Child Sexual Abuse: Attitudes, Beliefs, and Actions Taken
Report Highlights

Author:
Stop It Now! Minnesota is a public health campaign engaging adults and communities in preventing the perpetration of child sexual abuse before a child is harmed and before an adult, youth, or child acts in a sexually inappropriate way towards a child. Stop It Now! Minnesota empowers adults to take positive action by:

- Increasing the public’s knowledge of the perpetration of child sexual abuse in Minnesota.
- Teaching adults the skills to recognize signs of sexually abusive behavior.
- Working with families, peers, and friends on how to intervene before a child is harmed.
- Challenging those who abuse and family who influence them to seek help, stop abusing, and face accountability.

Stop It Now! Minnesota commissioned a random digit dial survey of 500 residents of the seven county Twin Cities metropolitan area to measure attitudes, beliefs, and actions taken relating to child sexual abuse. Survey results will be used to tailor Stop It Now! Minnesota’s efforts to empower adults to take action to prevent child sexual abuse.

Call to Action:
This study shows that while awareness of child sexual abuse is high, there is a disconnect between awareness and action to prevent it. Adults are aware that most child sexual abuse is perpetrated by someone the child knows. Adults also know that abusers live in their communities, and how to recognize the signs of a child who has been abused. Adults don’t know how to recognize someone at risk to abuse and are unclear about what action to take when they are concerned about an adults’ behavior around children.

To prevent child sexual abuse before a child is harmed, adults need to recognize warning sign behaviors and intervene when they see adults or youth interacting inappropriately with children. Parents need to understand what sexual behaviors are common in children of various ages so they recognize uncommon behaviors that may be cause for concern. Adults need to know that specialty treatment works, is available for sexual behavior concerns, and how to access it. Adults need resources and support for taking action when they see warning sign behaviors in adults and youth.

Sponsored by Project Pathfinder, Inc. in collaboration with the Jacob Wetterling Foundation, the Midwest Regional Children’s Advocacy Center, the Minnesota Coalition Against Sexual Assault, the Minnesota Department of Corrections, the Minnesota Department of Health, Prevent Child Abuse Minnesota, the Sexual Violence Center and Survivors Network Minnesota. Stop It Now! Minnesota is supported by Grant/Cooperative Agreement Number 5U24HS059680-03 from the Centers for Disease Control and Prevention (CDC).
Primary Findings:

Awareness of child sexual abuse is high.
Stop It Now! Minnesota’s survey indicates that residents are aware of the issue of child sexual abuse and believe it is a problem in Minnesota. Nearly all residents accurately define child sexual abuse using their own words. Residents are familiar with basic facts including that most sexually abused children are abused by someone the child knows, for example a parent, neighbor, or relative. They also believe that adults who abuse children may live in their community.

Adults need to go beyond awareness of child sexual abuse to taking action to prevent child sexual abuse.

Residents are more familiar with signs of a sexually abused child than signs of an adult who has sexually abused.

Residents are familiar with signs of a child who has been abused. Recognizing abuse is important so the child gets the help they need to heal. To prevent child sexual abuse, adults also need to recognize and intervene when they see adults interacting inappropriately with children.

Residents express interest in a public health campaign focusing on warning signs of sexual behavior problems and how to take action when they see those signs. Residents prefer to receive this information through brochures (38.1%), stories in the media (24.6%), a web site (22.8%), or as a component of a class, like a parenting class (9.2%).

Residents are positive towards treatment.

Residents agree that abusers would like to receive help and that treatment would be helpful in stopping child sexual abuse, but are unclear where to refer them for help. About one in five (20.2%) would refer to police, one in 10 (10%) to child protective services and less than one in 10 (7.2%) to a counselor, human services, or Employee Assistance Program. Nearly four in 10 (37.8%) didn’t know anywhere to refer them.

To prevent child sexual abuse, people need to know that specialty treatment works, is available and how to access it.
Residents unclear about situations that involve sexual behavior between children or adolescents.

Almost two-thirds of residents agree that many sexually abused children are abused by other children or adolescents. Almost one-fourth (23.1%) disagreed with this statement, however.

When presented with several scenarios, residents generally agreed that scenarios in which adults expose themselves or touch a child in an inappropriate way are definitely sexual abuse. Residents are less confident about scenarios in which another child or teenager engages in inappropriate touching or sexual conduct with a younger child or teen.

Parents need accurate information to understand what sexual behaviors are common in children of various ages so they recognize behaviors that are uncommon and may be cause for concern.

Residents affected by child sexual abuse often didn’t tell adults and when they did tell, the abuse was often not reported to authorities.

Our current system relies on someone reporting sexually abusive behaviors. But, if children don’t tell and adults who are told don’t report, then many child sexual abuse cases never come to the attention of authorities. The results of this survey indicate that for every victim we are aware of, there are as many as fourteen more who have either not disclosed or whose disclosures have not been reported.

In addition to relying on children to report, we need to protect children before sexual abuse occurs. To do this we need to look at ways to encourage adults who have sexually abused a child to come forward, take responsibility, and get help to prevent further abuse.

Residents unclear about what action to take when concerned an adult may be sexually abusing a child.

A small proportion (3.0%) of residents surveyed had the experience of knowing an adult they were concerned may have been sexually abusing a child. When asked what action they took, almost one-third (32.2%) said they took no action relating to the abuse. Smaller proportions said they reported the abuse (15.8%), including calling the police (9.4%) or the local child protective services or DHS (6.4%); talked to the abuser or asked them about it (12.4%), talked with friends, doctors, or a minister or priest for advice (9.5%), or spoke with the child or the child’s parents to confirm the abuse (7.7%). Almost one fifth (17.1%) mentioned other actions, such as supporting another person who took action to prevent the abuse. Because the number of residents who answered this question was small, these findings should be interpreted cautiously.
**Survey Methodology**
Market Street Research of Massachusetts conducted this study. A total of 500 residents were surveyed (200 from Hennepin County, 100 from Ramsey, 50 each from Anoka, Dakota, and Washington County, and 50 total from Carver and Scott Counties). Respondents' telephone numbers were generated using the Random Digit Dialing (RDD) procedure. Interviewers randomly chose an adult age 18 or over to interview. Interviewing was conducted from March 5 to March 23, 2003. The response rate for this study was 32.2%.

Some counties were over-sampled to draw statistically accurate conclusions by county. To account for this disproportionate sampling, results were weighted based on actual population distribution. In addition, to factor for older residents being more likely to participate in telephone interviews, results were weighted to accurately reflect the actual age distribution in the survey area. Weighting is based on 2000 U.S. Census population estimates for each county surveyed.

All surveys involve a margin of error. The margin of error for this study is plus or minus 2.6 to 4.4 percentage points. Findings reported as significant indicate there is a 95% or greater chance the difference is real and not due to sampling error.

The full report is available at www.stopitnow.org/mn

**Demographics**
This survey collected information on respondents' sex, age, highest level of education, marital status, parental status, whether children under the age of 18 live in the home, and race and ethnicity. Our sample was compared to 2000 U.S. Census population estimates.

The chart below shows where survey respondents differ demographically from 2000 U.S. Census population estimates.

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<thead>
<tr>
<th></th>
<th>Survey Respondents</th>
<th>Census Estimates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>38.3%</td>
<td>48.6%</td>
</tr>
<tr>
<td>Women</td>
<td>61.7%</td>
<td>51.4%</td>
</tr>
<tr>
<td>White residents</td>
<td>89.4%</td>
<td>86.2%</td>
</tr>
<tr>
<td>Hispanic or Latino residents</td>
<td>1.5%</td>
<td>3.1%</td>
</tr>
<tr>
<td>African American or Black</td>
<td>3.0%</td>
<td>4.9%</td>
</tr>
<tr>
<td>Residents with Some College</td>
<td>79.3%</td>
<td>66.6%</td>
</tr>
<tr>
<td>Residents with Advanced Degree</td>
<td>20.2%</td>
<td>10.7%</td>
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