and to report the sexual abuse incident (WHAT). On the dimension of RECOGNITION, a child received 1 point for correctly recognizing whether or not each situation involved a sexually abusive situation; each participant's total score was determined by summing across all four stories, thus, the possible range was 0 to 4. On the remaining dimensions, total scores were based on summing across the three vignettes that involved sexually abusive situations (see Appendix D for coding manual). With the variable, SAY, children's scores were determined by their verbal ability to verbally reject the perpetrator for each story. A maximum of nine SAY responses were coded on each vignette, with each response being scored based on the following criteria: a SAY response received 2 points for a direct refusal (e.g., "Tell him 'no'."), 1 point for an indirect refusal (such as a bribe or a threat), and 0 points for compliant answers (e.g., "I would do it."). Total possible scores on the SAY dimension (summing across the three vignettes) ranged from 0 (no say responses offered) to 54. Scoring of the dimension DO was based on children's ability to effectively leave the sexually abusive situation. A maximum of nine DO responses per question were coded based on the following criteria: 2 points were given for an immediate escape, 1 point for a delayed or help seeking response, and 0 points for remaining in the situation. Total possible scores on the DO dimension (summing across the three vignettes) ranged from 0 (no say responses offered) to 54. The variable, WHO, scoring was based on the number of people to whom a child would tell about the sexual

abuse request—1 point for each response. For every vignette, a child could receive a maximum of 5 points, thus, the possible total score for WHO (summing across the three stories) ranged from 0 to 15 points. Scoring of the last variable, WHAT, was determined by how completely participants would inform an adult about the sexual abuse incidence. For each vignette, a child received 2 points for accurately identifying both the perpetrator and the situation (e.g., "this man in the park told me if I took my pants off and let him touch my private parts he would buy me an ice cream cone"), 1 point for correctly identifying either the perpetrator or the situation, or for vaguely describing both the perpetrator and the situation, and 0 points for an uninformative disclosure. The possible range for total scores on WHAT (by summing across the three vignettes) was zero to six points. Coding was conducted by undergraduate research assistants who were extensively trained. Interrater reliability was 93 percent.

Apprehension Scale (AS). The Apprehension Scale was developed for this study and is an open-ended questionnaire designed to assess the reasoning behind children's fears of ten different people or events (such as "neighbors" or "going to the doctor") by asking "What is it about 'neighbors' that makes you scared?" (see Appendix E). The ten items of the AS are as follows: "neighbors," "babysitters," "relatives," "strangers," "hugs/kisses," "leaving the house," "going to school," "going to the doctor," "someone asking to touch your private parts," and "someone asking you to touch their private parts." See results for information about scoring. The AS also assesses whether children's fears of these ten items interferes with their everyday activities and/or incites worrying. Children are asked whether feeling scared every prohibits them from doing

something that they want to do. If children answer "yes," the activity or activities are recorded and the frequency with which the activity is prevented is scored based on a 4 point score: "once in a while," "sometimes," "a lot of the time," and "all of the time." In addition, children are asked whether they ever worry or feel scared when they are not around the feared stimulus. If children answer "yes," then on what occasion the children worry is recorded as well as the frequency with which they worry (based on the same 4 point scale as above).

Design and Procedure

The participating school was elicited by sending a letter and a copy of the sexual abuse prevention curriculum to principals in the greater Lansing area describing the study and inviting their second and third graders to participate (see Appendix F); the school consisted of four second grade and four third grade classrooms. A parent letter (which included a consent form) was sent home with the children explaining the study and offering a parent meeting, where more information about the curriculum and evaluation was given (see Appendix G).

The testing and curriculum were administered to the children using the following procedure. The eight participating classrooms were paired up and, within each classroom pair, children with parental consent to participate were matched for gender and randomly assigned to either the treatment or the delayed treatment control group. Due to some incomplete questionnaires, the resulting number of boys and girls was not exactly equal between the treatment and the control group. Before testing, children became familiar with the curriculum teachers and interviewers at lunchtime and recess. All participants

gave their verbal consent and were assessed by trained graduate and undergraduate students one week before and one week after the experimental groups received the curriculum. Assessments included the CFS-R and RCMAS, which were administered in a group. In addition, the WIST-R and AS were administered individually by the primary investigators and trained undergraduate students. One of two trained graduate students taught the sexual abuse prevention curriculum, "Talking about Touching," to the treatment group, while the comparison group and nonparticipants took part in an alternate activity. Once the study was over (that is, the posttest assessments were completed) the control group then received the curriculum.

RESULTS

Children's Fear Levels

One hundred and ten participants completed both the pretest and posttest CFS-R: all results are displayed in Tables contained in Appendix H. Children's mean and sum scores are displayed in Table 1 and 2 (respectively). At pretest, an analysis of variance revealed that there was there was no significant difference between the experimental and the control group on the sexual abuse factor, the benign factor, nor the common fear factor [F (3, 46) = .27, p > .10].

In order to assess whether children's fear levels increased as a result of participating in the sexual abuse prevention program, a 2 X 2 repeated measures MANOVA (Condition by Time) was conducted with the sexual abuse, common fear, and benign factor of the CFS-R as the dependent measures. The results indicate that there was no significant difference between the experimental and control group over time on the CFS-R's factors [E(1, 108) = .23, p > .10]. However, children's fear level significantly decreased over time [E(1, 108) = 4.30, p < .05]. Results from the MANOVA are displayed in Table 3.

Subsequent ANOVAs were conducted and revealed that the time effect was due to the common fear factor [E(1, 108) = 7.78, p < .01] and not the benign factor [E(1, 108) = .32, p > .10] nor the sexual abuse factor [E(1, 108) = .50, p > .10]: On average, all participants revealed a significant decrease in common fear level over time. In addition, there was a main effect for fear [E(2,107) = 180.38, p < .01]. Children scored highest on the sexual abuse factor (M = 2.36) followed by the common fear factor (M = 1.47);

children scored lowest on the benign factor ($\underline{M} = 1.13$). Results from the ANOVAs are displayed in Table 4, 5, and 6.

Participating in the sexual abuse prevention program may affect children differently based on their gender and/or age. Therefore correlational analyses were conducted on pretest scores on the CFS factors to determine whether there was any relationship between the factors and children's age and/or gender.

Gender Effects. There was a significant positive correlation between gender and the pretest common fear factor [r(110) = .38, p < .01] as well as the pretest sexual abuse factor [r (110) = .27, p < .01]. However, there was not a significant correlation between gender and the pretest benign factor [r(110) = -.13, p > .10]. Consequently, a 2 X 2 X 2 repeated measures MANOVA (Condition by Time by Gender) was conducted with the sexual abuse factor and common fear factor as the dependent measures. T-tests were first conducted to assess whether there were any significant differences between the experimental and control group for boys' scores on the pretest sexual abuse and common fear factor as well as whether there were significant differences between girls' scores on these dimensions: no significant differences were found for boys on the pretest common fear factor [t (46) = .12, p > .10] nor on the pretest sexual abuse fear factor [t (48) = -.57, p > .10]. Similarly, there were no significant differences between the experimental and control group for girls on the pretest common fear factor [t (57) = .56, p > .10] nor on the pretest sexual abuse factor [t (57) = 1.22, p > .10]. Table 7 and 8 provide, respectively, mean and sum scores at both pre- and posttest based on children's gender and group type.

The results indicate that there was not a group by gender by time interaction [F (1, 106) = .05, p > .10]. However there was a significant gender by fear by time interaction

with boys having similar common fear levels over time and a decline in sexual abuse fear levels over time; girls' common fear level declined over time and their sexual abuse levels remained almost constant [F(1, 106) = 11.47, p < .01]. Results of the MANOVA are displayed in Table 9.

In addition, there was a significant main effect for gender [E(1, 106) = 20.84, p < .01]. Therefore, separate repeated measures univariate analyses were conducted on the common fear and sexual abuse factor to determine whether one or both of the factors were influencing the significant findings. The results indicated that on the common fear factor there was a main effect with girls having greater levels of common fear than did boys [E(1,106) = 12.98, p < .01]. Similarly, on the sexual abuse factor, there was a main effect with girls having significantly higher levels of fear than did boys [E(1,106) = 12.98, p < .01]. Results of the ANOVAs are displayed in Table 10 and 11.

In addition, results of the ANOVA supported the MANOVA's significant fear by gender by sex interaction. On the common fear factor there was a significant interaction between gender and time: girls revealed a decline in fear level over time whereas boys' fear level remained almost constant [F(1,106) = 5.17, p < .05]. On the sexual abuse factor there was a trend with boys decreasing in fear level over time and girls' fear level remaining almost constant [F(1,106) = 2.99, p < .10].

Age Effects. Age was classified into two categories: younger versus older children based on a median split of 8.6 years of age. Although not significant, there was a trend of a positive relationship between age and the pretest benign factor [r(110) = .18, p < .10] and a negative relationship between age and the pretest common fear factor [r(110) = .18]

(110) = -.18, p < .10]. However, there was no trend with the sexual abuse factor [r (110) = .09, p > .10]. Consequently, a 2 X 2 X 2 repeated measures MANOVA (Condition by Time by Age) was conducted with benign and common fear factor of CFS-R as the dependent measures. T-tests were first conducted to assess whether there were any significant differences between younger participants' scores on the pretest benign and common fear factor in the experimental and control group as well as whether there were differences between older participants' scores on these dimensions: no significant differences were found for younger participants on the pretest common fear factor [t (52) = .52, p > .10] nor on the pretest benign factor [t (52) = -1.13, t > .10]. Similarly there were no significant differences between the experimental and control group for older participants on the pretest common fear factor [t (54) = .56, t > .10] nor on the pretest benign factor [t (54) = .35, t > .10]. Table 12 and 13 provide children's mean and sum scores, respectively, on both pre- and posttest based on age and group type.

The results of the MANOVA indicated that there was a trend for a group by age by time interaction [E(1, 106) = 3.41, p < .10]: Older children in the experimental and control group and younger children in the control group had similar levels of fear over time, whereas younger children in the experimental group showed a decline in fear over time. Results of the MANOVA are displayed in Table 14.

Repeated measures univariate analyses were then conducted on the common fear and benign factor to determine whether one or both of the factors was influencing the significant interaction. Results of the ANOVA indicated that this trend was due to the common fear factor [F(1, 106) = 2.88, p < .10]--see Table 15 and 16.

The MANOVA also revealed that there was a significant age by fear interaction. Younger children demonstrated a greater discrepancy between normal and benign fear levels than did older children [F(1, 106) = 7.67, p < .01]. In addition, the ANOVA on the benign factor indicated that older children had higher levels of benign fear that did younger children [F(1, 106) = 3.77, p = .055].

Children's Anxiety Levels

One hundred and ten participants completed both the pretest and posttest RCMAS: 50 boys and 60 girls. Children's mean and sum scores are displayed in Table 17. Anxiety scores were based on all items of the RCMAS, excluding the lie items; studies typically exclude the lie items when employing the RCMAS (for example, Martorell et al., 1990). At pretest, there was no significant difference between the experimental and control group on the RCMAS [t (100) = 1.20, p > .10].

In order to assess whether children's anxiety level increased as a result of participating in the sexual abuse prevention program, a 2 X 2 repeated-measures ANOVA (Group by Time) was conducted with the total RCMAS (excluding the lie scale) as the dependent measure. The analysis on the RCMAS revealed that there was a main effect for time with all participants displaying a significant decrease in anxiety over time $[E(1, 108) = 52.30, p \le .01]$. Moreover, there was a significant interaction between the control group and the experimental group over time with children in the control group exhibiting a greater decrease in anxiety over time than the experimental group $[E(1, 108) = 3.91, p \le .05]$. Table 18 displays results of the ANOVA.

Post hoc analyses were conducted pertaining to participants' age and gender. Correlational analyses revealed that there was a positive relationship between pretest anxiety scores and gender [\mathbf{r} (110) = .31, \mathbf{p} < .01] as well as between pretest anxiety scores and age [\mathbf{r} (110) = .20, \mathbf{p} < .05]. Therefore, two separate univariate analyses were conducted: 1) a 2 X 2 X 2 repeated measures ANOVA (Condition by Time by Sex) with the RCMAS as the dependent measure and 2) a repeated measures ANOVA (Condition by Time by Age), again with the RCMAS as the dependent measure.

Gender Effects. T-tests revealed that there was no significant difference between boys in the experimental group from boys in the control group on pretest scores of the RCMAS [t (48) = 1.39, p > .10]. Similarly, there was no significant difference between girls in the experimental group from girls in the control group on the RCMAS [t (58) = .78, p > .10]. Table 19 provides children's mean scores for both pre- and posttest based on gender and group type. Results of the ANOVA revealed that there was no significant interaction between condition and gender over time on the RCMAS [E (1,106) = .82, p > .10]. However there were main effects with girls demonstrating significantly higher levels of anxiety than boys on the RCMAS [E (1,106) = 11.49, p < .01]. Table 20 displays results of the ANOVA.

Age Effects. T-tests revealed that there was no significant difference between younger children in the experimental group and younger children in the control group on pretest scores of the RCMAS [t (48) = 1.39, p > .10]. Similarly, there was no significant difference between older children in the experimental group and older children in the control group on pretest scores of the RCMAS [t (58) = .78, p > .10]. Table 21 provides

children's mean scores for both pre- and posttest based on age and group type. The ANOVA indicated that there was no significant interaction between group and age over time on the RCMAS [F (1,106) = .02, p > .10]. However, there was a main effect for age with older children demonstrating significantly higher anxiety levels than younger children on the RCMAS [F (1,106) = 6.17, p < .05]. Table 22 displays results of the ANOVA.

Children's Fear/Anxiety and Knowledge

Based on an analysis of variance, there was no significant difference between the experimental and control group on the WIST-R components $[E\ (5,104)=1.45,\,p>.01]$. Refer to Table 23 for sum scores on the WIST-R components. In order to assess whether children's knowledge levels increased as a result of participating in the sexual abuse prevention program, a 2 X 2 repeated measures MANOVA (Condition by Time) was conducted with the WIST-R components as the dependent measures (RECOGNITION, SAY, DO, WHO, WHAT). The results of the MANOVA are displayed in Table 24 and indicated that there was not a significant interaction of condition by time on the WIST-R $[E\ (1,108)=.17,\,p>.10]$; however, all participants showed a significant change in knowledge over time $[E\ (1,108)=6.88,\,p\le.01]$. Separate repeated measures ANOVA on each of the WIST-R components revealed that the significance was due to the WHO component $[E\ (1,108)=9.47,\,p<.01]$ with children increasing in the number of people they would tell about the abuse at posttest. Results of the ANOVAs are displayed in Table 25 through 29.

Correlational analysis (based on two-tailed test of significance) were conducted to determine whether the WIST-R components were correlated with participant's age and/or gender. SAY was the only component to correlate significantly with gender $[\mathbf{r} \ (110) = .22, \mathbf{p} < .05]$. WHO was the only component to correlate significantly with age $[\mathbf{r} \ (110) = .20, \mathbf{p} < .05]$.

Gender Effect. T-tests revealed that there was no significant difference between boys in the experimental group from boys in the control group on SAY pretest scores of the WIST-R [t (47) = .18, p > .10]. Similarly, there was no significant difference between girls in the experimental group from girls in the control group on SAY pretest scores [t (59) = -1.97, p > .10]. A 2 X 2 X 2 repeated measures ANOVA (Condition by Gender by Time) was conducted and the results indicated that there was no significant interaction of group type by gender over time on the SAY component [E (1, 106) = 1.39, p > .10]. However, there was a trend of a main effect for gender with girls having higher scores on the SAY component than boys [E (1, 106) = 3.56, p < .10]. Table 30 displays results from the ANOVA.

Age Effect. T-tests revealed that there was no significant difference between younger children in the experimental group and younger children in the control group on WHO pretest scores of the WIST-R [t (52) = -.44, p > .10]. Similarly, there was no significant difference between older children in the experimental group and older children in the control group on WHO pretest scores [t (54) = 1.31, p > .10]. A 2 X 2 X 2 repeated measures ANOVA (Condition by Age by Time) was conducted using the WHO component of the WIST-R as the dependent measure. There were no significant

interaction between the experimental and control group and age over time on the WHO component [F(1, 106) = .40, p > .10]. However, younger children revealed a significant increase over time on the WHO component, whereas older children did not demonstrate this increase [F(1,106) = 5.11, p < .05]. Table 31 displays the results of the ANOVA.

High versus Low Anxiety and Fear. It was also examined whether participants' fear and/or anxiety level influenced their knowledge of sexual abuse prevention as a result of participating in the program. Participants were divided into two groups based on high and low fear levels for each of the CFS-R factors: sexual abuse, benign, and common fear. Participants were also divided into high and low fear level groups based on anxiety levels as determined by the RCMAS (excluding the lie items). Division of the groups were based on median splits of pretest scores, however some judgments were also made. Six participants, whose scores were in the middle on the RCMAS were not analyzed. Cut-off on the common fear factor resulted in uneven sample sizes, because there was a gap between scores. Similarly, on the benign factor, the sample size of the two groups were uneven because 75 of the children had the same score (the minimum score) and therefore, comprised the low level fear group. Each of these groups were separately assessed via a repeated-measures ANOVAs--2 X 2 (condition by time) with the WIST-R as the dependent variable. Based on separate t-test, there was no significant difference on children's pretest WIST-R scores between the high and low fear groups on each of the CFS-R factors as well as on the anxiety scale (see Table 32).

The results indicated that there was no significant interaction between fear levels on the CFS-R factors, condition, and knowledge level over time for any of the groups

(see Table 33 through 35). However, there was a significant finding with the high versus low anxiety level group: children in the high anxiety group demonstrated greater knowledge [E(1, 99) = 4.54, p < .05]--refer to Table 36.

Apprehension Scale

Interference and Worry. A 2 X 2 repeated measures ANOVA (condition by time) was conducted employing children's response to determine whether their fears ever interfered by preventing them from conducting their everyday activities (PREVENTION). Another 2 X 2 repeated measures ANOVA (condition by time) was conducted to determine whether children ever worried about the fear (WORRY). T-tests revealed that there was no significant difference between the experimental and control group on pretest scores for PREVENTION [t (88) = -.61, p > .10] and pretest scores for WORRY [t (88) = -.44, p > .10]. The analyses indicated that there was no significant difference between the control and the experimental group over time in terms of both PREVENTION [F (1,92) = 1.26, p > .10] and WORRY [F (1,88) = .22, p > .10]--refer to Table 37 and 38, respectively. However, all participants demonstrated a significant decrease over time: PREVENTION [F(1.92) = 7.66, p < .01] and WORRY [F(1.88) =14.39, p < .01]. Due to low response rate of children indicating that their fears incite interference and/or worry, the frequency and descriptors of interference and worry were not analyzed.

Content Categories of Children's Fears. Using responses from the Apprehension Scale, children's rationale for their fears were analyzed based on a content analysis.

Pretest responses were read to determine which content areas they reflected. These

content areas were continually refined and reconceptualized based on the analysis of four graduate students and two faculty members. Twenty-three content categories resulted (see Appendix I for the scoring manual which includes a description of the content categories). Nineteen of the categories describe the children's fear: Sexual Abuse; New/unknown Situations; Benign Touch; Nonspecified Aggression; Concern For Person's Well Being; Kidnapping; Hitting; Threat of Death; Burglary; Nonintentional Harm/Child; Visceral Reaction; Unwanted Activity; Child In Trouble; Harming Others; Verbal Aggression; Nonintentional Harm/Other; Person In Trouble; Vague Response; Child Does Not Know. Four of the content categories describe where the child is located when experiencing the fear: When Confronted with Abuse; When Child is Alone; When Child is in a Public Place; When Child is Home. Coding of the content categories was conducted by two trained research assistants; interrater reliability was 80%. Table 39 displays the frequencies of the content categories collapsed across the ten questions at pre- and post-test for both the experimental and control group. The results indicate that the content categories are similar for children in both the experimental and control group.

DISCUSSION

The present study found that second and third graders did not reveal an increase in fear levels of sexually abusive, benign, or common fear situations as a result of participating in a sexual abuse prevention program (refer to Table 40 for a summary of significant findings). Specifically, all participants revealed a decrease in common fear levels. In addition, children did not demonstrate an increase in anxiety levels. All participants displayed a decrease in anxiety over time; however, the control group revealed a greater decline over time. These findings are substantiated by the study's use of a large sample size, control group, random assignment, as well as pretesting and posttesting procedures, which previous investigations studying fears in relation to sexual abuse prevention programs rarely used. In addition, this study extended the previous investigations by employing an extensive assessment of elementary aged children's fears and anxieties: children's anxiety levels were measured through self-reports employing a standardized measure and children's fears were assessed across three dimensions: sexual abuse, benign, and common childhood fear situations.

This study also revealed some age effects with older children demonstrating greater benign fear levels and greater anxiety. In addition, younger children increased in knowledge over time. Results of this study also indicate some gender effects with girls revealing greater level of overall fear, sexual abuse, and common childhood fear situations as well as demonstrating higher anxiety levels. Moreover, this study found that children did not reveal an increase in their fears preventing them from conducting their everyday activities and or inciting worrying. Finally, the study's content analysis

revealed that children's reasoning behind their fears does not change as a result of participating in a sexual abuse prevention program.

The results of this study are generally consistent with those of previous studies that assessed children's fears and/or anxiety as a result of participating in a sexual abuse prevention program. Briggs (1991) had found no increase in children's fears when responding to the open ended question asking them what made them feel "unsafe or unscared." In addition, studies assessing children's fears of benign people and situations generally found no increase in fear levels following a sexual abuse prevention program (Hazzard et al., 1991; Miller-Perrin & Wurtele, 1986; Ratto & Bogat, 1990; Wurtele, 1990; Wurtele et al., 1992; Wurtele et al., 1989; Wurtele & Miller-Perrin, 1987). Similarly, studies have not found an increase in children's common fear of "strangers" (Binder & McNiel, 1987; Hazzard et al. 1991; Miller-Perrin & Wurtele, 1986; Miltenberger & Theisse-Duffy, 1988; Ratto & Bogat, 1990; Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1991; Wurtele et al., 1992; Wurtele & Miller-Perrin, 1987) or "the dark" (Kiemel & Bogat, 1991; Wurtele et al., 1989; Wurtele et al., 1991). Previous studies have not specifically assessed for fears relating to sexual abuse prevention in elementary aged children as a result of participating. However, Garbarino (1987) found that 38 percent of the girls and 28 percent of the boys were worried or scared because they read that sexual abuse might happen to them; yet these results are not based on a comparison group or pretest measures. The few studies that did employ pretest measures and a comparison group focused on preschool aged children and found no significant increases in fear of sexual abuse situations (Kiemel & Bogat, 1991; Ratto & Bogat, 1990). In accord with the present finding, previous studies found that most children do

not reveal an increase or decrease in anxiety as a result of participating in a sexual abuse prevention program (Binder & McNiel, 1987; Daro, Duerr, & LeProhn, 1987; Hazzard et al., 1991; Miller-Perrin & Wurtele, 1986; Miltenberger & Theisse-Duffy, 1988; Nibert et al., 1989; Swan et al., 1985; Wurtele, 1990; Wurtele et al., 1989; Wurtele et al., 1992; Wurtele & Miller-Perrin, 1987).

Before participating in the program, children revealed that they did have knowledge about sexual abuse prevention. Previous research studies have also found that children demonstrate considerable knowledge about sexual abuse prevention before receiving a prevention program (Saslawsky & Wurtele, 1986; Swan et al., 1985; Wolfe, MacPherson, Blount, & Wolfe, 1986). In addition, results on the knowledge measure revealed that children in both the experimental and control group gained in knowledge over time. Specifically children who demonstrated high anxiety levels had greater knowledge of sexual abuse prevention; however, knowledge level was similar regardless of high or low level of fears. It is possible that experiencing greater anxiety heightens children's motivation to learn about dangers (Eysenck, 1976)--in this case sexual abuse prevention. The present results are not in accord with those of Kiemel and Bogat (1991) who found that preschoolers with greater fear of sexual abuse had greater knowledge. However, the discrepant findings may be due to the difference in the children ages who were assessed (preschoolers versus elementary school aged children).

The finding that younger children increased in knowledge over time may indicate that children gained knowledge as a result of pretesting. Specifically, the increase in knowledge is in enumerating the people that children should tell about the abuse. There

are several possible explanations for the increase. First, the experience of being asked questions about sexual abuse and its prevention may have incited children to learn more about sexual abuse through the program (for those who participated) and through other means, such as discussing sexual abuse prevention with parents or other children.

Second, children may have augmented their knowledge about sexual abuse prevention through the process of responding on the knowledge measure. Scoring is based on quality and quantity of responses; therefore, being prepared for the questions at posttest, children may have been better able to offer a greater number of responses and/or more effective responses. To date, only two studies have assessed for pretesting effects by using a Solomon four-group design. Gibson and Bogat (1993) found pretesting effects with preschoolers in the opposite direction of this on a subset of the knowledge measures. Tutty (1992), assessing elementary children, found no pretesting effects.

The fact that the experimental group did not increase in knowledge as a result of participating is not atypical (see Tutty, 1992). Moreover, when statistical differences are found showing that children learn from the program, the magnitude of change is usually small (Conte et al., 1985; Downer, 1984; Fryer, Kraizer, & Miyoshi, 1987; Saslawsky & Wurtele, 1986; Tutty, 1985; Wolfe et al., 1986)--although Nemerofsky, Carron, and Rosenberg (1994) found a larger increase in knowledge. Therefore, the increase in knowledge may not be meaningful in a practical sense. However, Tutty (1992) contends that, although children may not be "learning more," children may still be gaining in skills as a result of participating. Prevention programs may encourage children to change their

attitudes towards sexual abuse and its prevention; thereby augmenting children's abilities to prevent sexual abuse.

The results of this study also indicate that, on average, all participants displayed a decrease in anxiety over time. This may reflect a contextual event: At pretest, the Persian Gulf War was impending and beginning, whereas, by posttesting, the war had subsided. In addition, the results indicate that children who did not participate in the sexual abuse prevention program exhibited a greater decrease in anxiety than the children who did participate. This finding suggests that hearing about sexual abuse prevention may remind children about the danger of sexual abuse, thereby, augmenting their anxiety level in relation to the children who did not participate.

The common childhood fears that were reported on the CFS-R and the AS were typical for children that age (Ollendick, King, & Frary, 1989). Older children demonstrated more fear of benign touches. This may reflect a normal developmental change, where older children become less affectionate. Gender differences on the fear and anxiety scales also reflect typical differences between girls and boys (Dong et al., 1994; Gullone & King, 1994; King, Gullone, & Stafford, 1990; Spence & McCathie, 1993). Girls revealed higher levels of fear of individuals and situations relating to sexual abuse prevention and common childhood fears. In addition, girls revealed more anxiety on the RCMAS.

Because the results from this study are in accord with previous findings, there is building evidence that allowing children to participate in a sexual abuse prevention program is a safe practice and thus should be encouraged. However, there are limitations

in this study. (1) Effects from participating in a sexual abuse prevention program may have been revealed had a much larger sample size been used. Similarly, additional age and gender effects and interactions may have been found with a larger sample size. Yet, even if such differences were found, although significant, they may not reflect meaningful differences in the real world. (2) The participating children were not randomly selected--rather parental permission was needed. Therefore, there may have been differences between the children who were allowed to participate and those who were not. These differences may have influenced the effects of receiving the curriculum. For example, parents who have already discussed with their children the dangers of sexual abuse prevention may have been more likely to allow their children to participate than those who had not. (3) Furthermore, program effects were assessed with a homogenous sample of children in terms of age, the community in which they lived, and their ethnicity (which was primarily Caucasian). Consequently, the generalizability of these results to children of various socio-economic and ethnic groups is limited. (4) In addition, because the Childhood Fear Scale-Revised is newly developed, its reliability needs to be assessed with other population of children. Moreover, the CFS-R's validity needs to be substantiated through behavioral measures and other fear scales.

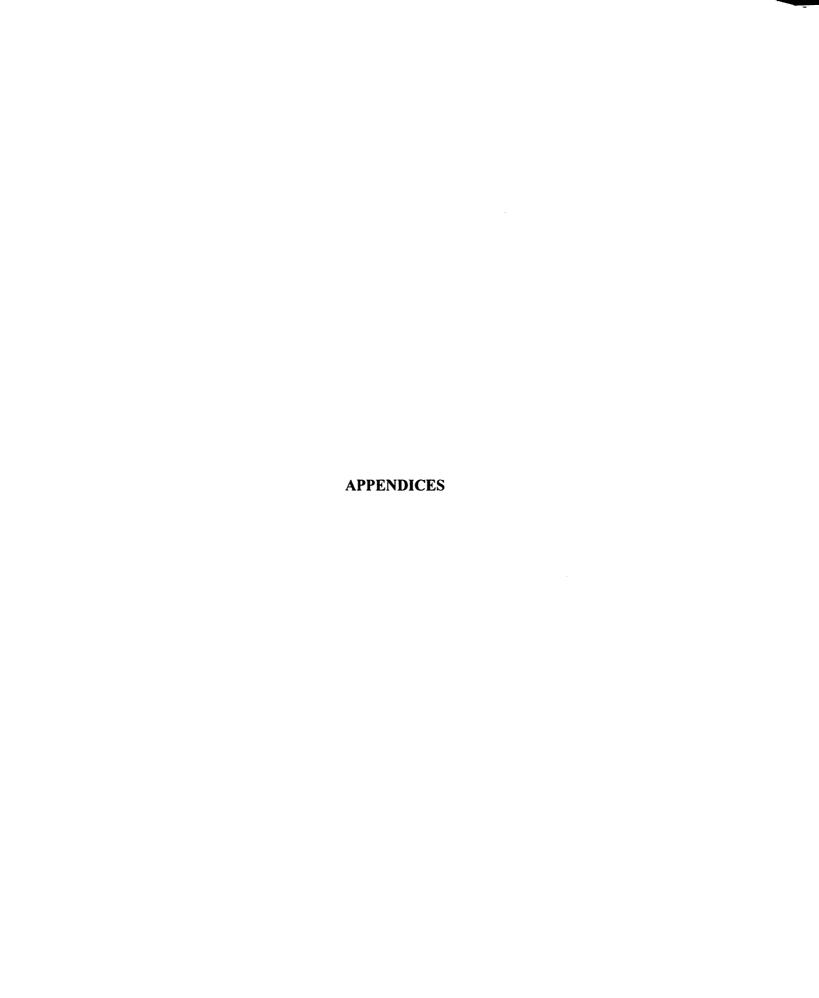
Consequently, future research is needed that assesses children of all age groups with various socioeconomic and cultural backgrounds employing random selection. In addition, future studies need to add to the reliability and validity of the Childhood Fear Scale and Apprehension Scale. Furthermore, the effects of participating should be

understood in terms of other variables, such as children's temperament, self-efficacy, and perceived threat of sexual abuse (Jacobs, Hashima, & Kenning, 1995).

Moreover, in addition to children's fears and anxieties, other possible negative effects of participating in a sexual abuse prevention program needs further exploration. For example, one effect is determining whether children who are exposed to a sexual abuse prevention feel guilty if they have been previously abused or become abused in the future because they were unable to successfully deter the abuser (Sang, 1994). Another possible effect is whether children's attitudes toward sex and/or sexual behavior is negatively impacted (Currier & Wurtele, 1996; Finkelhor, 1986; Tharinger et al., 1988; Trudell & Whatley, 1988; Wurtele et al., 1992).

Any negative effects must be considered in light of the following: Although there is evidence that children learn about sexual abuse prevention, "there is no evidence to support or refute the hypothesis that educating children, parents or teachers with regard to abduction and sexual victimization actually reduces the occurrence of such offenses" (MacMillian et al., 1994, p. 24). Moreover, some researchers believe that children should not be the focus of child sexual abuse prevention (Cohn, 1986; Repucci & Haugaard, 1989; Tutty, 1991). Instead, the focus of prevention should be directed to other areas. (1) Legislative action that inhibits a perpetrator's motivation to become abusive (McCann, 1995). (2) Intervening with families that have characteristics that are linked to having a sexually abused child, such as parental absence, family conflict (Benedict & Zautra, 1993; Shah, Dail, & Heinrichs, 1995), and substance abuse (Cavallin, 1966; Curtis, 1986; Famularb, 1992), as well as parents who have a childhood history of abuse (Faller,

1989). And (3) Implementing programs directed towards parents so that parents, themselves, can take actions to protect their children from sexual abuse (Tutty, 1993); for parents often understand little about the prevalence as well as the circumstances under which sexual abuse occurs (Elrod & Rubin, 1993).





APPENDIX A

REVISED CHILDREN'S MANIFEST ANXIETY SCALE

NAM	Œ		_
TEAG	CHER		-
	RUCTIONS: Circle Y to NO, if you think that s		Code # Interviewer he statement is TRUE about you. UE about you.
1. ^P	I have trouble making	g up my mind.	
	YES	NO	
2. ^w	I get nervous when the	nings do not go the rig	ght way for me.
	YES	NO	
3. ^S	Others seem to do thi	ngs easier than I can.	
	YES	NO	
4. ^L	I like everyone I kno	w.	
	YES	NO	
5. ^P	Often I have trouble	getting my breath.	
	YES	NO	
6. ^w	I worry a lot of the ti	me.	
	YES	NO	

7. ^w	I am afraid of a lot of the	nings.		
	YES	NO		
8. ^L	I am always kind.			
	YES	NO		
9. ^P	I get mad easily.			
	YES	NO		
10. ^w	I worry about what my	parents will say to me.		
	YES	NO		
11. ^s	I feel that others do not like the way I do things.			
	YES	NO		
12. ^L	I always have good ma	nners.		
	YES	NO		
13. ^P	It is hard for me to get	to sleep at night.		
	YES	NO		
14. ^w	I worry about what oth	er people think about me.		
	YES	NO		

I feel alone even when there are people with me.		
YES	NO	
I am always good.		
YES	NO	
Often I feel sick in my stoma	ach.	
YES	NO	
My feelings get hurt easily.		
YES	NO	
My hands feel sweaty.		
YES	NO	
I am always nice to everyone.		
YES	NO	
I am tired a lot.		
YES	NO	
I worry about what is going	to happen.	
YES	NO	
	YES I am always good. YES Often I feel sick in my stomaty YES My feelings get hurt easily. YES My hands feel sweaty. YES I am always nice to everyone YES I am tired a lot. YES I worry about what is going	

23. ^S	Other children are happier than I.		
	YES	NO	
24. ^L	I tell the truth every sin	ngle time.	
	YES	NO	
25. ^P	I have bad dreams.		
	YES	NO	
26. ^w	My feelings get hurt ea	sily when I am fussed at.	
	YES	NO	
27. ^S	I feel someone will tell me I do things the wrong way.		
	YES	NO	
28. ^L	I never get angry.		
	YES	NO	
29. ^P	I wake up scared some	of the time.	
	YES	NO	
30. ^w	I worry when I go to bed at night.		
	YES	NO	

31. ^s	It is hard for me to keep my mind on my schoolwork.		
	YES	NO	
32. ^L	I never say things I should	n't.	
	YES	NO	
33. ^P	I wiggle in my seat a lot.		
	YES	NO	
34. ^W	I am nervous.		
	YES	NO	
35. ^S	A lot of people are against me.		
	YES	NO	
36. ^L	I never lie.		
	YES	NO	
37. ^w	I often worry about something bad happening to me.		
	YES	NO	
P deno	otes items in the physiologica	l subscale.	

denotes items in the physiological subscale.

W denotes items in the worry/oversensitivity subscale.

S denotes items in the social concerns/concentration subscale.

L denotes items in the lie scale subscale.



APPENDIX B

CHILDHOOD FEAR SCALE-REVISED

Instructions: "Everybody is scared of some things. I'm going to be asking you some questions to find out what feels scary to you."

HOW SCARED DO YOU FEEL ABOUT:

С	A dog barking at you?				
	Very Scared 2	A Little Scared 1	Not Scared 0		
	Someone asking you if the	ey can touch your privat	e parts?		
	Very Scared 2	A Little Scared 1	Not Scared 0		
	Getting into a fight when you are playing with friends?				
	Very Scared 2	A Little Scared 1	Not Scared 0		
	Being left at home with a	babysitter?			
	Very Scared 2	A Little Scared	Not Scared 0		
;	Getting a shot?				
	Very Scared 2	A Little Scared 1	Not Scared		

6. ^B	Someone you know giving you a hug?					
	Very Scared 2	A Little Scared 1	Not Scared			
7. ^C	Falling off your bike?					
	Very Scared 2	A Little Scared 1	Not Scared 0			
8. ^B	Holding hands with some	one you know?				
	Very Scared 2	A Little Scared 1	Not Scared 0			
9.s	Someone asking if they could take pictures of you with no clothes on?					
	Very Scared 2	A Little Scared 1	Not Scared 0			
10.	Someone helping you to get dressed?					
	Very Scared 2	A Little Scared 1	Not Scared 0			
11.	Letting a doctor look at your private parts if you were hurt?					
	Very Scared 2	A Little Scared	Not Scared 0			
12. ^C	The dark at night?					
	Very Scared 2	A Little Scared	Not Scared 0			

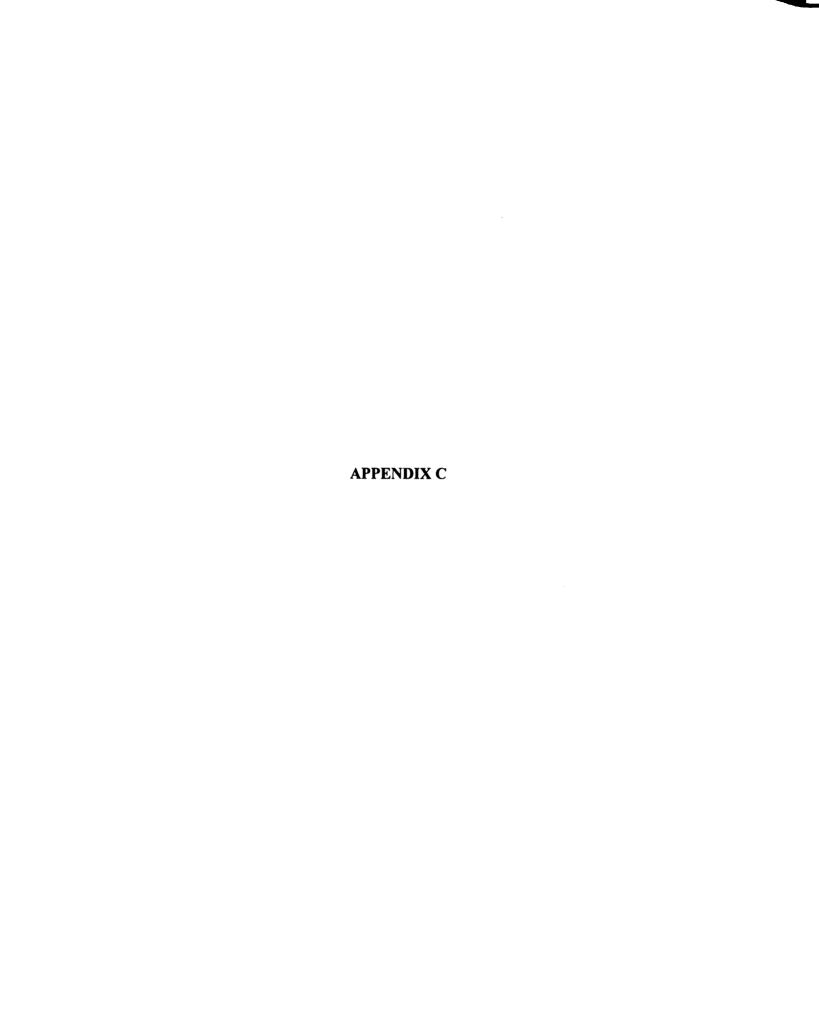
	Very Scared 2	A Little Scared 1	Not Scared 0			
l. ^S	Someone asking you to tou	ch their private parts?				
	Very Scared 2	A Little Scared	Not Scared 0			
	One of you parents helping	you take a bath?				
	Very Scared 2	A Little Scared 1	Not Scared 0			
6. ^S	Someone showing you their private parts?					
	Very Scared 2	A Little Scared 1	Not Scared 0			
·.	Someone you don't know talking to you?					
	Very Scared 2	A Little Scared 1	Not Scared 0			
8. ^B	Someone helping you get u	p if you fall down?				
	Very Scared 2	A Little Scared 1	Not Scared 0			
9.	Going on an airplane ride?					
	Very Scared 2	A Little Scared	Not Scared			

20. ^C	Getting lost in a store?				
	Very Scared 2	A Little Scared 1	Not Scared		
21. ^B	Sitting on the lap of some	one you know?	·		
	Very Scared 2	A Little Scared 1	Not Scared		
22. ^s	Someone showing you pic	tures of people with no	clothes on?		
	Very Scared 2	A Little Scared 1	Not Scared 0		
3.	Someone you know giving you a kiss?				
	Very Scared 2	A Little Scared 1	Not Scared 0		
I. ^C	Thunderstorms?				
	Very Scared 2	A Little Scared 1	Not Scared 0		
5. ^B	Someone you know rubbin	ng your back?			

denotes items in the sexual abuse factor.

denotes items in the benign situations.

denotes items in the common fear factor.



APPENDIX C

WHAT IF SITUATION TEST (WIST) MSU VERSION

	Code #	
	Interviewer Initials	_
Interv	iewer:	
	child's name), I am going to show you some pictures and read you some stories about ople in the pictures.	
STOR	Y ONE	
	Let's pretend you were riding your bike and fell off and hurt your private parts. you went home, you told your parents what happened and they wanted to look at rivate parts.	
1.	Would it be O.K. for your parents to look at your private parts?	
	(Please CIRCLE one response)	
	YESgo to question 2a.	
	NOgo to question 2b.	
	DKgo to next vignette.	
2a.	Why would that be O.K.?	
2b.	Why wouldn't that be O.K.?	

PRAISE CHILD FOR HIS/HER EFFORT AND/OR COOPERATION, <u>NOT FOR HIS/HER RESPONSES</u>. For example, "You're thinking so hard, (child's name); that's great!" Or "It's really great the way you're listening so carefully to my questions, (child's name)!

STORY TWO

Let's pretend a neighbor who is a big person, said to you, "Hey (child's name), let's play a real fun game! You take off all your clothes and I'll take pictures of your private parts with my camera!"

1. Would it be O.K. for your neighbor to take pictures of your private parts?

(Please CIRCLE one response)

YES..go to question 2a.

NO...go to question 2b.

DK...go to question 3.

- 2a. Why would that be O.K.?
- 2b. Why wouldn't that be O.K.?
- 3. If your neighbor asked you to do that, what would you <u>say</u> to them or what would you <u>do</u>?
- [NOTE #1: After every solution encourage the child to generate more solutions by saying, "O.K. That's something you could try. Anything else?" NOTE BENE: Take care to respond with the same enthusiasm and the same words to every solution the child offers.]
- [NOTE #2: If a child begins to perseverate, after three enumerations, stop child and say, "O.K. (name of child), that's kind of like what you thought of doing before. (Explain how three previous responses are alike). The idea here is to think of all the <u>different</u> things you could say or do. What's something different you would say or do?"]

[NOTE # neighbor,			asking, "How would you talk to your to take pictures of your private parts?"]
[NOTE #	4: Number every	response.]	
	SAY Response	S	DO Responses
_			
4a. If	child has <u>ANY SAY</u>	RESPONSES:	
			ghbor (repeat all SAY responses). What else d you talk to your neighbor?"
If	child has <u>NO SAY R</u>	RESPONSES:	
			say to your neighbor?" OR "What would alk to your neighbor?"
	Prompt	ed SAY Respons	es
	1.		
	2.		
	3.		
	4.		

4b. If child has ANY DO RESPONSES:

"Now before you told me that if your neighbor tried to take pictures of your private parts, you would (repeat all DO responses). What else would you do?" OR "You know, how would you act if your neighbor asked to take pictures of your private parts?"

If child has **NO DO RESPONSES**:

"Try to think really hard. What would you do if your neighbor tried to take pictures of your private parts?" OR "You know, how would you act if your neighbor asked to take pictures of of

•	re parts?" OR "You know, now would you act it your neighbor asked to take pictures our private parts?"
	Prompted DO Responses
	1.
	2.
	3.
	4.
	RET. Some kids would keep that a secret, but other kids would tell somebody. Which more like you? (Please CIRCLE one response)
	TELL SOMEBODYgo to question 5b, then to question 6. KEEP IT A SECRETgo to question 5c, then to next story. DKgo to next story.
5b.	Why would you tell somebody?
5c.	Why would you keep it a secret?

IF CHILD WOULD TELL SOMEBODY, ASK QUESTIONS 6 AND 7.

6. Who would you tell?

[NOTE #1: Prompt each time child stops answering by asking "Anybody else?]

[NOTE #2: Number responses.]

7. What would you say to (name of first person listed above)?

[NOTE: If child does not respond, rephrase the question by asking, "How would you let (person(s) name above) know what happened to you?" If child still does not respond and/or seems uncomfortable, offer to let child whisper what he/she would say in your ear.]

PRAISE CHILD FOR HIS/HER EFFORT AND/OR COOPERATION, <u>NOT FOR HIS/HER RESPONSES</u>. For example, "You're thinking so hard, (child's name); that's great!" Or "It's really great the way you're listening so carefully to my questions, (child's name)!

STORY THREE

Let's pretend you had a babysitter and they said to you, "(name of child), I'll let you stay up late to watch your favorite TV show if <u>YOU</u> touch <u>MY</u> private parts for a little while."

1. Would it be O.K. for your babysitter to ask you to touch her private parts?

(Please CIRCLE one response)

YES..go to question 2a.

NO...go to question 2b.

DK...go to question 3.

- 2a. Why would that be O.K.?
- 2b. Why wouldn't that be O.K.?

3.	If your babysitter	asked you to do that	, what would you	u say to her or	what would
you do	?				

[NOTE #1: After every solution encourage the child to generate more solutions by saying, "O.K. That's something you could try. Anything else?" NOTE BENE: Take care to respond with the same enthusiasm and the same words to every solution the child offers.]

[NOTE #2: If a child begins to perseverate, after three enumerations, stop child and say, "O.K. (name of child), that's kind of like what you thought of doing before. (Explain how three previous responses are alike). The idea here is to think of all the <u>different</u> things you could say or do. What's something different you would say or do?"]

[NOTE #3: If a child says "IDK," prompt by asking, "How would you talk to your babysitter, or how would you act if she wanted you to touch her private parts?"]

Number every response.

SAY Responses	DO Responses		

4a. If child has <u>ANY SAY RESPONSES</u>:

"So far you said that you would say to your babysitter (repeat all SAY responses). What else would you tell your babysitter?" OR "How would you talk to your babysitter?"

If child has NO SAY RESPONSES:

"Try to think really hard now. What would you say to your babysitter?" OR "What would you tell your babysitter?" OR "How would you talk to your babysitter?"

Promp	oted SAY Responses
1.	· .
2.	
3.	
4.	
4b. If child has ANY DO	RESPONSES:
<u> </u>	t if your babysitter asked <u>you</u> to touch <u>her</u> private parts, you ses). What else would you do?" OR "You know, how would nted to touch private parts?"
If child has NO DO F	RESPONSES:
•	nat would you do if your babysitter asked you to touch her w, how would you act if your babysitter asked to touch private
Prompted DC	Responses
1.	
2.	
3.	
4.	
5a Now I'm going to ask	you a different kind of question. Let's pretend your habysitter

5a. Now I'm going to ask you a different kind of question. Let's pretend your babysitter asked you to touch her private parts, AND THEY ASKED YOU TO KEEP IT A SECRET. Some kids would keep that a secret, but other kids would tell somebody. Which kid is more like you?

(Please CIRCLE one response)

TELL SOMEBODY......go to question 5b, then to question 6. KEEP IT A SECRET....go to question 5c, then to next story. DK......go to next story.

- 5b. Why would you tell somebody?
- 5c. Why would you keep it a secret?

IF CHILD WOULD TELL SOMEBODY, ASK QUESTIONS 6 AND 7.

6. Who would you tell?

[NOTE #1: Prompt each time child stops answering by asking "Anybody else?]

NOTE #2: Number responses.

7. What would you say to (name of first person listed above)?

[NOTE: If child does not respond, rephrase the question by asking, "How would you let (person(s) name above) know what happened to you?" If child still does not respond and/or seems uncomfortable, offer to let child whisper what he/she would say in your ear.]

PRAISE CHILD FOR HIS/HER EFFORT AND/OR COOPERATION, <u>NOT FOR HIS/HER RESPONSES</u>. For example, "You're thinking so hard, (child's name); that's great!" Or "It's really great the way you're listening so carefully to my questions, (child's name)!

STORY FOUR

Let's pretend you were playing at the park and a man you like said to you, "Hey, (name of child), I'll buy you an ice cream cone if you take off your pants and let me touch your private parts."

1. Would it be O.K. for that man to ask you to take off your pants so he could touch your private parts?

(Please CIRCLE one response) YES..go to question 2a.

NO...go to question 2b.

DK...go to question 3.

- 2a. Why would that be O.K.?
- 2b. Why wouldn't that be O.K.?
- 3. If the man in the park asked you to do that, what would you <u>say</u> to him or what would you <u>do</u>?

[NOTE #1: After every solution encourage the child to generate more solutions by saying, "O.K. That's something you could try. Anything else?" NOTE BENE: Take care to respond with the same enthusiasm and the same words to every solution the child offers.]

[NOTE #2: If a child begins to perseverate, after three enumerations, stop child and say, "O.K. (name of child), that's kind of like what you thought of doing before. (Explain how three previous responses are alike). The idea here is to think of all the <u>different</u> things you could say or do. What's something different you would say or do?"]

[NOTE #3: If a child says "IDK," prompt by asking, "How would you talk to the man, or how would you act if he wanted to touch your private parts?"]

[NOTE #4:	Number every response.]				
	SAY Responses	DO Responses			
		——————————————————————————————————————			

4a. If child has ANY SAY RESPONSES:

"So far you said that you would say to the man in the park (repeat all SAY responses). What else would you tell him?" OR "How would you talk to the man in the park?"

If child has **NO SAY RESPONSES**:

"Try to think really hard now. What would you say to that man in the park?" OR "What would you tell him?" OR "How would you talk to the man in the park?"

Prompted SAY Responses

•	•
1.	
2.	· · · · · · · · · · · · · · · · · · ·
3.	
4.	
4b. If child has ANY DO I	
would (repeat all DO response	if that man in the park asked to touch your private parts, you s). What else would you do?" OR "You know, how would asked to touch your private parts?"
If child has NO DO RI	ESPONSES:
•	at would you do if that man in the park asked to touch your y, how would you act if that man in the park asked to touch
Prompt	ed DO Responses
1.	
2.	
3.	
4.	

5a. Now I'm going to ask you a different kind of question. Let's pretend that man in the park wanted to touch your private parts, AND THEY ASKED YOU TO KEEP IT A SECRET. Some kids would keep that a secret, but other kids would tell somebody. Which kid is more like you?

(Please CIRCLE one response)

TELL SOMEBODY......go to question 5b, then to question 6. KEEP IT A SECRET....go to question 5c, then to next story. DK.....go to next story.

- 5b. Why would you tell somebody?
- 5c. Why would you keep it a secret?

IF CHILD WOULD TELL SOMEBODY, ASK QUESTIONS 6 AND 7.

6. Who would you tell?

[NOTE #1: Prompt each time child stops answering by asking "Anybody else?]

Number responses.

7. What would you say to (name of first person listed above)?

[NOTE: If child does not respond, rephrase the question by asking, "How would you let (person(s) name above) know what happened to you?" If child still does not respond and/or seems uncomfortable, offer to let child whisper what he/she would say in your ear.]

PRAISE CHILD FOR HIS/HER EFFORT AND/OR COOPERATION, <u>NOT FOR HIS/HER RESPONSES</u>. For example, "You're thinking so hard, (child's name); that's great!" Or "It's really great the way you're listening so carefully to my questions, (child's name)!



APPENDIX D

WHAT IF SITUATION TEST (WIST) SCORING GUIDELINES

<u>Story 1</u>: For the positive touch story the following scoring system will be used:

Question 1: WOULD IT BE O.K. FOR YOUR PARENTS TO LOOK AT YOUR PP? (1 Column)

2 = YES 1 = NO 3 = I Don't Know

- 1 = BC child is hurt
 - so they can help you
 - so they can put medicine on
 - they need to if you are hurt
 - it would hurt more it you didn't let them
- 2 = BC they are your parents
 - she is my mom
 - BC you have to let parents do that
 - BC they are nice
 - BC I love them
 - I know them
- 3 = Nonsense answers
- 4 = I don't know
- 9 = This question not asked

***NOTE: IF THE CHILD GIVES A RESPONSE WHERE ASPECTS OF BOTH CATEGORIES 1 AND 2 CAN BE APPLIED RECORD ONLY THE FIRST PART OF THE MULTIPLE RESPONSE ANSWER. FOR EXAMPLE, IF THE CHILD SAYS "BECAUSE THEY NEED TO HELP ME AND BESIDES IT IS O.K. BECAUSE THEY ARE MY PARENTS," THIS ANSWER WOULD BE CODES AS A 1. TAKE THE FIRST ANSWER THE CHILD GIVES.

Question 2b: WHY WOULDN'T THAT BE O.K.

- 1 = Child gives refusal to be touched
 - I don't like them to touch
 - I hate that
 - I said no
 - they can't touch my pp
 - nobody but me can touch my pp
 - only doctors can
- 2 = Parents touching would cause problems
 - it will hurt more if they look at them
 - they don't know which way to touch it
 - BC they might get more interested in my pp and start touching them
- 3 = Nonsense answers
- 4 = I don't know
- 9 = Question not asked

***NOTE: IF THE CHILD GIVES A RESPONSE WHERE ASPECTS OF BOTH CATEGORIES 1 AND 2 CAN BE APPLIED, CODE ONLY THE FIRST PART OF THE RESPONSE. FOR EXAMPLE, IF THE CHILD SAYS "I SAID NO AND BESIDES THEY DON'T KNOW WHAT THEY ARE DOING," THIS ANSWER WOULD BE CODED AS A 1. CODE ONLY THE FIRST ANSWER GIVEN.

STORIES 2, 3, AND 4 OF THE WIST ARE SCORED THE SAME. THE SCORING PROCEDURES FOR THESE STORES ARE AS FOLLOWS:

Question 1: WOULD IT BE O.K. FOR

1 = YES 2 = NO 3 = I DON'T KNOW

Question 2a: WHY WOULD THAT BE O.K.?

- 1 = Child feels they should listen to the authority figure.
 - BC she wants me to do that
 - BC she is the babysitter

- 2 = Child focuses on the social position, the familiarity of the authority
 - BC he is a friend
 - BC I love my babysitter/neighbor
 - BC if it is someone you know it is OK
- 3 = Child feels the necessity of being obedient
 - BC she wants me to do that
 - She said only for a little while
 - She asked me to
- 4 = Child perceives positive by giving into the bribe
 - I like ice cream/I like to have my picture taken
 - BC I like to watch TV/stay up late
- 5 = Child wants to participate
 - It will be fun
 - I want to touch pp
 - BC I like doing that, touching pp
- 6 = Nonsense answers/unclear answers/needs further prompting, clarification
 - They want to take a bath
- 7 = "I don't know"
- 9 = If question not asked

Question 2b: WHY WOULDN'T THAT BE O.K.

- 1 = The child's response relates the action of the story with some rule (e.g., the rule that a particular behavior is bad)
 - It is bad to touch pp
 - Those are bad kinds of pictures
 - Not supposed to do that (take pictures)
 - That is not good to do/Nobody has to touch anybody's pp
 - BC I'm the boss of my pp

- 2 = The child responds by saying the consequences of particular behaviors would be bad
 - It's not fun/It's gross
 - I don't like when that happens
 - That would hurt
 - I don't know what would happen
- 3 = Child's answer reflects a trait of the abuser
 - He is mean/tricky/stupid/bad
- 4 = Responses relates to child's concept of authority
 - Only parents can do that
 - You should ask your parents
 - BC my mom said so
 - My parents would not let me
 - He is a stranger
 - I'm the boss of my pp and my neighbor isn't allowed to do that
- 5 = Child refuses to participate verbally or behaviorally
 - I would hit him/slap him
 - I'd run away
 - I'd just go to bed
 - I'd say no
- 6 = Child is embarrassed
 - They would see my body
 - Cuz people would laugh
 - Cuz others would see the pp
- 7 = Nonsense answers/unclear answers/vague
 - I would spread magic
 - I don't want to, Don't want her to do that
- 8 = I don't know
- 9 = If child not asked this question

QUESTION 3a and 4a: WHAT WOULD YOU SAY? ANYMORE SAY RESPONSES? (9 Columns)

Prior to coding the content of the SAY response, the coder should first go through all of the SAY and DO responses for questions 3a, 3b, 4a, and 4b to make sure the responses recorded under the SAY and DO columns are actual SAY and DO responses. If you find a DO response recorded as a SAY in question, simply cross out the DO response and write the response in the DO columns. Make sure you have completed this procedure for all of questions 3 and 4 before you proceed to code the content categories for each response. For example, if under the SAY column in question 3a the child responds "I would tell," you would cross this out and rewrite it under the DO column. When you write the response under the new column make sure you notice the number next to it. That is, in the example above if this was the child's third response overall, but the first SAY response, you would now code this as the third DO response.

For each of the SAY response given for questions 3a and 4a the following categories will be used to score the solution content. Code each of the SAY responses in the order given, starting with question 3a and then followed by the SAY responses given in question 4a. If the child gives more than 9 total SAY responses, code only the first nine. If the child gives only three responses code the three responses accordingly and then code the remaining six columns as 99.

*** NOTE: If the child gives 2 or more SAY responses in one sentence, code the response as 2 separate statements. For example, if the child says "I would say that is bad to do, but then I would say lets go ask my parents if I can do that" this would be coded as a 6.3 (bribe/give a reason) and a 3.3 (help seeking).

*** NOTE: IF the child gives a multiple answer response and part of the answer is a SAY response and part of it is a DO response, DO NOT break this apart. Code this type of response under whether the first part of the answer is a SAY or a DO and code the rest of the response under the same column.

A DEFINITION OF EACH OF THE CONTENT CODES ALONG WITH PROTOTYPICAL EXAMPLES FOLLOWS:

IRRELEVANT RESPONSES (1)

Responses which do not in any perceivable way relate to the situation at hand. Unrealistic solutions which could not be enacted. Nonsensical answers, "I don't know" responses, or responses in which the interviewer did not obtain sufficient detail to accurately classify the responses elsewhere are coded under this category.

- 1.1) Nonsense solutions, irrelevant comment, "I don't know" responses
 - Get cold
 - Leave for Africa
 - I don't know
 - I'm not sure
 - Beats me
 - Maybe
 - I would sting him with a bee
 - Lock the door
- 1.2) Vague solutions which were not clarified by the interviewer.
 - I would protect myself

ASSERTIVE

(2)

Assertive strategies are nonaggressive statements, acts, or questions used to assert or defend subjects rights: request cessation of the other party's behavior: express nonviolent threats or warning: or express disagreement with the other party's perceptions or motives.

- 2.1) Assertion of subjects rights
 - Tell her I don't have to touch pp
 - Say "My parent told me I don't have to do that"
 - Say you can't make me
- 2.2) Assertion of subject's intentions not to comply
 - I would say no
 - No way Jose
 - I don't want to touch your pp/stay up late/take off my clothes
 - I wouldn't do it
- 2.3) Other directed commands
 - Tell her to stop that
 - Tell her to quit bugging me
 - Tell her to leave me alone
 - Neighbor, you can't do that
 - I don't like that
 - That's wrong/gross

(***NOTE: If the child specifically indicates she would say "I wish you'd stop" this is coded as assertive (2.3) since the child is verbalizing her request for the behavior to stop; but if the child only silently wishes or hopes it will stop, this is simply an irrelevant feeling and coded as 1.1).

- 2.4) Stated nonviolent threats or gestures that do not escalate the situation i.e., threats or gestures that probably will not cause a verbal or physical fight.
 - "Sav I will tell"
 - "Say 'I won't like you anymore if you do that'"
 - "Say I'm going to tell my mom"
 - "Say 'If you do that I will tell"
 - "I'll tell"

*** NOTE: There are a number of responses which if the child threatens to take the described action are coded under this category. If the child actually takes the action, the response is coded elsewhere. For example, if the child says "I'm going to call the police" this is coded as an assertive nonviolent threat. However, if the child says "Call the police and the interviewer confirms that the child is proposing to take this action, then this response is categories as falling into another category (help-seeking).

HELP-SEEKING (3)

Solutions in which the subject involves someone else in solving the problem are coded as help-seeking. This can take the form of telling an adult or peer after the episode has ended, soliciting immediate aid from an adult or peer, or asking an adult for advice on how to cope with the problem when it arises.

- 3.1) Telling another person
 - "Tell"/"Go Tell"
 - "Tell my mom"
 - "Call the police"
 - "Go home and tell my mom"
 - "Run and tell"
- 3.2) Solicitation of aid
 - "Ask my brother to help me"
 - "Have my mom tell the man in the park he can't do that"
 - "I would get help"/"I would scream for help"
 - "Go to my sister"

3.3) Solicitation of third party advice

- "Ask my mom it I can"
- "I would ask my mom if I could touch pp and if she said yes then I would"

NONCONFRONTATIONAL (4)

Strategies are coded as nonconfrontational if the subject meets his or her own needs immediately and avoids confrontation, argument, or physical fight.

4.1) Subject leaves the scene

- "I would leave"
- "Go home"
- "Go to my room"
- "Run away"
- "Go to a different park"
- "Play on the swings" (story 4)

AGGRESSIVE (5)

Responses which express physical hostile infringements on another person or possession: verbal insults; threat to do physical harm: or the use of intimidation constitute aggressive solutions.

- 5.1) Direct physical harm to person or possessions
 - "Hit him"
 - "Smash his camera"
- 5.2) Third party physical assault
 - "Get my buddies to beat him up"
- 5.3) Verbal aggression which does escalate the situation, e.g., could cause a verbal or physical fight
 - "Call him names"
 - "You're mean"
 - "I'm going to hurt you if you try that"
 - "Your gross"
 - "Get my baseball bat"

BRIBE/FINAGLE/GIVE A REASON (6)

Strategies in which the subject resists participation by enticing or tricking the perpetrator into a different activity, or by providing a reason why she cannot engage in the suggested activity (i.e., the child makes excuse).

- 6.1) Bribe
- "I will give you \$5 not to do that"
- 6.2) Make a deal/give a reason/restructure
 - "Let's play instead"
 - "Let's watch TV instead"
 - "Let's do that later"
 - "You take off your clothes"
- 6.3) Invoke a rule or authorities command
 - "Say 'My parents said I don't have to touch pp"
 - "My parents said never ever touch pp"
 - "Say 'Ice cream is bad for you"
 - "Say 'I can't touch pp"

(*** NOTE: In the last couple of examples, the child implies the use of a rule, but does not explicitly say what the rule is. These responses should still be coded as 6.3 since the use of a rule is implied.)

- 6.4) Make excuses
 - "I can't have ice cream before dinner"
 - "I can't, I have to go home now"
 - "My mom doesn't allow me to watch TV"
- 6.5) Distraction
 - "They could must make paper instead, it is better than touching pp"

PASSIVE RESISTANCE (7)

Solutions in which the subject does not comply, or actively resists are coded as passive resistance.

7.1) Ignore

- "I would just keep watching TV"
- "I would just ignore the man"

7.2) Passivity

- "I wouldn't do anything"
- "Keep is a secret"

MANIPULATE AFFECT (8)

Strategies that center on the manipulation of affect are ones in which the subject states that she would either change her emotional state or attempt to change the emotional state of the perpetrator. In addition, solutions in which the subject attempts to deter the perpetrator by threatening to become emotionally upset fall under this category.

8.1) Manipulate own affect

- I would cry
- I would be real mad/I would be mad at him
- Act scared/mad
- Act sad
- Make a mad face at him
- Stomp my feet at him
- Talk sternly/Yell at him

8.2) Manipulate perpetrator's emotions

- "I would make him feel bad that he wanted to take pictures of my pp"

COMPLIANCE (9)

Solutions in this category are not resistance strategies. Instead they are behaviors or statements which indicate the child would give up the goal of resistance and comply with the perpetrators request.

9.1) Active compliance

- I would take off my clothes
- I would do it
- I would say OK/Just this once
- I would just touch pp for a little while

QUESTION 3b AND 4b: WHAT WOULD YOU DO? ANYMORE DO RESPONSES

For each of the DO responses given for questions 3b and 4b the previous 9 solution categories will be used again. code each of the DO responses in the order given, starting with question 3b and followed by the DO responses in question 4b. If the child gives more than 9 DO responses only code the first 9. If the child only gives 3 responses, code the remaining 6 columns as 9.9

If the child gives 2 or more DO responses in one statement code each of the DO responses separately. For example, if the child says "If I go ask my mom and she let me touch the pp I would do it, but I would walk away" would be coded as a 3.3 (help seeking) and 4.1 (nonconfrontational).

Question 5a: WOULD YOU TELL OR KEEP THIS A SECRET?

- 2 = Tell somebody
- 1 = Keep it a secret
- 0 = Don't know

Question 5b: WHY WOULD YOU TELL SOMEBODY?

- 1 = So someone can help/so behavior will cease
 - So she won't babysit again
 - BC they could help me
 - You don't want him to do that again
 - To get help
 - So my friend could beat him up
 - So I feel safe/BC I feel safe/It wouldn't be safe to keep secret
- 2 = BC the act was bad or the secret is bad
 - that is a bad secret
 - it is bad to touch pp/ to take pictures
 - that was mean what happened
 - I don't like taking off my clothes
 - BC she is bad
 - I don't want people to do that
 - BC that is wrong/shouldn't

- 3 = BC secrets are bad or I don't like secrets
- 4 = BC parents have stressed the need to tell BC it is right to tell
 - BC I want to
 - BC my parents want me to tell
 - BC Mom said you have to tell secrets
 - It is important to tell your mom
 - I like to tell
 - I always tell
 - BC I don't want to keep that a secret
 - You shouldn't keep that a secret
- 5 = Nonsense answers/ uncodeable answers/ vague
- 6 = I don't know
- 9 = If this question is not asked

Question 5c: WHY WOULD YOU KEEP IT A SECRET?

- 1 = Children have to listen to authority
 - she is the babysitter
 - BC the neighbor said to keep it a secret and you should listen to him
 - He is big and you have to listen to him
- 2 = Secrets are good Secrets should not be told
 - BC secrets mean not to tell anybody
 - You don't tell secrets
 - I love secrets
- 3 = Child doesn't want to tell for fear or concern of something
 - I don't want anyone to know because they would be angry
 - cuz my mom would spank me if she found out
- 4 = Nonsense answers/ uncodeable answers
- 5 = I don't know
- 9 = If this question not asked

CODE QUESTIONS 6 AND 7 ONLY IF THE CHILD SAID THEY WOULD TELL SOMEBODY FOR QUESTION 5a. IF THE CHILD SAID THEY WOULD KEEP IT A SECRET FOR QUESTION 5a THE REMAINING COLUMNS SHOULD BE CODED AS 9's.

Question 6a: WHO WOULD YOU TELL?

- 0 = nonsense/uncodeable/I don't know
- 1 = parent(s) (including mom or dad)
- 2 = relative (cousin, aunt, grandma)
- 3 = friend
- 4 = teacher
- 5 = police
- 6 = other (friend's parents, minister, unspecified other)
- *** NOTE: Code the first five people the child says. If the child only says "dad," for example, code it as a 1 and code the remaining four columns as 9's. If the child says "parents" code this twice as a 1 and 1. Grandparents would also be coded twice, 2 and 2.
- ** FOR THIS COUNT HOW MANY SEPARATE PEOPLE THE CHILD GIVES. IF THE CHILD SAYS PARENTS THIS WOULD COUNT AS TWO DIFFERENT PEOPLE S/HE WOULD TELL. POLICE COUNTS AS ONE. THE CODER WOULD SIMPLY FILL IN A FIGURE FROM 0 TO 9 DEPENDING ON THE NUMBER OF PEOPLE THE CHILD WOULD TELL IF THIS HAPPENED TO THEM.

Question 7: WHAT WOULD YOU SAY TO ...?

- 2 = Informative disclosure that describes: a) who the abuser was, AND b) what occurred. (On the last story the abuser is described as "a man you like," so responses that are vague in describing the identity of the abuser are acceptable, as long as s/he did not misidentify the abuser as a woman.)
 - My uncle asked me to take off my clothes so he could take pictures of my pp.
 - The babysitter wanted me to touch her pp.
- 1 = A partial informative disclosure that includes either the abuser or the situation, BUT NOT BOTH. Only one aspect of the situation is described accurately.
 - A man wanted to touch my pp.
 - Someone wanted to take pictures of my pp.
 - The babysitter did something bad

- 0 = Uninformative disclosure. The child does not identify the abuser or describe the situation or the child misidentifies the abuser and describes the situation inaccurately. None of the situation is relayed accurately.
 - Let's get a new babysitter.
 - I don't want to go to the park.



APPENDIX E

APPREHENSION SCALE

Interviewer begins: I'm going to be asking you some questions are writing down what you tell me. This isn't a test at all. There are no right or wrong answers. I just want to know what you think. Any questions that you don't want to answer you don't have to. Okay?

First: Review definition of private parts and secrets.

<u>Second</u>: Everybody feels scared or worried sometimes. We are going to talk about some things that might worry or scare you, but first I'm going to tell you about something that scares me, and when I'm finished you can tell me about yourself. One thing that I'm scared of is bees. I worry that a bee will sting me and that it will hurt, and I don't like to be hurt. So when I'm on a picnic with my friends or family, I stay away from bees. And if a bee is at the picnic table, even if I'm hungry, I'll wait for the bee to fly away before I sit down to eat my lunch.

(If child doesn't spontaneously talk about their fears concerning bees then ask 1a., otherwise just ask the questions that the child doesn't spontaneously answer. Because this question is only for practice, don't worry about writing down every detail concerning the child's answers).

1. Do you ever feel scared or worried about bees? (If child says "no," then ask: Do you ever feel scared or worried about another kind of bug or even an animal?)

Never Sometimes A lot of the time All of the time

- a. When do you feel scared or worried about bees?
- b. What is it about bees that makes you scared?(What are you worried about happening with a bee?)
- c. Does feeling scared or worried ever stop you from doing something that you want to do, the way that I wouldn't eat my lunch until the bee was gone.

 How often?

Once in a While Sometimes A lot of the time All of the time

	d.	Do you ever	Do you ever worry about bees, even when they are not around?				
	Once	in a While	Sometimes	A lot of the time	All of the time		
	ollow. I			they feel scared or worry a d, then they will be asked			
1.	Do yo	u ever feel sc	ared or worry about	neighbors?			
	(If chi	YES ld doesn't offe	S er a. and/or b., then a	NO ask a. and/or b.)			
	A.	When do yo	ou feel scared or wor	ried about neighbors ?			
	В.		bout neighbors that ou worried about ha	makes you scared? ppening with a	_?)		
expre	ssed hin	or herself co	•	understood child's fears a e any changes or addition			
	C.		g scared or worried a hat you want to do.	bout that every stop you f	rom doing		
			YES	NO			
	1)						
		Anything el	se? (only list two mo	ore activities)			
	2)						
	3)		·				
			cates that their fear s	tops them from doing son	nething(s) then ask		

Activity 1.					
Once in a Wh	sometimes (2)	A lot of the		of the time (4)	
Activity 2.					
Once in a Wh	sometimes (2)	A lot of the (3)		of the time (4)	
Do you every worry or feel scared about that (i.e., focus of fear) when you are not around (the child's expression of the fear or worry), like (give an example, e.g., when you are at home with your parents).					
		YES	NO		
If child respon	nds "yes" then ask "l	now often?"			
Once in a Wh	Sometimes (2)	A lot of the (3)		of the time (4)	
When do you	worry or feel scared	?			
1)					
Any o	other time?			·····	
2)	·				
3)					
1. Do yo	ou ever feel scared or	worry about babysitte	e <u>rs</u> ?		
(If chi	YES ild doesn't offer a. an	NO ad/or b., then ask a. and			
A.	A. When do you feel scared or worried about <u>babysitters</u> ?				

	B. What is it about <u>babysitters</u> that makes you scared							
	(What	(What are you worried about happening with a?)						
SUMMARIZE a and b to ensure that you have understood child's fears and child has expressed him or herself completely. If there are any changes or additions to child's fear then note them here and then resummarize.								
C.		Does feeling scared or worried about that every stop you from doing something that you want to do.						
			YES		NO			
	1) Anythi	ng else? (only	list two n	nore activities)				
	2)	2)						
	3)					· · · · · · · · · · · · · · · · · · ·		
If child indica for the first tw		_	them from	m doing somethir	ng(s) then ask	'how often?"		
Activity 1.								
Once in a Wh	ile	Sometimes (2)		A lot of the time (3)		te time (4)		
Activity 2.								
Once in a Wh	ile	Sometimes (2)		A lot of the time (3)		ne time (4)		
D.	Do you every worry or feel scared about that (i.e., focus of fear) when you are not around (the child's expression of the fear or worry), like (give an example, e.g., when you are at home with your parents).							
			YES	N	Ο			

If child r	esponds "y	es" then ask "how o	ften?"	
	a While 1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
1 7 2	Any other to	ime?		
3. I	Oo you eve		y about relatives (e.g. aun NO	
(If child doe		o., then ask a. and/or b.)	
A	A. Who	en do you feel scared	l or worried about relative	<u>s</u> ?
I			s that makes you scared? bout happening with a	?)
expresse	d him or he		ou have understood child's there are any changes or a ize.	
(som	ething that you want	vorried about that every sto t to do. YES	op you from doing
	•	` ` '	t two more activities)	

		82	
If child indicates that	at their fear stops th	em from doing something(s) then ask "how often?
Activity 1.			
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
Activity 2.		,	
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
are r	not around (the child nple, e.g., when you	feel scared about that (i.e., d's expression of the fear or a are at home with your par	worry), like (give an
If child responds "y			
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
When do you worry	or feel scared?		
1)			
Any other ti	me?		
2)			
3)			

4.	Do you ever feel scared or worry about strangers?							
YES NO (If child doesn't offer a. and/or b., then ask a. and								
	A.	When do you feel se	cared or worried	about <u>stranger</u>	<u>s</u> ?			
	В.	What is it about <u>strangers</u> that makes you scared? (What are you worried about happening with a?)						
express	sed him	E a and b to ensure the completed here and then resum	y. If there are any		fears and child has Iditions to child's fear			
	C. Does feeling scared or worried about that every stop you from doing something that you want to do.							
YES NO								
	Anything else? (only list two more activities) 2)							
		3)						
		es that their fear stop activities.	s them from doir	ng something(s) then ask "how often?"			
Activit Once in	y 1. n a Whil (1)	e Sometimes (2)	A lot o	of the time (3)	All of the time (4)			
Activit Once in	y 2. n a Whil (1)	e Sometimes (2)	A lot o	of the time (3)	All of the time (4)			
		Do you ever worry not around (the child		•	cus of fear) when you are			

example, e.g., when you are at home with your parents).

	YES	NO	
If child responds	"yes" then ask "how or	ften?"	
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
When do you wo	rry or feel scared?		
1)			
Any other	r time?		
2)			
3)			
5. Do you e	ver feel scared or worr	y about hugs or kisses ?	
(If child o	YES loesn't offer a. and/or b	NO ., then ask a. and/or b.)	
A. W	hen do you feel scared	or worried about hugs o	r kisses?
	_	kisses that makes you so bout happening with a	
expressed him or	•	ou have understood child' there are any changes or size.	
	oes feeling scared or womething that you want	vorried about that every state to do.	op you from doing
	Y	ES	NO

l)		
Ā	Anything else? (only list	two more activities)	
2			
3)		
If child indicates for the first two		n from doing something(s) then ask "how often?"
Activity 1.			
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
Activity 2.			
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
а	re not around (the child's	el scared about that (i.e., sexpression of the fear or are at home with your pare	worry), like (give an
	YES	NO	
If child responds	s "yes" then ask "how oft	en?"	
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
When do you we	orry or feel scared?		
1)			
Any other	er time?		

	2)				
	3)				
6.	Do you	ever feel scared or w	orry about <u>leavin</u>	g your hous	<u>e</u> ?
	(If chile	YES d doesn't offer a. and/		NO and/or b.)	
	A.	When do you feel sc	ared or worried at	out <u>leaving</u>	your house?
	В.	What is it about <u>leav</u> (What are you worrie		-	
express	sed him	E a and b to ensure th or herself completely here and then resum	. If there are any		fears and child has dditions to child's fear
	C.	Does feeling scared of something that you v		hat every sto	p you from doing
			YES		NO
		1)			
		Anything else? (only	list two more act	ivities)	
		2)			
		3)			
		es that their fear stops activities.	them from doing	something(s	s) then ask "how often?"
Activit	y 1.				
Once in	n a Whii (1)	e Sometimes (2)		the time (3)	All of the time (4)

Activi	ty 2.					
Once i	n a Whil	e Sometimes (2)	A lot	of the time (3)	All of the time (4)	
D. Do you every worry or feel scared about that (i.e., focus of fe are not around (the child's expression of the fear or worry), li example, e.g., when you are at home with your parents).				worry), like (give an		
			YES	NO		
If child	d respond	ds "yes" then ask "how	often?"			
Once i	n a Whil (1)	e Sometimes (2)	A lot	of the time (3)	All of the time (4)	
When	do you v	vorry or feel scared?				
	1)					
	Any otl	ner time?				
	2)					
	3)					
7.	Do you ever feel scared or worry about going to school?					
	(If child	YES I doesn't offer a. and/or	b., then ask	NO a. and/or b.)		
	A. When do you feel scared or worried about going to school?					
	B. What is it about going to school that makes you scared? (What are you worried about happening with a?)					

SUMMARIZE a and b to ensure that you have understood child's fears and child has expressed him or herself completely. If there are any changes or additions to child's fear then note them here and then resummarize.

C.	Does feeling scared or worried about that every stop you from doing				
	something that you want to do?				
		YES	NO		
	1)		<u></u>	_	
	Anything else? (only list two more activities)				
	2)				
	3)				
	If child indicates that their fear stops them from doing something(s) then ask "how often?" for the first two activities.				
Activity 1.					
Once in a Whi	le Sometimes (2)	A lot of the tin (3)	me All of the time (4)		
Activity 2.					
Once in a Whi	le Sometimes (2)	A lot of the tin (3)	me All of the time (4)		
D. Do you every worry or feel scared about that (i.e., focus of fear) when you are not around (the child's expression of the fear or worry), like (give an example, e.g., when you are at home with your parents).					
		YES	NO		
If child responds "yes" then ask "how often?"					
Once in a Whi (1)	le Sometimes (2)	A lot of the tin (3)	me All of the time (4)		

	When	When do you worry or feel scared?					
	1)						
	Any or	Any other time?					
	2)						
	3)						
8.	_	Do you ever feel scared or worry about letting a doctor look at your private parts if you were hurt?					
	(If chil	YES NO ild doesn't offer a. and/or b., then ask a. and/or b.)					
	A.	When do you feel scared or worried about letting a doctor look at your private parts if you were hurt?					
	В.	What is it about letting a doctor look at your private parts if you were hurt that makes you scared? (What are you worried about happening with a?)					
expres	sed him	ZE a and b to ensure that you have understood child's fears and child n or herself completely. If there are any changes or additions to child m here and then resummarize.					
	C.	Does feeling scared or worried about that every stop you from doin something that you want to do.	ıg				
		YES NO					
		Anything else? (only list two more activities)					
		3)					

If child indicates th	at their fear stops the	m from doing something	(s) then ask "how often?"
Activity 1.			
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
Activity 2.			
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
are not around (the	•	the fear or worry), like (, focus of fear) when you give an example, e.g.,
	Y	TES NO	
If child responds "y	es" then ask "how of	ften?"	
Once in a While (1)	Sometimes (2)	A lot of the time (3)	All of the time (4)
When do yo	ou worry or feel scare	ed?	
1)			
Any other t	ime?		
2)			
3)			
9. Do you eve	•	y about <u>someone asking</u>	you if they can touch
	YES	NO	
•	ou feel scared or wor	., then ask a. and/or b.) ried about someone aski	ng you if they can touch

B. What i	What is it about someone asking you if they can touch your private parts that				
makes you sca	makes you scared? (What are you worried about happening with a?)				
expressed him	E a and b to ensure that you or herself completely. If a here and then resummari	there are any changes or			
C.	Does feeling scared or worried about that every stop you from doing something that you want to do.				
	Y	ES	NO		
1)					
-	Anything else? (only list two more activities)				
2)					
3)					
If child indica for the first tw	tes that their fear stops the o activities.	m from doing something	g(s) then ask "how often?"		
Activity 1.					
	le Sometimes		All of the time (4)		

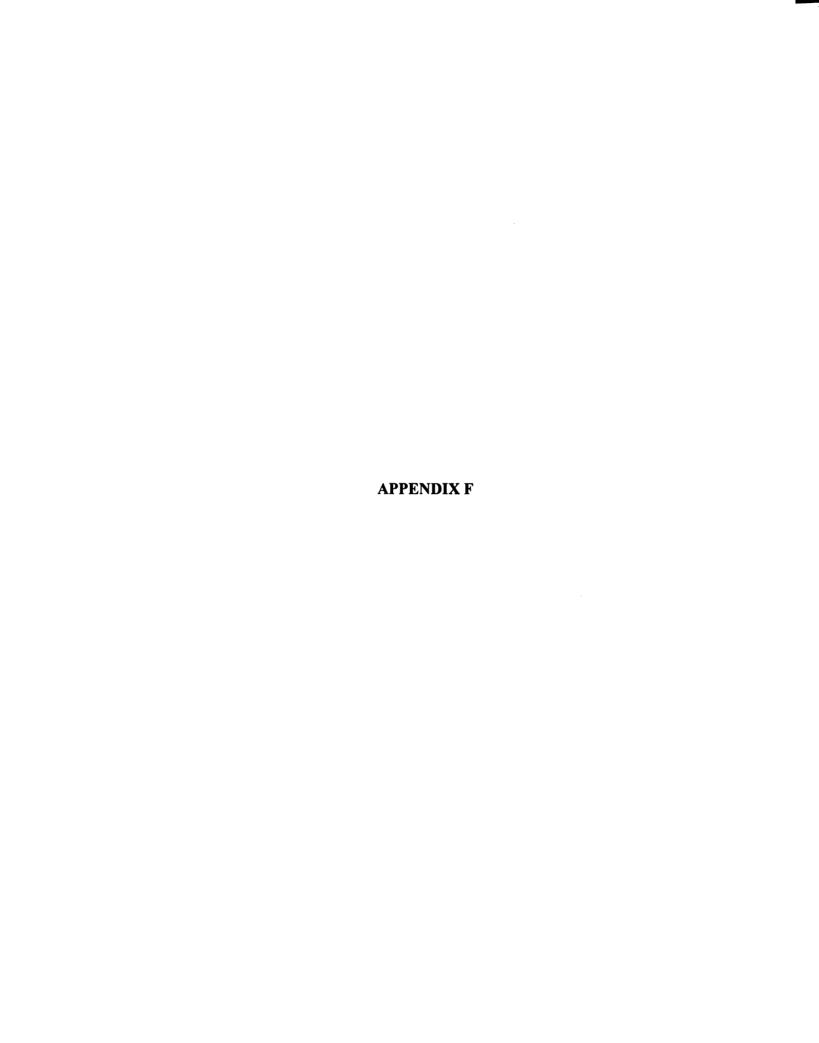
Activity 2	2.			
Once in a		Sometimes (2)	A lot of the time (3)	All of the time (4)
	ound (the		scared about that (i.e., fee fear or worry), like (gi	
		YES	S NO	
If child re	esponds "y	yes" then ask "how often	n?"	
Once in a		Sometimes (2)	A lot of the time (3)	All of the time (4)
	_	ou worry or feel scared?		
Ā	ny other t	ime?		
2))			
3))			
10. D parts ?	o you eve	er feel scared or worry a	bout someone asking y	ou to touch their private
(I)	f child do	YES esn't offer a. and/or b., t	NO hen ask a. and/or b.)	
A their priv		•	r worried about <u>someon</u>	e asking you to touch
B makes yo	u scared?		sking you to touch the	

SUMMARIZE a and b to ensure that you have understood child's fears.

C.

C. something that	Does feeling scared of you want to do.	or worried about that eve	ery stop you from doing	
	1)	YES	NO	
	Anything else? (only	list two more activities)	
	2)	 		
	3)			
	If child indicates that "how often?" for the		om doing something(s) then	ask
Activity 1.				
Once in a Whi	le Sometimes (2)	A lot of the tin (3)	me All of the time (4)	
Activity 2.				
Once in a Whi	le Sometimes (2)	A lot of the tin (3)	me All of the time (4)	
		of the fear or worry), l	(i.e., focus of fear) when yo ike (give an example, e.g.,	u
		YES	NO	
If child respon	ds "yes" then ask "hov	v often?"		

Once in a While	Sometimes	A lot of the time	All of the time (1)	(2)
When do you	worry or feel scared?	?		
1)				
Any other tim	e?			_
2)				-



APPENDIX F

LETTER TO PRINCIPAL

Dear	

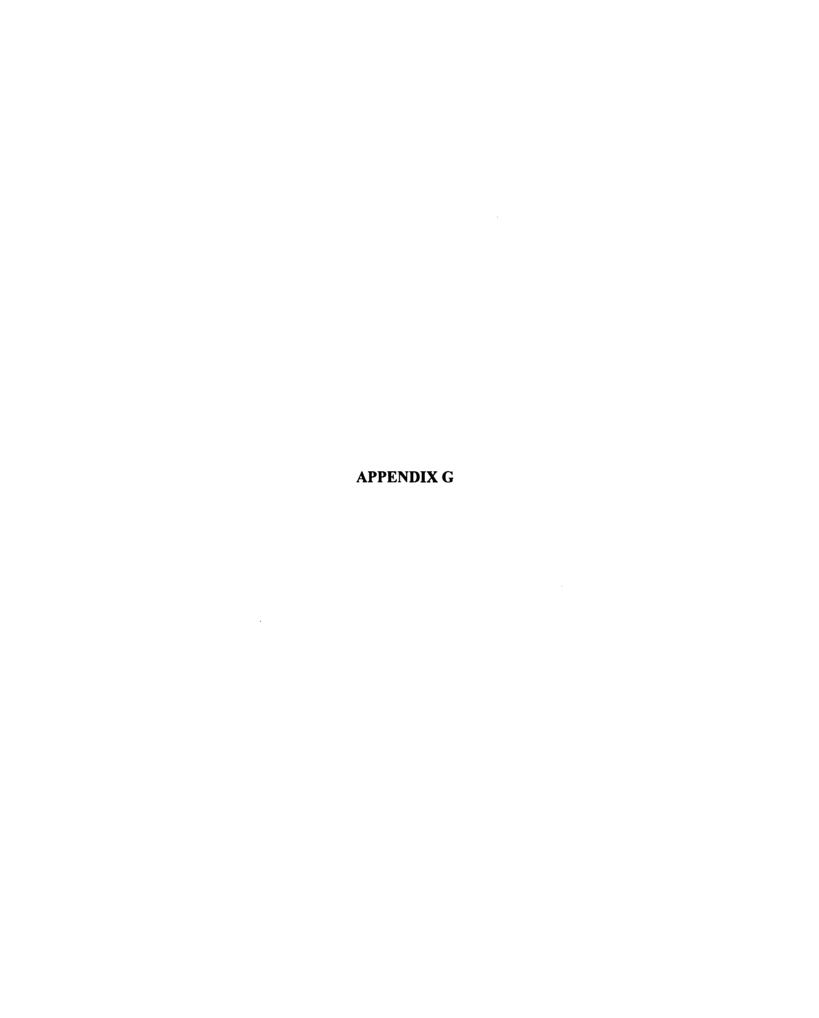
This upcoming school year, we are offering to teach a sexual abuse prevention curriculum--at no cost--to second graders in the greater Lansing area. Over the past two years, we assisted a number of preschool and day care centers in implementing a sexual abuse prevention program. The children enjoyed the curriculum and, most importantly, were able to learn prevention techniques. Parents and teachers were enthusiastic about the project and felt it provided a valuable experience for the children.

We're sure that you know what a serious problem child sexual abuse has become in our society. And it's not a problem that discriminates on the basis of gender, race, or parent's income. For example, one is four girls and one in six boys will be sexually abused before they reach age 18. Why are our children so vulnerable? Sexual abuse perpetrators often state that they abuse children because children are helpless and can be easily intimidated. It just isn't possible for a kind, caring adult to be with a child 24 hours a day. We need to teach our children to recognize threatening situations, should they arise, and to seek help. The sexual abuse prevention program is especially designed to do just this by employing a range of techniques (books, discussion, activities, and role-play) to involve the children and to teach them prevention skills. Parents are also encouraged to become actively involved in discussing the curriculum with their children. We conduct an ongoing evaluation of the program in order to make continual improvements in the curriculum.

The program will be offered this Fall and Winter. If you are interested in participating or would like more detailed information, please leave a message at 353-8690 for Dr. Bogat or Karen Kiemel. Or, if your school district requires a written research request, please send the necessary forms or guidelines to the following address:

Karen Kiemel
Dept. of Psychology Graduate Office
Psychology Research Building
Michigan State University
East Lansing, MI 48824

Sincerely,



APPENDIX G

PARENT LETTER

Dear Parents.

Our school is concerned about all types of personal safety that involve children. We routinely teach children safety rules about fire and crossing the street. This year we are pleased to offer a sexual abuse prevention program for children. We believe it is important to teach children to recognize threatening situations, should they arise, and to seek help. This is a personal safety program that teaches children "No, Go, Tell" message; it is not a sex education program. It does not provide any explicit information about human sexuality.

The program starts with an optional parent meeting. Parents get to learn more about the problem of sexual abuse and how to talk about it with their children. There is also a parent-child workbook that can be used to reinforce the message of the program at home. The program for the children takes place in the classroom and involves five, thirty minute presentations that include picture stories, discussion and role-plays.

We are presenting this program in cooperation with faculty and staff at Michigan State University. During the last several years, they have offered a sexual abuse prevention program throughout the greater Lansing area. Parents and teachers were enthusiastic about the program and felt it provided a valuable experience for the children. We conduct an ongoing evaluation of the prevention curricula in order to make continual improvements it is. This is done by interviewing children before the beginning of the program and shortly after the program is completed. At each of these times, the children will be individually interviewed for approximately 30 minutes and will also answer several questions in their classroom (also lasting 30 minutes). The interviews will be conducted by Karen Kiemel or Tim Speth, or one of their trained assistants. Children will be asked if they want to answer some questions about personal safety. They'll be told that there are no right or wrong answers; we'd just like to know what they think. The questions ask children to identify appropriate and inappropriate touch and to state what they would say and so in various pretend situations. Some questions also ask children about their apprehension regarding potentially dangerous and benign situations related to personal safety. Because the prevention program is being evaluated, half of the children who have permission to participate will receive the program first, the other half will receive it after the testing is completed (both groups of children will be tested at the same time--before and after the program is first presented). This procedure makes it possible to determine what children already know about the topic, how much of what they know is correct, and how much they learn from the program.

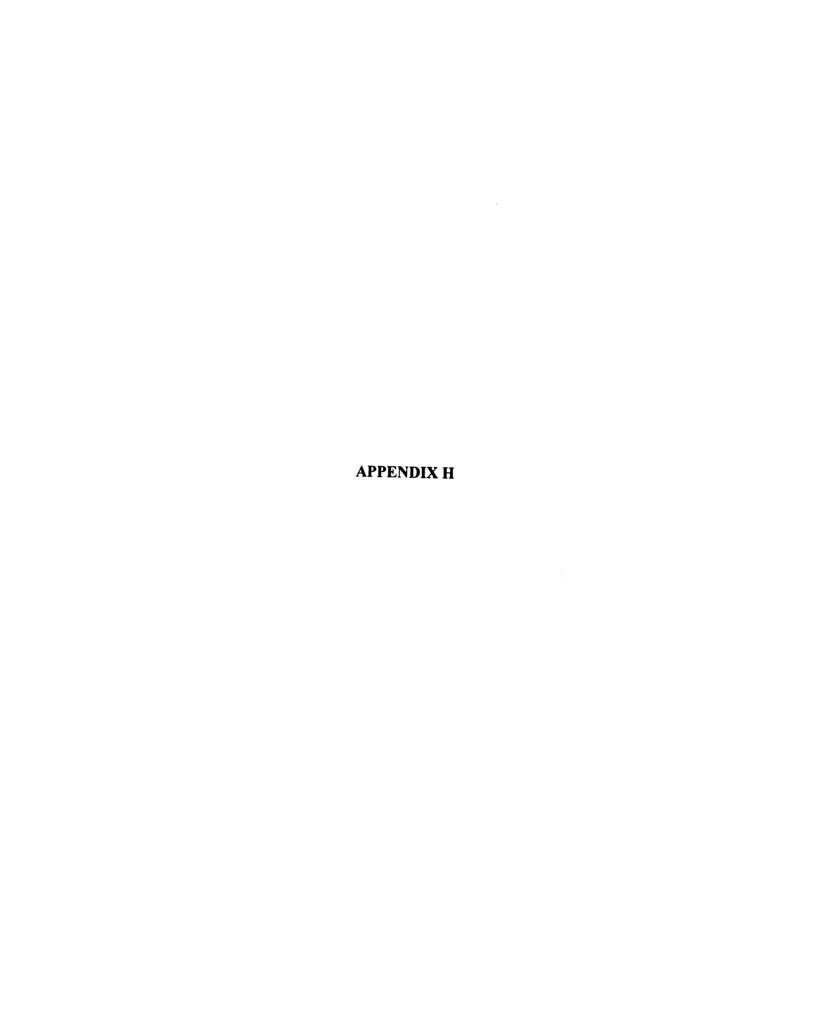
If you know right now that you want your child to participate, please complete the
attached form and send it back to your child's teacher. If you have questions about the
program, a parent meeting will be held to answer all of your concerns; at this
time you may view of copy of the curriculum. In addition, you may leave a message for Dr
Bogat, Dr. McGrath, Karen Kiemel, or Tim Speth at 353-8690 and they'll return your call
and answer your questions. If you decide that you do not want your child to participate,
then an alternate activity will be provided for your child while the prevention program is
being taught.

Parent Permission Form Sexual Abuse Prevention Program

- 1. I understand the evaluation process of the sexual abuse prevention program. I have read the description of the project and I understand what my child's participation will involve.
- 2. I understand my child's participation is optional and that my child must also give his/her verbal permission.
- 3. I understand that either myself or my child may discontinue my child's participation in the evaluation at any time without penalty and that my child will still have the opportunity to participate in the program.
- 4. I understand that all results of the study will be kept in strict confidence and all responses of my son or daughter will remain anonymous except if my child reports possible sexual abuse. If such a report occurs, Dr. Bogat will notify both myself and the school immediately. Within these restrictions, the results of the study will be made available to me at my request.
- 5. I understand that participation in the study does not guarantee additional benefits to my child or to me.

I hereby give my approval to allow my child to be involved in the sexual abuse prevention program and to be interviewed about his/her knowledge of personal safety. I understand that this information will be used as part of a research project being conducted by Dr. Anne Bogat, Karen Kiemel, and Tim Speth at Michigan State University.

Name of Child	Birthdate
Signature of Parent/Guardian	
Date	
******DI EASE COMPLETE AND RETU	PN TO VOLID CHILD'S TEACHED ******



APPENDIX H

LIST OF TABLES

Table 1 - Mean Item Scores on the CFS-R Factors

		Time	:			
	Pretes	Pretest Posttest				
	Experimental ^a M (SD)	Control ^b M (SD)	Experimental ^a M (SD)	Control ^b M (SD)		
Sexual Abuse Factor	2.36 (.68)	2.39 (.70)	2.32 (.68)	2.38 (.67)		
Benign Factor	1.14 (.37)	1.14 (.27)	1.13 (.27)	1.13 (.29)		
Common Fear Factor	1.51 (.42)	1.53 (.43)	1.40 (.39)	1.45 (.42)		

n = 54

 $^{^{}b}$ n = 56.

Table 2 - Sum Scores on the CFS-R Factors

٦.		
1	m	e

	P	retest	Posttest		
	Experimental ^a M (SD)	Control ^b M (SD)	Experimental ^a M (SD)	Control ^b M (SD)	
Sexual Abuse Factor	11.37 (3.54)	11.89 (3.56)	11.20 (3.72)	11.73 (3.55)	
Benign Factor	7.93 (2.59)	7.98 (1.90)	7.80 (1.97)	7.84 (2.08)	
Common Fear Factor	8.96 (2.49)	9.13 (2.59)	8.13 (2.28)	8.68 (2.51)	

Table 3 - Multivariate Analysis of Variance for the CFS-R Factors

Source	E	Hypoth. DF	Error DF	p
Fear	80.38	2	107	.00
Group By Fear	.10	2	107	.91
Group By Fear By Time	.05	2	107	.95
Fear By Time	2.12	2	107	.13

 $[\]begin{array}{l}
a \\
n = 54. \\
b \\
n = 56.
\end{array}$

Table 4 - Analysis of Variance of the CFS-R Common Fear Factor

	SS	DF	MS	F	Sig of F
			Between subj	ects	·
Within Cells	30.55	108	.28		
Group	.07	1	.07	.25	.62
		<u> </u>	Within subje	ects	
Within Cells	11.62	216	.05		
Time	.48	1	.48	7.78	.01
Group by Time	.01	1	.01	.17	.68

Table 5 - Analysis of Variance of the CFS-R Benign Fear Factor

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	16.43	108	.15		
Group	.00	1	.00	.00	.96
			Within subje	ects	
Within Cells	3.18	108	.03		
Time	.01	1	.01	0.32	.57
Group by Time	.00	1	.00	.01	.90

Table 6 - Analysis of Variance of the CFS-R Sexual Abuse Fear Factor

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	90.73	108	.84		
Group	.12	1	.12	.14	.71
****	-		Within subje	ects	
Within Cells	10.26	108	.09		
Time	.05	1	.05	.50	.48
Group by Time	.01	1	.01	.13	.72

Table 7 - Mean Item Scores for Sexual Abuse and Common Fear Based on Gender

Time					
	Pretest	Posttest			
Experimental M (SD) n	Control M (SD)n	Experimental M (SD) n	Control M (SD) n		
2.24(0.68) 23	2.12 (0.75) 27	2.10 (0.70) 23	2.04 (0.71) 27		
1.33 (0.36) 23	1.35 (0.34) 27	1.30 (0.43) 23	1.35 (0.37) 27		
2.45 (0.67) 31	2.64 (0.55) 29	2.48 (0.64) 31	2.68 (0.48) 29		
1.63 (0.42) 31	1.69 (0.45) 29	1.47 (0.34) 31	1.53 (0.45) 29		
	M (SD) n 2.24(0.68) 23 1.33 (0.36) 23 2.45 (0.67) 31	Pretest Experimental Control M (SD) n 2.24(0.68) 23 2.12 (0.75) 27 1.33 (0.36) 23 1.35 (0.34) 27 2.45 (0.67) 31 2.64 (0.55) 29	Experimental Control Experimental M (SD) n M (SD) n M (SD) n 2.24(0.68) 23 2.12 (0.75) 27 2.10 (0.70) 23 1.33 (0.36) 23 1.35 (0.34) 27 1.30 (0.43) 23 2.45 (0.67) 31 2.64 (0.55) 29 2.48 (0.64) 31		

Table 8 - Sum Scores for Sexual Abuse and Common Fear Factor Based on Gender

	Time				
		Pretest	Posttest		
	Experimental M (SD) n	Control M (SD)n	Experimental M (SD) n	Control M (SD) n	
Boys					
Sexual Abuse Factor	10.48 (3.17) 23	10.48 (3.84) 27	10.09 (3.22) 23	10.00 (3.74) 27	
Common Fear Factor	8.00 (2.15) 23	8.07 (2.02) 27	7.48 (2.54) 23	8.11 (2.22) 27	
Girls					
Sexual Abuse Factor	12.03 (3.69) 31	13.21 (2.73) 29	12.03 (3.89) 31	13.34 (2.48) 29	
Common Fear Factor	9.68 (2.51) 31	10.10 (2.70) 29	8.61 (1.98) 31	9.21 (2.68) 29	

Table 9 - MANOVA of the Sexual Abuse and Common Fear Factor by Gender

	SS	DF	MS	F	Sig of F
		Bet	ween subject	S	
Within Cells	65.11	106	.61		
Group	.30	1	.30	.49	.48
Sex	12.80	1	12.80	20.84	.00
Group by Sex	.69	1	.69	1.13	.29
		Wi	thin subjects		
Within Cells	41.06	106	.39		
Fear	85.34	1	85.34	220.33	.00
Group by Fear	.00	1	.00	.01	.94
Sex by Fear	1.00	1	1.00	2.57	.11
Group by Sex	.41	1	.41	1.07	.30
by Fear					
		Wi	thin subjects	·	
Within Cells	10.87	106	.10		
Time	.42	1	.42	4.05	.05
Group by Time	.03	1	.03	.25	.62
Sex by Time	.00	1	.00	.00	.95
Group by Sex	.01	1	.01	.10	.75
by Time					
		Wi	thin subjects	}	
Within Cells	5.47	106	.05		
Fear by Time	.07	1	.07	1.34	.25
Group by Fear by Time	.00	1	.00	.05	.82
Sex by Fear by Time	.59	1	.59	11.47	.00
Group by Sex	.00	1	.00	.01	.91
by Fear by Time					

Table 10 - Analysis of Variance of the Common Fear Factor by Gender

	SS	DF	MS	F	Sig of F
		Bety	ween subjec	ts	
Within Cells	27.19	106	.26		
Group	.12	1	.12	.49	.49
Sex	3.33	1	3.33	12.98	.00
Group by Sex	.02	1	.02	.07	.79
		Wi	thin subject	S	
Within Cells	6.37	106	.06		
Time	.41	1	.41	6.85	.01
Group by Time	.01	1	.01	.09	.76
Sex by Time	.31	1	.31	5.17	.03
Group by Sex by Time	.00	1	.00	.05	.83

Table 11 - Analysis of Variance of the Sexual Abuse Factor by Gender

	SS	DF	MS	F	Sig of F
		Betv	ween subject	 S	
Within Cells	78.97	106	.75		
Group	.18	1	.18	.24	.62
Sex	10.47	1	10.47	14.05	.00
Group by Sex	1.09	1	1.09	1.46	.23
		Wi	thin subjects		
Within Cells	9.97	106	.09		
Time	.07	1	.07	.78	.38
Group by Time	.02	1	.02	.24	.63
Sex by Time	.28	1	.28	2.99	.09
Group by Sex	.01	1	.01	.09	.77
by Time					

Table 12 - Mean Item Scores for Benign and Common Fear Factor Based on Age

	Time				
		Pretest	Posttest		
	Experimental M (SD) n	Control M (SD)n	Experimental M (SD) n	Control M (SD) n	
Younger Ch	ildren				
Benign Factor	1.11 (0.22) 28	1.05 (0.11) 26	1.09 (0.14) 28	1.08 (0.17) 26	
Common Fear Factor	1.56 (0.47) 28	1.63 (0.50) 26	1.36 (0.35) 28	1.57 (0.44) 26	
Older Child	en				
Benign Factor	1.18 (0.48) 26	1.21 (0.34) 30	1.17 (0.36) 26	1.18 (0.36) 30	
Common Fear Factor	1.44 (0.35) 26	1.44 (0.35) 30	1.43 (0.43) 26	1.34 (0.38) 30	

Table 13 - Sum Scores for Benign and Common Fear Factor Based on Age Group

		Pretest	Posttest	
	Experimental M (SD) n	Control M (SD)n	Experimental M (SD) n	Control M (SD) n
Younger Chi	ldren			
Benign Factor	7.71 (1.51) 28	7.38 (0.75) 26	7.50 (1.20) 28	7.38 (1.36) 26
Common Fear Factor	9.36 (2.84) 28	9.77 (2.98) 26	7.89 (2.10) 28	9.42 (2.63) 26
Older Childre	en en	•		
Benign Factor	8.15 (3.41) 26	8.50 (2.40) 30	8.12 (2.53) 26	8.23 (2.50) 30
Common Fear Factor	8.54 (2.00) 26	8.57 (2.08) 30	8.38 (2.48) 26	8.03 (2.25) 30

Table 14 - MANOVA of the Benign and Common Fear Factor by Age Group

	SS	DF	MS	F	Sig of F
		Be	tween subject	ets	
Within Cells	27.11	106	.26		
Group	.04	1	.04	.17	.68
Age	.01	1	.01	.02	.88
Group by Age	.12	1	.12	.47	.49
		W	ithin subject	S	
Within Cells	18.00	106	.17		
Fear	12.65	1	12.65	74.48	.00
Group by Fear	.06	1	.06	.36	.55
Age by Fear	1.30	1	1.30	7.67	.01
Group by Age	.41	1	.41	2.42	.12
by Fear					
	-	W	ithin subject	S	
Within Cells	4.70	106	.04		
Time	.29	1	.29	6.55	.01
Group by Time	.01	1	.01	.17	.68
Age by Time	.02	1	.02	.35	.56
Group by Age	.15	1	.15	3.41	.07
by Time					
		W	ithin subject	S	<u> </u>
Within Cells	4.90	106	.05		
Fear by Time	.17	1	.17	3.73	.06
Group by Fear by Time	.00	1	.00	.05	.83
Age by Fear by Time	.06	1	.06	1.38	.24
Group by Age by Fear	.04	1	.04	.89	.35
by Time					

Table 15 - Analysis of Variance of the Common Fear Factor by Age Group

	SS	DF	MS	F	Sig of F
		Bet	ween subjec	ts	
Within Cells	29.30	106	.28		
Group	.10	1	.10	.38	.54
Age	.75	1	.75	2.70	.10
Group by Age	.49	1	.49	1.77	.19
		Wi	thin subject	S	
Within Cells	6.44	106	.06		
Time	.46	1	.46	7.49	.01
Group by Time	.01	1	.01	.15	.70
Age by Time	.07	1	.07	1.16	.28
Group by Age by Time	.18	1	.18	2.88	.09

Table 16 - Analysis of Variance of the Benign Fear Factor by Age Group

	SS	DF	MS	F	Sig of F
		Bet	ween subjec	ets	
Within Cells	15.81	106	.15		
Group	.00	1	.00	.00	.95
Age	.56	1	.56	3.77	.06
Group by Age	.04	1	.04	.29	.59
		Wi	thin subject	S	
Within Cells	3.16	106	.03		
Time	.01	1	.01	.26	.61
Group by Time	.00	1	.00	.03	.87
Age by Time	.01	1	.01	.28	.60
Group by Age	.02	1	.02	.58	.45
by Time					

Table 17 - RCMAS Scores for the Experimental and Control Group

Time					
	Pretest		Posttest		
Experimental ^a M (SD)	Control ^b M (SD)	Experimental ^a M (SD)	Control ^b M (SD)		

.31 (.28)

8.35 (7.83)

.29 (.23)

8.07(6.39)

.44 (.19)

12.48 (5.32)

Mean Item

Sum Score

Table 18 - Analysis of Variance of the RCMAS

.39 (.25)

10.91 (6.98)

	SS	DF	MS	F	Sig of F
			Between sub	ects	
Within Cells	10.93	108	.10		
Group	.02	1	.02	.19	.67
			Within subje	ects	
Within Cells	1.61	108	.01		
Time	.78	1	.78	52.30	.00
Group by Time	.06	1	.06	3.91	.05

 $[\]frac{\mathbf{a}_{\mathbf{n}} = 54.}{\mathbf{b}_{\mathbf{n}} = 56.}$

Table 19 - RCMAS Scores Based on Gender

		Time	e	
		Pretest		Posttest
	Experimental ^a M (SD) n	Control ^b M (SD)n	Experimental ^a M (SD) n	Control ^b M (SD) n
Mean Item	Score			
Boys	.31 (.20) 23	.38 (.17) 27	.20 (.21) 23	.24 (.22) 27
Girls	.46 (.26) 31	.51 (.19) 29	.38 (.31) 31	.34 (.24) 29
Sum Score				
Boys	8.39 (5.72) 23	10.70 (4.63) 27	5.52 (5.54) 23	6.70 (6.00) 27
Girls	12.77 (7.33) 31	14.14 (5.46) 29	10.45 (8.67) 31	9.34 (6.58) 29

Table 20 - Analysis of Variance of the RCMAS by Gender

	SS	DF	MS	F	Sig of F
		Bety	ween subjec	ts	
Within Cells	9.83	106	.09		
Group	.05	1	.05	.49	.48
Sex	1.07	1	1.07	11.49	.00
Group by Sex	.04	1	.04	.47	.49
		Wi	thin subject	s	
Within Cells	1.60	106	.02		
Time	.78	1	.78	51.81	.00
Group by Time	.05	1	.05	3.51	.06
Sex by Time	.00	1	.00	.00	.98
Group by Sex by Time	.01	1	.01	.82	.37

Table 21 - RCMAS Scores Based on Age Group

	Time				
		Pretest		Posttest	
	Experimental ^a M (SD) n	Control ^b M (SD)n	Experimental ^a M (SD) n	Control ^b M (SD) n	
Mean Item	Score	· · · · · · · · · · · · · · · · · · ·			
Younger Children	.33 (.27) 28	.43 (.17) 26	.22 (.25) 28	.26 (.21) 26	
Older Children	.47 (.21) 26	.46 (.21) 30	.40 (.29) 26	.32 (.25) 30	
Sum Score Younger Children	9.11 (7.54) 28	12.04 (4.87) 26	6.04 (6.60) 28	7.23(5.75) 26	
Older Children	12.85 (5.87) 26	12.87 (5.74) 30	10.85 (8.40) 26	8.80(6.91) 30	

Table 22 - Analysis of Variance of the RCMAS by Age Group

	SS	DF	MS	F	Sig of F
		Bet	ween subject	ets	
Within Cells	10.18	106	.10		
Group	.01	1	.01	.11	.74
Age	.59	1	.59	6.17	.02
Group by Age	.17	1	.17	1.76	.19
		Wi	thin subject	ts	
Within Cells	1.60	106	.02		
Time	.78	1	.78	51.69	.00
Group by Time	.06	1	.06	4.05	.05
Age by Time	.01	1	.01	.83	.37
Group by Age	.00	1	.00	.02	.89
by Time					

Table 23 - Sum Scores for the Experimental and Control Group on the Wist-R

	Time				
		Pretest		Posttest	
	Experimental ^a M (<u>SD</u>)	Control ^b M (SD)	Experimental ^a M (SD)	Control ^b M (SD)	
WISC-R	41.82 (11.98)	39.80 (8.86)	42.09 (10.58)	40.75 (9.45)	
RECOGN	3.94 (.23)	3.87 (.51)	3.95 (.23)	3.93 (.26)	
SAY	11.07 (5.31)	9.64 (3.50)	11.09 (4.93)	9.44 (4.54)	
DO	10.96 (5.47)	10.24 (5.07)	10.22 (4.06)	10.40 (4.44)	
WHO	10.27 (3.65)	10.74 (3.83)	11.40 (3.50)	11.55 (3.37)	
WHAT	5.56 (.98)	5.31 (1.26)	5.44 (1.03)	5.44 (1.10)	

 $[\]overset{a}{\underline{\mathbf{n}}} = 55.$ $\overset{b}{\underline{\mathbf{n}}} = 55.$

Table 24 - Multivariate Analysis of Variance for the WIST-R Components

Source	E	Hypoth. DF	Error DF	р
WIST-R	1702.59	4	105	.00
Group By WIST-R	1.11		105	.36
Group By WIST-R By Time WIST-R By Time	.81	4	105	.52
	2.76	4	105	.03

Table 25 - Analysis of Variance of the WIST-R RECOGNITION Component

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	.39	108	.00		
Group	.00	1	.00	1.25	.27
			Within subje	ects	
Within Cells	.44	108	.00		
Time	.00	1	.00	.28	.60
Group by Time	.00	1	.00	.28	.60

Table 26 - Analysis of Variance of the WIST-R SAY Component

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	4.36	108	.04		
Group	.19	1	.19	4.61	.034
			Within subje	ects	
Within Cells	1.69	108	.02		
Time	.00	1	.00	.01	.94
Group by Time	.00	1	.00	.09	.76

Table 27 - Analysis of Variance of the WIST-R DO Component

	SS	DF	MS	F	Sig of F
	-		Between subj	ects	
Within Cells	4.53	108	.04		
Group	.01	1	.01	.19	.66
			Within subje	ects	
Within Cells	2.06	108	.02		
Time	.00	1	.00	.19	.66
Group by Time	.01	1	.01	.67	.41

Table 28 - Analysis of Variance of the WIST-R WHO Component

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	221.64	108	2.05		
Group	.27	1	.27	.13	.72
			Within subje	ects	
Within Cells	78.83	108	.73		
Time	6.91	1	6.91	9.47	.00
Group by Time	.42	1	.42	.58	.45

Table 29 - Analysis of Variance of the WIST-R WHAT Component

	SS	DF	MS	F	Sig of F
			Between sub	jects	
Within Cells	19.43	108	.18		
Group	.20	1	.20	1.12	.29
			Within subj	ects	
Within Cells	7.95	108	.07		
Time	.02	1	.02	.25	.62
Group by Time	.03	1	.03	.44	.51

Table 30 - Analysis of Variance of the WIST-R SAY Component by Gender

	SS	DF	MS	F	Sig of F
		Bet	ween subjec	ets	
Within Cells	4.17	106	.04		
Group	.15	1	.15	3.74	.06
Sex	.14	1	.14	3.56	.06
Group by Sex	.05	1	.05	1.23	.27
		Wi	thin subject	S	
Within Cells	1.65	106	.02		
Time	.00	1	.00	.01	.91
Group by Time	.00	1	.00	.24	.63
Sex by Time	.02	1	.02	1.27	.26
Group by Sex by Time	.02	1	.02	1.39	.24

Table 31 - Analysis of Variance of the WIST-R WHO Component by Age Group

	SS	DF	MS	F	Sig of F
		Bet	ween subjec	ts	
Within Cells	216.57	106	2.04		
Group	.09	1	.09	.04	.84
Age	3.00	1	3.00	1.47	.23
Group by Age	2.09	1	2.09	1.02	.31
		Wi	thin subject	<u> </u>	
Within Cells	74.94	106	.71		
Time	7.32	1	7.32	10.36	.00
Group by Time	.19	1	.19	.26	.61
Age by Time	3.61	1	3.61	5.11	.03
Group by Age by Time	.28	1	.28	.40	.53

Table 32 - T-Tests Between High Versus Low CFS-R Factors/Anxiety on WIST-R

Source	T-Value	DF	Sig of T
Sexual Abuse Fear	.58	104	.57
Common Fear	28	80	.78
Benign Fear	1.83	57	.07
RCMAS	- 1.42	101	.16

Table 33 - Analysis of Variance of High/Low Sexual Abuse Fear and WIST-R

	SS	DF	MS	F	Sig of F
		Bety	ween subject	S	
Within Cells	335.90	102	3.29		
Group	.36	1	.36	.11	.74
High/Low Sexual Abuse Fear	.98	1	.98	.30	.59
High/Low Sexual Abuse	7.92	1	7.922	.41	.12
Fear by Group					
		Wi	thin subjects		
Within Cells	113.99	102	1.12		
Time	7.25	1	7.25	6.48	.01
Group by Time	.40	1	.40	.36	.55
High/Low Sexual	.09	1	.09	.08	.78
Abuse Fear By Time					
Group by Time by High/	.46	1	.46	.41	.52
Low Sexual Abuse Fear					

Table 34 - Analysis of Variance of High/Low Benign Fear and WIST-R

	SS	DF	MS	F	Sig of F
		Bet	ween subjec	ts	
Within Cells	342.11	104	3.29		
Group	.25	1	.25	.08	.78
High/Low Benign Fear	7.00	1	7.00	2.13	.15
High/Low Benign Fear	2.58	1	2.58	.79	.38
By Group					
		Wi	thin subject	 S	
Within Cells	112.24	104	1.08		
Time	8.58	1	8.58	7.95	.01
Group by Time	.24	1	.24	.22	.64
High/Low Benign Fear	2.81	1	2.81	2.61	.11
By Time					
Group by Time by	.34	1	.34	.31	.58
High/Low Benign Fear					

Table 35 - Analysis of Variance of High/Low Common Fear and WIST-R

	SS	DF	MS	F	Sig of F
		Bet	ween subjec	ts	
Within Cells	243.75	78	3.13		
Group	.92	1	.92	.29	.59
High/Low Common Fear	.94	1	.94	.30	.57
High/Low Common Fear	2.40 1		2.40	.77	.38
By Group					
		Wi	thin subjects	<u> </u>	
Within Cells	80.38	78	1.03		
Time	6.08	1	6.08	5.90	.02
Group by Time	.66	1	.66	.64	.43
High/Low Common Fear	.16	1	.16	.16	.69
By Time					
Group by Time by	.85	1	.85	.82	.37
High/Low Common Fear					

Table 36 - Analysis of Variance of High/Low Anxiety and WIST-R

	SS	DF	MS	F	Sig of F
		Bet	ween subject	 S	•
Within Cells	324.55	99	3.28		
Group	.62	1	.62	.19	.66
High/Low Anxiety	14.88	1	14.88	4.54	.04
High/Low Anxiety	7.69	1	7.69	2.35	.13
By Group					
		Wi	ithin subjects		
Within Cells	102.73	99	1.04		
Time	5.76	1	5.76	5.55	.02
Group by Time	.02	1	.02	.02	.88
High/Low Anxiety	.53	1	.53	.51	.48
By Time					
Group by Time by	.53	1	.53	.51	.48
High/Low Anxiety					

Table 37 - Analysis of Variance of the AS Interference Component

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	10.85	92	.12		
Group	.00	1	.00	.03	.87
			Within subje	ects	
Within Cells	4.34	92	.05		
Time	.36	1	.36	7.66	.01
Group by Time	.06	1	.06	1.26	.26

Table 38 - Analysis of Variance of the AS Worry Component

	SS	DF	MS	F	Sig of F
			Between subj	ects	
Within Cells	10.38	88	.12		
Group	.01	1	.01	.08	.77
			Within subje	ects	
Within Cells	3.35	88	.04		
Time	.55	1	.55	14.39	.00
Group by Time	.01	1	.01	.22	.64

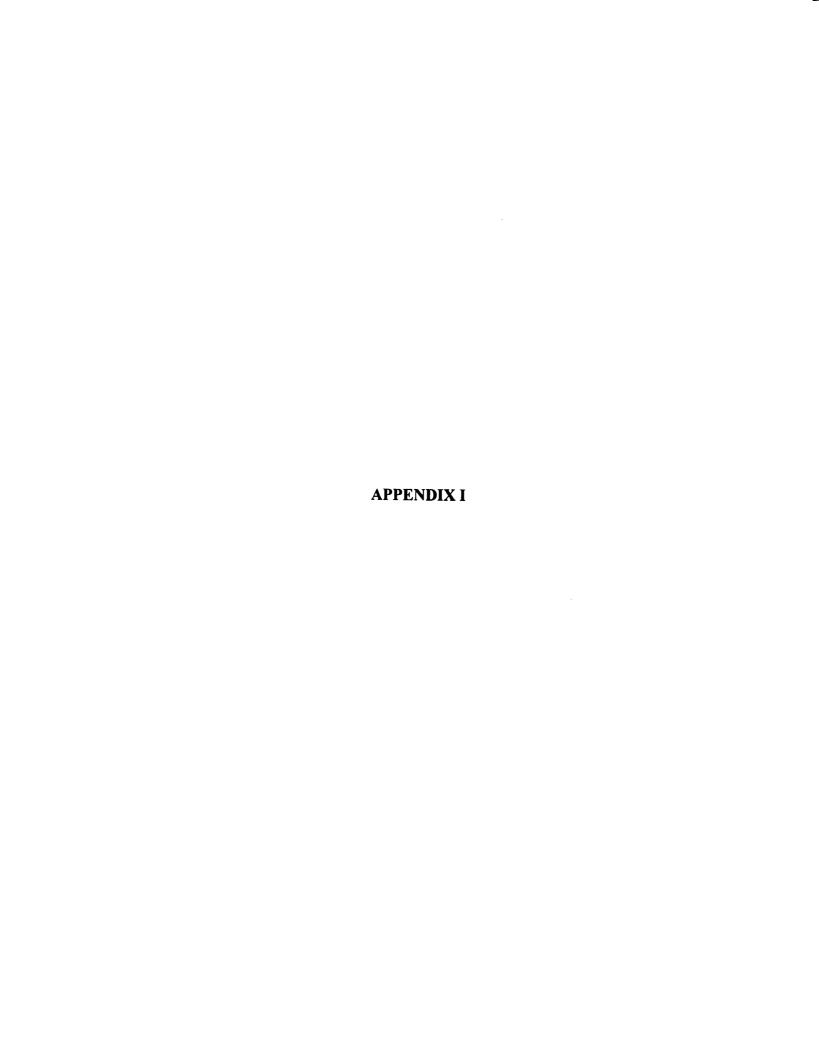
Table 39 - Frequencies of the AS Content Categories

		Time		
	Pret	est	Posttest	
E	xperimental	Control	Experimental	Control
Content Categories				
Sexual Abuse	88	98	66	76
New/Unknown Situation	43	33	36	18
Benign Touch	28	29	18	13
Nonspecified Aggression	25	31	25	21
When Confronted w/Abuse	23	20	24	16
When Child is Alone	20	23	14	15
Kidnapping	18	22	25	19
When Child is in a Public	15	17	16	09
Place				
Concern For Person's	15	14	10	08
Well Being				
When Child is Home	10	11	03	09
Hitting	11	09	07	05
Threat of Death	05	11	06	07
Burglary	06	07	06	04
Nonintentional Harm/Child	08	06	07	04
Visceral Reaction	11	06	04	06
Unwanted Activity	05	05	00	02
Child In Trouble	04	04	04	06
Harming Others	03	03	01	04
Verbal Aggression	04	02	01	00
Nonintentional Harm/	01	02	01	02
Other				
Person In Trouble	01	01	02	00
Vague Response	18	20	11	13
Child Does Not Know	06	03	02	04

Note. See Appendix I for description of content categories.

Table 40 - Summary of Significant Findings

	Measures				
_	Fear	Anxiety	Knowledge		
Program Effects	No differences between groups.	Control group revealed a greater decline over time.	No differences between groups.		
Time Effects	Decrease in common fear level.	Decrease over time.	Increase over time on WHO.		
Age Effects	Older children had greater benign fear level.	Older children had greater anxiety.	Younger children increased on WHO.		
Gender Effects	Girls had higher sexual abuse and common fear levels.	Girls had higher anxiety.	No effects.		
	Girls revealed a decline in common fear level over time whereas boys' common fear level remained constant.				
	Boys revealed a decline in sexual abuse fear ove time whereas girls' sexual abuse fear level remained constant.				
High/Low Anxiety and Fear Levels	Not assessed.	Not assessed.	Children with high anxiety levels had high knowledge levels.		



APPENDIX I

APPREHENSION SCALE (AS) CODING MANUAL

Instructions:					
Coding is based on child's actual responses, not on child's implied responses.					
- Throughout the coding manual, CHILD refers to the child being tested and PERSON refers to the person involved in the child's fear.					
- Leave blank any line that does not receive a code.					
1. DO YOU EVER FEEL SCARED OR WORRY ABOUT THE FEAR?					
1. $1 = \underline{YES} \qquad 0 = \underline{NO}$					
A. WHEN DO YOU FEEL SCARED OR WORRIED ABOUT THE FEAR?					
B. WHAT IS IT ABOUT THE FEAR THAT MAKES YOU SCARED?					
If NO, then draw a line down the rest of the coding sheet for the question. If YES, then continue.					
2. through 6. CONTENT CATEGORY(IES) of child's expression of fear/worry					
Based on child's response(s) mentioned in A. and B., score <u>all</u> relevant content categories (maximum of 5) on coding sheet [if less than five categories are coded, then leave the unused numbers blank].					
CONTENT CATEGORIES					

Private parts and/or undressing. Private parts and/or undressing is mentioned or inferred in the child's fear {relating to child and/or child's significant other(s)}. For questions 1 through 7, if it is unclear which subcategory to use, then score as a benign situation (1.2)]: If child answers "yes" to question 5 and 8, then 1.2 will always be coded (unless child specifies a sexual abuse situation). If child answers "yes" to questions 9 and/or 10, then 1.1 will always be coded (unless child specifies a benign touch situation).

1.1 SEXUAL ABUSE SITUATIONS

-"like if they are a stranger or a friend, they might want to show you their p.p."

1.2 BENIGN TOUCH SITUATIONS [involving p.p.] (doctors, baths, etc.).

- -"when they [doctors] look at my p.p."
- -"when they [babysitters] tell me to take off clothes (for baths, etc.").

<u>Intentional aggression towards child.</u> Aggressive actions by person intending to hurt child/person is mean to child. [Note: If it is unclear/ambiguous whether the person's aggressive actions are intentional then code as 4.0--nonintentional harm towards child.]:

2.1 NONSPECIFIED AGGRESSION--includes the use of drugs or alcohol

- -"when we don't know what they're [stranger] gonna do/they might hurt me" {This example would also be coded 12--novel situation.}
- -"[scared to leave house when] go to friends/because there are mean dogs/because the dogs are mean and they get loose"
- -"when they [strangers] make me do something I don't want to"

2.2 VERBAL AGGRESSION

-"they might yell at me"/"they might say 'boo' to scare me"

2.3 KIDNAPPING

-"sometimes walking in street or at mall/they [strangers] might try kidnapping you or something"

2.4 HITTING/KICKING/BEATING UP or other signs of physical aggression (e.g., tving up)

- [scared of strangers] "when I'm around a lot of people/ they might hit me"

2.5 THREAT OF DEATH (e.g., shooting/killing/poisoning)

- "like if they [stranger] ask me to come in my house if they're at my door/them hurting me (pr.) kill me"

Intentional aggression of child's possession(s) or significant other(s)

(e.g., child's house, dog, friends and parents)

Note: If it is unclear/ambiguous whether the person's aggressive actions are intentional then code as 5.0--nonintentional harm of possession/other.]:

3.1 CHILD'S SIGNIFICANT OTHERS

- "when somebody [neighbor] stops by and asks to use the phone/I'm afraid the person wilt my mom or something"
- "if babysitter lets other use phone from outside/babysitter will get beat up by the person"

3.2 BURGLARY/ROBBERY/STEALING

"at night/the neighbor might be a burglar/they'll break in and steal something"

Nonintentional harm towards child. Actions by person (not intended to be aggressive towards child) that may injure child. [Note: If it is unclear/ambiguous whether the person's aggressive actions are intentional then code under this content category (4.0--

nonintentional harm towards child).]:

4.0 NONINTENTIONAL HARM TOWARDS CHILD

- "when they [neighbors] are doing drugs/they just fly down our street and I almost got hurt"
- "because they [neighbors] shoot guns/they might shoot me"

- "I wouldn't like it/they [doctor looking at pp.] might hurt me by touching p.p. {This example would also be coded 1.2--benign touch situation.}

Nonintentional harm of child's possession(s) and/or significant other(s). Actions (not intended to be aggressive) that may harm child's possession(s) or significant others. [Note: If it is unclear/ambiguous whether the person's aggressive actions are intentional then code under this content category (5.0--nonintentional harm of possession/other).]:

5.0 NONINTENTIONAL HARM OF POSSESSION/OTHER

- "IDK/if mom's baking a cake and leaves it on the stove (pr.) burns down the house"
- "when he [uncle] gets mad/he keeps getting a divorce from my aunt, that worries me"

<u>Concern for person's or persons' well being</u>. [Note: a perpetrator has not acted upon the person, that is, content category 3 or 5 is not relevant]:

6.0 CONCERN FOR PERSON'S WELL BEING

- "when they neighbor have to go to hospital or some thing like that/the ones that I like I don't want them to get hurt"
- "when I find out my uncle's drinking/he drives and I'm scared he'll get in an accident"

<u>Location or situation of child's worry</u> [Note: More than one of these subcategories may be relevant. For example, whenever child responds "home alone" then both 7.0 and 7.1 should be coded]:

- 7.0 <u>LEFT ALONE</u> or is without a responsible adult
 - "I'm scared of them [strangers] when I'm alone"
- **7.1 HOME**
- 7.2 <u>PUBLIC PLACE</u> child is in a public place (e.g., malls, school, grocery store, etc.)
- <u>7.4</u> PRIVATE PARTS child worries when someone touches p.p. or when someone asks to touch p.p.

Child may get into trouble and it is indicated or implied that child is not suppose to do that [child has done something wrong]:

8.0 CHILD IN TROUBLE

- "if someone didn't like me they [person asking child to touch their p.p.] might tell your mom to get you in trouble (tell what?) that I was touching p.p."
- [child is fearful of going to school] "when I'm in trouble (pr.) like beating up a kid/getting conduct"

Person may get into trouble and it is indicated or implied that the person is not suppose to do that [person has done something wrong]:

9.0 PERSON IN TROUBLE

- [someone asking to touch p.p.] "when I'm alone/I know they're not supposed to/it's not right and they could get into trouble for doing that"

<u>Unwanted activity</u>. Child might have to do something(s) that they do not want to do that is considered benign and/or usual/typical:

15 UNWANTED ACTIVITY

- "they [babysitter] tell me what to do/tells me to take a nap"
- "when they [relatives] want to take me to K'mart."

<u>Visceral reaction</u>. Child does not like it (e.g., "its disgusting"):

16 VISCERAL REACTION

- [someone asking child to touch p.p.] "idk/idk/I probably wouldn't like it"
- "IDK/I just don't like it when doctors look at p.p."
- "I don't feel comfortable"
- "because it is gross"

<u>New/Novel/Unknown situation</u>. Child is fearful of new/novel/unknown situation or person. [Reminder: Child must express that he or she is fearful of the situation or person because it is new. Do not assume this content category for persons or situations that are inherently novel (e.g., strangers, first day of school) without the child explicitly expressing that he or she if fearful because it is unknown.]

17 NEW/NOVEL/UNKNOWN SITUATION

- "the first day [of school]/I don't know what my teacher's like"
- "when I'm going somewhere I've never been/[I'm scared of] where we're going to"
- "I don't know who they are really/I don't know them and haven't seen them before"

<u>Vague or irrelevant</u> responses. [Note: Only score this category if no other content category was mentioned in the child's entire response].

18 VAGUE RESPONSE

<u>IDK</u> - child doesn't know. [Note: Only score this category if <u>no other</u> content category was mentioned in the child's entire response].

19 IDK

C. DOES FEELING SCARED OR WORRIED ABOUT [THE FEAR] EVER STOP YOU FROM DOING SOMETHING THAT YOU WANT TO DO?

7. 1 = YES 0 = NO

If NO, then draw a line through 8 - 11 and proceed to code D. If YES, then code the rest of C.

- 8. ACTIVITY ONE CATEGORY (see description below)
- 9. ACTIVITY TWO CATEGORY (see description below)

ACTIVITY CATEGORIES

- 1 playing [e.g., playing nintendo; playing when child has to study]
- going to or being at a <u>specified</u> destination [e.g., library, store, friend's house, up the hill, etc.]
- 3 going to a <u>nonspecified</u> destination [e.g., going or being outside]
- 4 bike riding (to a <u>nonspecified</u> destination)
- 5 staying home alone
- 6 sleeping [e.g. going to bed]
- 7 homework/work/reading
- 8 chores
- 9 strangers [e.g., people whom child doesn't know]
- 10 -discarded
- vague response/should have been prompted/possibly irrelevant or category NEC
- 12 idk
- 10. FREQUENCY ONE Circled response of "how often" corresponding to activity one.
- 11. FREQUENCY TWO Circled response of "how often" corresponding to activity two.
 - D. DO YOU EVER WORRY OR FEEL SCARED ABOUT THAT [THE FEAR] WHEN YOU ARE NOT AROUND THE FEAR?

12. $1 = \underline{YES}$ $0 = \underline{NO}$ or if worry exists around child's fear

Make sure that the <u>when</u> response of the child's worry is <u>not</u> when the child is actually around the child's fear or worry that was expressed in A. and B. If the fear is present, then score as 0.

If NO, then draw a line through 13 - 17 and begin to code the next question. If YES, then proceed with D.

13. WORRY FREQUENCY Circled response of "how often" worry.

14. through 17. WORRY DESCRIPTION(S) of child's <u>expression(s)</u> of "when they worry." Score all relevant worry descriptions (that are defined below).

WORRY DESCRIPTIONS

- 1 <u>IMMEDIATE</u> the child worries when he/she is anticipating a worry that will possibly occur in the immediate future.
 - [letting a doctor look at p.p.] "the day or two before I go to the doctor"
 - "when it's the day before they come over"
- 2 {discarded}
- <u>ENVIRONMENT</u> the child worries when something in the his/her environment reminds the child of the fear: A stimulus in their environment.
 - [worried about uncle getting hurt in the Gulf War] "when I'm watching the war on the T.V."
 - [worried about Aunt dying] "when she [the aunt] is in the hospital"
 - [scared of going to school] "on the first day of school"
 - "when I hear she is making a cake"
- 4 <u>CHILD</u> the child seems to generate the worry himself/herself, that is, nothing in his/her environment seems to be triggering the worry.
 - "at bedtime"/ "eating"/ "when I don't have anything else to think about"/ "playing game"
- 5. <u>IDK/VAGUE</u> the child's response for when they worry is "idk" or too vague to code.



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