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The purpose of this qualitative collective case study was to explore the experiences of four key internal stakeholders who are involved with a school-based child sexual abuse prevention program in a southeastern state in the United States. In order to explore the experiences of participants, in-depth, semi-structured interviews were conducted. After the data were collected, transcribed, and coded by a qualified research team, three main themes emerged from this study. These themes highlighted the importance of school-based child sexual abuse prevention education, various program impacts resulting from child sexual abuse prevention and intervention within a school setting, and barriers to implementation of child sexual abuse prevention programs in school settings. Implications for professional school counselors, including how they can assist with the implementation of child sexual abuse prevention education, are discussed. Finally, inherent limitations to the research design and implications for future studies are addressed.

Keywords: sexual abuse, prevention, children, collective case study, professional school counselors

In 2017, there were 57,964 reports of child sexual abuse (CSA) in the United States (U.S. Department of Health and Human Services [DHHS], 2018). However, the incidence of CSA is likely higher, as cases of sexual abuse often go unreported (Leclerc & Wortley, 2015; Wurtele, 2009). Overall, between 7.5%–16% of males and 19.7%–25% of females report a history of CSA (Dube et al., 2005; Pereda, Guilera, Forns, & Gómez-Benito, 2009), and approximately 39 million adults in the United States are CSA survivors (Child Molestation Research and Prevention Institute, 2015). More than 3 million children are victims of CSA, with a mean age of onset of 11.2 years of age (Broman-Fulks et al., 2007). CSA has been linked to a variety of health and mental health issues, including substance abuse, suicide attempts, sexual revictimization, high-risk sexual behavior, anxiety, depression, cognitive disturbances, post-traumatic stress disorder (PTSD), gastrointestinal issues, and chronic pain (Dube et al., 2005; Irish, Kobayashi, & Delahanty, 2010; Lalor & McElvaney, 2010; Sabella, 2016; Wurtele, 2009). Therefore, because of the high incidence and resulting consequences of CSA, prevention is paramount (Letourneau, Eaton, Bass, Berlin, & Moore, 2014).

Abel and Harlow (2001) reported that CSA perpetrators represent a variety of ethnicities and socioeconomic groups. Ninety percent of perpetrators know their victims; only 10% of perpetrators sexually abuse children unknown to them. Sixty-eight percent of CSA perpetrators sexually abuse children in their own families (e.g., biological children, stepchildren, nieces, nephews, grandchildren) and 40% sexually abuse children within their social circle (Abel and Harlow, 2001). Additionally, 5.9% of all girls and 0.3% of all boys in the United States are sexually abused by a known adult (Finkelhor, Turner, Shattuck, & Hamby, 2013). CSA perpetrators who sexually abuse boys report an average of 10.7 victims as compared to 5.2 victims of perpetrators who sexually abuse girls (Abel & Harlow, 2001). Those who sexually abuse both boys and girls report an average of 27.3 victims (Abel & Harlow, 2001).

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Professional school counselors play an important role in CSA prevention. They are federally mandated to report suspected cases of abuse (Federal Child Abuse Prevention and Treatment Act, 2010), including CSA, and also provide counseling services to victims and organize advocacy efforts (American School Counselor Association [ASCA], 2015; Sikes, 2008). Furthermore, professional school counselors are in the position to address barriers and support the implementation of CSA prevention programs within their schools. These school-based prevention efforts are imperative; despite the high incidence of children who are sexually abused, research indicates that many parents do not educate their children about CSA at home (Kenny, Capri, Thakkar-Kolar, Ryan, & Runyon, 2008). Therefore, it is vital that evidence-based CSA prevention programs are provided within the schools so that children have an opportunity to gain knowledge and personal safety skills.

In 1995, 67% of children ages 10–16 reported that they had participated in a school-based CSA prevention program (Finkelhor & Dziuba-Leatherman, 1995). However, this percentage has significantly declined in recent years because of increased focus on other topics, such as bullying prevention, standardized testing, substance use, and intimate partner violence (Morris et al., 2017; Wurtele, 2009). Despite this shift, the implementation of CSA prevention programs within school systems remains ideal because of the ability to concurrently reach multiple children in that setting (Finkelhor, 2009; National Sexual Violence Resource Center [NSVRC], 2011; Tutty, 2000; Wurtele, 2009). However, in recent years, there has been resistance to establishing CSA prevention education within the schools, as some believe that talking about sexual abuse is not appropriate in a school setting (NSVRC, 2011; Wurtele, 2009). Additionally, according to Topping and Barron (2009), CSA prevention programs might be limited because of constraints on funds and time. Some CSA prevention education critics also argue that these types of programs place an unfair burden on the child to report or prevent CSA attempts and that it may not be appropriate to expect children to defend themselves against perpetrators (Finkelhor, 2007; Rudolph & Zimmer-Gembeck, 2018). However, many opponents have “offered little evidence that support their claims of potential negative side-effects” (Kenny et al., 2008, p. 50). In fact, Walsh, Zwi, Woolfenden, and Shlonsky (2015) found in their meta-analysis of several school-based CSA prevention programs “evidence of improvements in protective behaviours and knowledge among children” (p. 2). Furthermore, this increase in knowledge and skill was seen in children regardless of the type of CSA prevention program that was implemented. A study conducted by Gibson and Leitenberg (2000) provided further evidence of the effectiveness of CSA prevention programs, as they found that 9% of participants who had participated in a school-based prevention program were sexually abused compared to 16% who had never participated in CSA prevention.

In order to effectively implement CSA prevention programs within the schools, a better understanding of these challenges and barriers needs to be gained. Findings from this study may promote awareness, enhance programming, and contribute to prevention efforts for CSA. The purpose of this collective case study research was to explore the experiences of several key internal stakeholders who are currently involved with a CSA prevention program in a southeastern state in the United States. The primary research question answered by this study was: How do key internal stakeholders who are involved with a school-based CSA prevention program describe their experiences with program implementation?

Method

Collective case study research (Yin, 2003) was utilized to explore the experiences of internal stakeholders and their views of a school-based CSA prevention program. The case study tradition focuses upon the constructivist paradigm in which the truth is relative and reliant on one’s unique

perspective (Baxter & Jack, 2008). According to Creswell (2007), in a collective case study, “the inquirer purposefully selects multiple cases to show different perspectives on the issue” (p. 74), and this type of approach is often utilized when the unit of analysis is a program. According to Patton (2002), a case study may represent one single program or case. However, within that single program case, a researcher can conduct case studies of several participants. Utilizing the qualitative case study tradition facilitates an issue being explored through multiple lenses, rather than just one (Baxter & Jack, 2008). This approach helps “multiple facets of the phenomenon to be revealed and understood” (Baxter & Jack, 2008, p. 544).

Participants

Purposive and criterion sampling (Creswell, 2007) were utilized to recruit four key internal stakeholders for this study. Each participant had been involved with the program for at least one year (range = 1–25 years). For the purpose of this study, a *stakeholder* meant “people or small groups with the power to respond to, negotiate with, and change the strategic future of the organization” (Eden & Ackermann, 1998, p. 117). Two participants included in this study were current board members and two were current staff members.

Setting

This nonprofit CSA prevention organization is dedicated to preventing CSA through the education of children. Their 45-minute performance for children in kindergarten through fifth grade features a puppet who provides children with guidance on how to respond when faced with potentially dangerous situations. A safety net of professionals from Child Protective Services (CPS) and the police department, in addition to school counselors, are present at every performance so that any child who comes forward to disclose sexual abuse is properly cared for with the correct protocols in place. This CSA prevention program has resulted in the arrest and incarceration of 158 CSA perpetrators.

Researchers

The principle investigator (PI) conducting this study is a Caucasian female in her thirties. She is a licensed professional counselor and has a PhD in counselor education and supervision. The PI has experience treating children who have been sexually abused and adults who were sexually abused during childhood. Two additional researchers assisted with research design and data analysis. Both researchers have doctoral degrees in counselor education and supervision and are licensed professional counselors. One of the researchers has a master’s degree in school counseling and the other researcher has an EdS in school psychology. They are knowledgeable in treating children who have been sexually abused and have experience working within school settings. Engaging a research team of three researchers helped to reduce researcher bias and generated triangulation for the research study (Creswell & Poth, 2018).

Data Collection

Individual interviews were conducted in a southeastern U.S. city. The PI met with participants in a confidential space and informed consent was reviewed and signed prior to the commencement of data collection. After informed consent was given, the PI individually interviewed participants using a semi-structured interview guide pertaining to their experiences as key internal stakeholders involved with this CSA prevention organization. These interviews were audiotaped and transcribed verbatim and lasted approximately 30–45 minutes. All participants were assigned a unique identifier (number) in order to protect confidentiality.

Data Analysis

Transcripts were initially read through by the researchers to gain an overall familiarity with them.

The researchers then engaged in content analysis by open-coding the data (Patton, 2002). Through this analysis, patterns and themes were identified and overlapping data was deleted. Researchers developed coding schemes independently and then together they compared and discussed similarities and differences (Patton, 2002). Word tables were utilized to organize the data from each individual case (Yin, 2014). The analysis of these individual word tables allowed researchers to draw cross-case conclusions. Data across cases were analyzed and similarities and differences were noted (Eisenhardt, 1989; Miles & Huberman, 1984).

Strategies for Trustworthiness

In an effort to achieve trustworthiness of the data, triangulation was attained (Baxter & Jack, 2008) as multiple sources were used to collect data, including semi-structured individual interviews, demographic sheets, and program documents. Clarifying researcher bias was another strategy employed for trustworthiness as bracketing, through the use of reflexive journals, was utilized by the researchers (Tufford & Newman, 2010). Bracketing was completed prior to data collection so that the researchers were made aware of their assumptions and biases. Finally, a thick description, as defined by Patton (2002) as having “detailed description and rich quotations” (p. 438), was used as an overreaching strategy to increase the trustworthiness of this study.

Results

A total of three themes emerged from the data analysis: (1) importance of school-based CSA prevention education, (2) program impact within a school setting, and (3) barriers to implementation of CSA prevention within school systems.

Theme 1: Importance of School-Based CSA Prevention Education

This theme includes the participants’ perspectives on the importance and value of CSA prevention education within the school setting. The following sub-themes are included in this section: (1) children and (2) parents and teachers.

Children. The majority of participants discussed the importance of child abuse education so children could implement good boundary setting and learn the language they need in order to express themselves if they feel they are at risk. When outlining the importance of educating children on this issue, one participant discussed how if children are not educated about boundaries and body safety starting at a young age, this could potentially leave a gap for this type of abuse to take place. She stated, “They groom them at a young age and so they break down their resistance and by the time they get to middle and high school, they are assimilated already into this lifestyle and so they think it is normal.” Another participant had similar thoughts and discussed the importance of empowering children to protect themselves. She stated, “We can’t protect them all the time, and I think it is important to give them the knowledge that what’s happening to them is wrong and that they can make a difference by saying *no*.” Likewise, another participant discussed how teaching children to protect themselves from predators is “fundamental.” She went on to ask the question, “How do you go to school and learn to become a successful adult and have good decision-making if you are carrying this around?” Another interview revealed, “At every turn around every corner, there is someone who is looking to take advantage of that child,” and that child needs to understand how to protect him- or herself. This participant went on to describe the importance of equipping children with the language they need to express what is happening to them. He stated, “What kind of language does a 6-year-old child have to be able to tell an adult that they are being sexually abused? They don’t have a way to even express what’s happening to them.”

Parents and teachers. Many participants identified a significant need for parents and teachers to become educated on how to talk with children about these issues. One participant discussed how many parents do not know how to educate their children or how to appropriately respond if a child discloses sexual abuse. She stated, “Parents need to not just be talking about this big, bad rapist” and discussed how parents need to educate their children beyond “stranger danger.” A participant also touched on the importance of educating parents: “I do think we need to be more aggressive with the adult education piece . . . it’s an adult problem, it needs an adult solution.” Another participant shared similar thoughts and discussed how parents should be providing this type of education to their children at home. He stated, “As parents, as people in authority positions, we should be the ones answering those questions versus them hearing it from their classmate, or in the streets, or in the locker room.”

Another participant discussed how some parents might be averse to having their child participate in CSA prevention education at school. He discussed how these parents might be concerned about discussing CSA with children who have not previously been exposed to sex and how perhaps this type of discussion could pique their curiosity. This participant countered this by stating, “What better way to do it in a controlled environment and you can answer the questions that they may have.” Another participant also discussed how some parents do not believe their children should learn about CSA prevention at school, but that many of these children are simply not being educated at home. He stated, “What those parents don’t understand is that while they may be proactive in what they’re doing in educating their children about these types of things, 90% of the kids in schools today are not getting this education at home.” Another participant went on to discuss how teachers also do not get enough training on this topic. He stated, “That’s something that’s got to change. They got to get the training that surrounds this issue to be able to understand the issue and wrap their head around what’s happening in their classrooms.”

Theme 2: Program Impact Within a School Setting

Many of the participants discussed how CSA prevention programs within the schools can provide children with the courage to speak up and learn how to protect themselves from potentially dangerous situations. One participant discussed the appreciation he has for how this particular CSA prevention program creates a support system so that children may feel comfortable coming forward and disclosing sexual abuse. He highlighted how law enforcement officers, social services, and school administrators are present throughout the performance “so you have a support system that is right there that says . . . *you can have the courage to share if something like that has happened.*” Another participant shared similar thoughts and discussed how this particular CSA prevention program is “different” because of the safety net of professionals they have available throughout the production.

Two participants shared their personal experiences with witnessing CSA disclosures as a result of the program. One participant discussed her personal experience of watching children come forward and disclose sexual abuse after participating in the program. She stated, “I really believe the program works. In 25 years, I have seen kids come forward, you know . . . and kids learn how to prevent it from happening.” Another participant described how he had witnessed children disclose prior and current sexual abuse after participating. He stated that when children come forward and tell a teacher, “if we can . . . save one child from the horror of being sexually abused by an adult, then this program is worth its weight in gold.”

Numerous perpetrators have been prosecuted because of disclosures that occurred after children participated in this program. One participant stated, “Having 158 perpetrators prosecuted comes from when she [the director of the program] was in all the elementary schools here in the city.”

However, this may be underestimated, as disclosures and prosecutions as a result of the program were difficult to track because of confidentiality and the sensitive nature of the information. Another participant also discussed prosecutions as a result of this program. He stated, "We're seeing the prosecutions go up because there's been more exposure of what has taken place in the dark, and so either way, it is a great success."

Theme 3: Barriers to Implementation Within School Systems

This theme includes the participants' perspectives on the barriers and obstacles toward implementing this CSA prevention program. The following sub-themes are included in this section: (1) funding issues, (2) a taboo topic and negative attitudes, (3) intervention is stressed, and (4) community support.

Funding issues. Funding was identified by all participants as a major barrier to implementing CSA prevention programs, as many school systems do not have funding allocated to support this effort. One participant stated, "I'm researching grants that we can apply for and there is plenty of grant money out there for treatment, but not prevention." Another participant believed that perhaps fundraising for this cause is difficult because the topic makes many people "feel very uncomfortable." She further stated, "Everybody's opening up their wallets for ALS, everybody's opening up their wallets for autism, and those are all great causes . . . but CSA prevention is removed from them." A third participant discussed how important it is to "champion legislative funding" and discussed how this is "key" to the implementation of CSA prevention programs within the schools in the future.

A taboo topic and negative attitudes. Participants also discussed how sexual abuse is a "taboo" topic that is often viewed very negatively and, therefore, is often not discussed. In return, this leads to barriers to implementing CSA prevention programs. One participant discussed how many individuals seem to be in denial about the prevalence of CSA. She discussed how people need to "just open up the communication on this really disgusting tabooed subject. People don't want to talk about it, people don't want to hear about it. It's so uncomfortable." She went on to state, "Someone coined the phrase, 'Not in My Backyard.' It's in every backyard." Another participant shared similar thoughts. He discussed how some are opposed to CSA prevention programs as they believe these programs are similar to sexual education or that the topic is not "age appropriate." However, he suggested that these individuals "would be amazed at what children already know and would be amazed at what they're being exposed to already."

Participants noted that attitudes about CSA prevention tend to be negative and this hinders efforts in implementing these types of programs. For instance, when one participant was asked what she would like to see changed regarding CSA prevention programs, she stated, "What would I see changed? Just people's attitudes towards it." Another participant explained how people working within the school systems often negatively view CSA prevention programs. He discussed how difficult it can be to get "buy-in from school administrators when school administrators know they have kids in their school who are being sexually abused and they know that if they see this program that they are going to possibly come forward." He went on to discuss how CSA disclosures often result in a "tremendous amount of paperwork for them [school administrators], it creates huge logistical issues like dealing with parents and dealing with CPS and the police" and how this could potentially fuel resistance to implementing these programs. Another participant discussed how their senator supports CSA prevention education, but only in middle and high schools. He stated, "There is a reason for that . . . whether they believe that the elementary school students would not be an appropriate age demographic or whether they thought they would get some resistance, maybe from parents."

Intervention is stressed. Participants emphasized how too much focus is often placed on the intervention of CSA, whereas more attention needs to be focused on prevention. When discussing what he would tell people when explaining why CSA prevention is important, one participant said he would invite them to visit juvenile court and watch as he puts a child on the stand who must disclose CSA. He challenges people to think about how these children must find the courage to relive their experience all over again on the witness stand “in front of the judge, in front of the jury, in front of strangers . . . then you tell me how important it is that we educate our kids about child sexual abuse prevention.” Another participant said, “I think that as the general population becomes more educated about the fact that you can prevent the issue from happening, I think they could see that it’s more important to put money into prevention than treating something.” This participant went on to explain the importance of “getting people interested in prevention more than just putting the fire out once the fire starts . . . I think people wait until it’s too late and then they rather put out the fire and until it becomes a fire, they don’t want to have to deal with it.” A third participant shared similar thoughts: “It needs to be more preventive and more proactive and we need to start talking about it.”

Community support. Community support was identified by participants as being difficult to come by but essential to the successful implementation of CSA prevention programs. One participant discussed how “there are so many fundraisers . . . and you have to pick and choose what you are passionate about,” noting that not too many people choose to support CSA prevention. Another participant discussed the importance of networking with community partners in order to gain additional support. In particular, he highlighted the importance of developing trust between the organization and community partners. He stated, “When you know a person and you have a relationship with a person, it’s easier to trust them to always do the right thing.” A third participant discussed his personal efforts related to attempting to gain additional community support: “Every opportunity I get to talk to a person about the program, I do . . . I ask them to get in touch with me if they have any questions.”

Discussion

In this study, the participants emphasized that addressing the often taboo topic of sexual abuse with children is imperative. They discussed how the topic of sexual abuse is frequently avoided, especially by parents and guardians—a trend that is confirmed by the professional literature (Kenny et al., 2008). The participants noted that this avoidance hinders opportunities for both prevention and intervention in the lives of children. Notably, with education, parents and guardians are empowered to teach their children about ways to avoid sexual abuse. These discussions are crucial to preventing harm to children and providing them with the knowledge and awareness they need to protect themselves. Additionally, participants discussed how the focus on “stranger danger” by parents neglects the most common perpetrators of sexual abuse—acquaintances. Deblinger, Thakkar-Kolar, Berry, and Schroeder (2010) supported this finding, as they also found that the parents who discuss CSA with their children can erroneously focus on the dangers of interacting with strangers and not with individuals the child may already know. Additionally, Deblinger et al. found that the number of parents who stated that they desired to educate their children about CSA at home was more than those who had actually followed through with this task. Therefore, parents may lack the knowledge they need in order to adequately address this issue with their children. Professional school counselors are in an ideal position to help fill this void by developing educational opportunities for parents and guardians, so they feel better equipped to talk with their children about CSA. It would be prudent to include information about perpetrators so that parents do not solely focus on strangers when discussing safety with their children.

Professional school counselors also can play an important role in the education of teachers, administrators, and other school staff. The participants in this study discussed how there may be some resistance on behalf of school administrators to implement CSA prevention programs because of fear about the logistical issues that may result from disclosures. Therefore, as also discussed by Sikes (2008), it is important that a protocol is in place for when children disclose sexual abuse. Professional school counselors can assist with the development of this protocol and can educate school administrators and teachers about how to appropriately respond to and report disclosures of CSA. Professional school counselors should clearly define which individuals are mandated to report suspected CSA to CPS and in what timeframe the report must be made. A reporting form could be developed in order to streamline this process (see Sikes, 2008). Additionally, professional school counselors should provide educational resources to teachers and school administrators on how to identify signs of CSA.

In response to the taboo placed on discussing CSA, the participants described how their program offers stakeholders a vehicle for openly discussing CSA, as it provides a forum for creating awareness regarding the dangers of sexual abuse. In addition, the participants were proud of the community awareness that the program created, allowing for the prosecution of child sex abusers in the community. CSA prevention should not only include education of children, but also the general public, professionals, and other stakeholders (Wurtele, 2009). Professional school counselors can be an important vehicle for this type of collaboration. The participants all discussed how having social services, the police, and CPS as part of their program helped to provide a safety network for when CSA disclosures were made. According to the NSVRC (2011), "prevention programs designed for children are only one of many components of a successful community effort to prevent CSA. The burden of prevention should also be distributed across community members, organizations, and social structures" (p. 3). Participants also discussed how imperative it is to develop strong community partnerships to work together to help prevent CSA. Therefore, it could be noteworthy for professional school counselors to focus on building these partnerships so that funding and support may be bolstered for such programs to continue or be implemented within schools.

The participants also discussed how intervention is often stressed and prevention is overlooked in the treatment of CSA. This could be due to limited scholarly research that provides evidence for the effectiveness of CSA prevention programs (Rudolph & Zimmer-Gembeck, 2018). CSA prevention programs characteristically utilize a risk-reduction approach in which children are educated about sexual abuse and learn the skills necessary to avoid and report abuse (NSVRC, 2011). However, empirical support of these programs is limited (Lynas & Hawkins, 2017; Topping & Baron, 2009), as CSA prevention programs are difficult to measure (Lynas & Hawkins, 2017). In response to the lack of outcome data, the NSVRC has put forth that "additional rigorous evaluations of child sexual abuse prevention programs are needed" (2011, p. 6). Additionally, few follow-up studies have been conducted in order to determine if knowledge from these prevention programs has been retained and, more importantly, whether children can apply this knowledge to real-world scenarios. Professional school counselors can assist with the development and implementation of research and program evaluation studies in order to provide additional evidence in support of CSA prevention programs within the schools. Implementation of research within a school setting is no easy feat, as multiple approvals are necessary in order to ensure research participants are not harmed and that research is conducted in an ethical manner. Therefore, school administrators can be hesitant to approve research conducted within this setting. Professional school counselors can collaborate with administrators and make a strong case for why this type of research is absolutely necessary, so that more evidence-based CSA prevention programs are developed.

Program fidelity is another issue that has been identified within the literature when it comes to the evaluation of CSA prevention programs (Johnson, 1994; Lynas & Hawkins, 2017). Program evaluation research has indicated that when teaching about CSA, teachers can leave out content because of their own personal discomfort. This type of modification to program material could potentially impact findings of program evaluations and might minimize program effectiveness. Therefore, when educating teachers about CSA prevention, professional school counselors could discuss how sensitivities may arise while teachers deliver this type of content to their students, as well as how to ensure they are adhering to the protocol of the selected program (Lynas & Hawkins, 2017). If personal sensitivities arise because of a teacher's own history of CSA, it may be prudent for the professional school counselor to connect these individuals with mental health providers within their community.

Limitations and Implications for Future Research

This study lays the groundwork for qualitative as well as quantitative analysis of CSA prevention programs and other similar programs that exist. The results of qualitative research designs inherently are limited in their ability to be extended to a wider population (Atieno, 2009). Our case study design was limited to four participants. In addition, as the researcher is the primary research instrument in our qualitative research design, our biases could have influenced both data collection and analysis (Anderson, 2010). Thus, the validity of the findings might be called into question.

Additional quantitative research might survey participants' understanding of the material presented both before and after the program, measuring the knowledge that they gain. Further, a future phenomenological qualitative study might examine the experiences of the participants themselves as they process the material they encounter in a CSA prevention program. Future qualitative research studies might explore parents' perceptions of CSA education and the ways in which they are currently addressing this issue with their children. This exploration also could highlight areas that need further parent education in order to help them prevent CSA in the lives of their children. Finally, future studies could focus on the experiences of professional school counselors as they work toward the prevention of CSA.

Conclusion

CSA is a major public health concern affecting thousands of children in the United States (U.S. DHHS, 2018). Although research is limited to the efficacy of CSA prevention programs, outcome data indicates that effective programs promote education and awareness, decrease stigma, and increase rates of reporting sexual abuse. Results from this collective case study yielded three central themes: the importance of school-based CSA prevention education, program impact within a school setting, and barriers to the implementation of CSA prevention within the schools. The data that emerged from the participants provide valuable perspectives on the challenges and benefits of CSA prevention programs and how professional school counselors may advocate for their implementation within the schools.

Conflict of Interest and Funding Disclosure

The authors reported no conflict of interest or funding contributions for the development of this manuscript.

References

- Abel, G. G., & Harlow, N. (2001). *The stop child molestation book: What ordinary people can do in their everyday lives to save three million children*. Philadelphia, PA: Xlibris.
- American School Counselor Association. (2015). *The school counselor and child abuse and neglect prevention*. Retrieved from https://www.schoolcounselor.org/asca/media/asca/PositionStatements/PS_ChildAbuse.pdf
- Anderson, C. (2010). Presenting and evaluative qualitative research. *American Journal of Pharmaceutical Education, 74*(8), 1–7. doi:10.5688/aj7408141
- Atieno, O. P. (2009). An analysis of the strengths and limitation of qualitative and quantitative research paradigms. *Problems of Education in the 21st Century, 13*, 13–18.
- Baxter, P. E., & Jack, S. M. (2008). Qualitative case study methodology: Study design and implementation for novice researchers. *The Qualitative Report, 13*, 544–559.
- Broman-Fulks, J. J., Ruggiero, K. J., Hanson, R. F., Smith, D. W., Resnick, H. S., Kilpatrick, D. G., & Saunders, B. E. (2007). Sexual assault disclosure in relation to adolescent mental health: Results from the National Survey of Adolescents. *Journal of Clinical Child and Adolescent Psychology, 36*, 260–266. doi:10.1080/15374410701279701
- Child Molestation Research and Prevention Institute. (2015). *Tell others the facts*. Retrieved from http://www.childmolestationprevention.org/pages/tell_others_the_facts.html
- Creswell, J. W. (2007). *Qualitative inquiry and research design: Choosing among five approaches* (1st ed.). London, UK: SAGE.
- Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). Thousand Oaks, CA: SAGE.
- Deblinger, E., Thakkar-Kolar, R. R., Berry, E. J., & Schroeder, C. M. (2010). Caregivers' efforts to educate their children about child sexual abuse. A replication study. *Child Maltreatment, 15*, 91–100. doi:10.1177/1077559509337408
- Dube, S. R., Anda, R. F., Whitfield, C. L., Brown, D. W., Felitti, V. J., Dong, M., & Giles, W. H. (2005). Long-term consequences of childhood sexual abuse by gender of victim. *American Journal of Preventive Medicine, 28*, 430–438. doi:10.1016/j.amepre.2005.01.015
- Eden, C., & Ackermann, F. (1998). *Making strategy: The journey of strategic management*. London, UK: SAGE.
- Eisenhardt, K. M. (1989). Building theories from case study research. *The Academy of Management Review, 14*, 532–550. doi:10.2307/258557
- Federal Child Abuse Prevention and Treatment Act of 2010, 42 U. S. C. A. § 5106g (2010).
- Finkelhor, D. (2007). Prevention of sexual abuse through educational programs directed toward children. *Pediatrics, 120*, 640–645. doi:10.1542/peds.2007-0754
- Finkelhor, D. (2009). The prevention of childhood sexual abuse. *The Future of Children, 19*(2), 169–194. doi:10.1353/foc.0.0035
- Finkelhor, D., & Dziuba-Leatherman, J. (1995). Victimization prevention programs: A national survey of children's exposure and reactions. *Child Abuse & Neglect, 19*(2), 129–139. doi:10.1016/0145-2134(94)00111-7
- Finkelhor, D., Turner, H. A., Shattuck, A., & Hamby, S. L. (2013). Violence, crime, and abuse exposure in a national sample of children and youth: An update. *JAMA Pediatrics, 167*, 614–621. doi:10.1001/jamapediatrics.2013.42
- Gibson, L. E., & Leitenberg, H. (2000). Child sexual abuse prevention programs: Do they decrease the occurrence of child sexual abuse? *Child Abuse and Neglect, 24*, 1115–1125. doi:10.1016/S0145-2134(00)00179-4
- Irish, L., Kobayashi, I., & Delahanty, D. L. (2010). Long-term physical health consequences of childhood sexual abuse: A meta-analytic review. *Journal of Pediatric Psychology, 35*, 450–461. doi:10.1093/jpepsy/jsp118
- Johnson, B. (1994). Teachers' role in the primary prevention of child abuse dilemmas and problems. *Child Abuse Review, 3*, 259–271. doi:10.1002/car.2380030405
- Kenny, M. C., Capri, V., Thakkar-Kolar, R. R., Ryan, E. E., & Runyon, M. K. (2008). Child sexual abuse: From prevention to self-protection. *Child Sexual Abuse Review, 17*, 36–54. doi:10.1002/car.1012

- Lalor, K., & McElvaney, R. (2010). Child sexual abuse, links to later sexual exploitation/high-risk sexual behavior, and prevention/treatment programs. *Trauma, Violence, & Abuse, 11*(4), 159–177. doi:10.1177/1524838010378299
- Leclerc, B., & Wortley, R. (2015). Predictors of victim disclosure in child sexual abuse: Additional evidence from a sample of incarcerated adult sex offenders. *Child Abuse & Neglect, 43*, 104–111. doi:10.1016/j.chiabu.2015.03.003
- Letourneau, E. J., Eaton, W. W., Bass, J., Berlin, F. S., & Moore, S. G. (2014). The need for a comprehensive public health approach to preventing child sexual abuse. *Public Health Reports, 129*, 222–228. doi:10.1177/003335491412900303
- Lynas, J., & Hawkins, R. (2017). Fidelity in school-based child sexual abuse prevention programs: A systematic review. *Child Abuse & Neglect, 72*, 10–21. doi:10.1016/j.chiabu.2017.07.003
- Miles, M. B., & Huberman, A. M. (1984). *Qualitative data analysis: A sourcebook of new methods*. Thousand Oaks, CA: SAGE.
- Morris, M. C., Kouros, C. D., Janecek, K., Freeman, R., Mielock, A., & Garber, J. (2017). Community-level moderators of a school-based childhood sexual assault prevention program. *Child Abuse & Neglect, 63*, 295–306. doi:10.1016/j.chiabu.2016.10.005
- National Sexual Violence Resource Center. (2011). *Child sexual abuse prevention: Programs for children*. Retrieved March 9, 2015 from https://www.nsvrc.org/sites/default/files/2012-03/Publications_NSVRC_Guide_Child-Sexual-Abuse-Prevention-programs-for-children.pdf
- Patton, M. Q. (2002). *Qualitative research and evaluation methods* (3rd ed.). London, UK: SAGE.
- Pereda, N., Guilera, G., Forns, M., & Gómez-Benito, J. (2009). The prevalence of child sexual abuse in community and student samples: A meta-analysis. *Clinical Psychology Review, 29*, 328–38. doi:10.1016/j.cpr.2009.02.007
- Rudolph, J., & Zimmer-Gembeck, M. J. (2018). Reviewing the focus: A summary and critique of child-focused sexual abuse prevention. *Trauma, Violence, & Abuse, 19*, 543–554. doi:10.1177/1524838016675478
- Sabella, D. (2016). Mental health matters: Revisiting child sexual abuse and survivor issues. *American Journal of Nursing, 116*(3), 48–55. doi:10.1097/01.NAJ.0000481280.22557.45
- Sikes, A. (2008). A school counselor's guide to reporting child abuse and neglect. *Journal of School Counseling, 6*(25).
- Topping, K. J., & Barron, I. G. (2009). School-based child sexual abuse prevention programs: A review of effectiveness. *Review of Educational Research, 79*, 431–463. doi:10.3102/0034654308325582
- Tufford, L., & Newman, P. (2010). Bracketing in qualitative research. *Qualitative Social Work, 11*, 80–96. doi:10.1177/1473325010368316
- Tutty, L. M. (2000). What children learn from sexual abuse prevention programs: Difficult concepts and developmental issues. *Research on Social Work Practice, 10*, 275–300. doi:10.1177/104973150001000301
- United States Department of Health and Human Services. (2018). *Child maltreatment 2017*. Retrieved from <https://www.acf.hhs.gov/sites/default/files/cb/cm2017.pdf>
- Walsh, K., Zwi, K., Woolfenden, S., & Shlonsky, A. (2015). School-based education programmes for the prevention of child sexual abuse (review). *The Cochrane Library, 4*, 1–121.
- Wurtele, S. K. (2009). Preventing sexual abuse of children in the twenty-first century: Preparing for challenges and opportunities. *Journal of Child Sexual Abuse, 18*, 1–18. doi:10.1080/10538710802584650
- Yin, R. K. (2003). *Case study research: Design and methods* (3rd ed.). Thousand Oaks, CA: SAGE.
- Yin, R. K. (2014). *Case study research: Design and methods* (5th ed.). Thousand Oaks, CA: SAGE.