



Stewards of Children 1.0 Aggregate Report

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External Evaluators¹

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Preferred Citation²

OVERVIEW

This report summarizes an extensive evaluation of Stewards of Children (SOC) – a video-based sexual assault prevention training administered and supported across 11 sites in rural Oregon and Siskiyou County, California supported by The Ford Family Foundation (TFFF). Stewards of Children directly aligns with The Foundation’s Child Abuse Prevention and Intervention Grant Program and its objective to reduce physical, sexual, and emotional abuse of children in rural Oregon. In particular, Stewards was selected by TFFF for each of the following reasons: 1) it is one of few child sexual abuse prevention programs with promising empirical support; 2) it is scalable; and 3) has a growing presence in several Oregon counties.

Stewards of Children, developed by Darkness to Light, is a 2-hour video-based curriculum designed to educate adults from organizations and the general public on how to prevent, recognize, and react responsibly to child sexual abuse. Researchers have previously concluded that SOC increases knowledge about child sexual abuse, improves prevention-related attitudes, and increases participants’ expressed intentions to act in ways that can prevent child sexual abuse (Derrick, et al., 2011; Rheingold et al, 2007; Self-Brown, 2008). Researchers also have previously concluded that SOC is useful in both web-based and print formats, that improvement in knowledge persisted for 6 months, and in one study SOC seemed to increase reports to child protective services (Letourneau, Nietert, & Rheingold, 2016; Rheingold, et al., 2015).

¹ This is a Developmental Evaluation, conducted in close partnership with the Ford Family Foundation and including, in particular, Keavy Cook, TFFF Youth & Families Director, and Mary Ratliff, Protect Our Children Program Coordinator.

² Todahl, J., Barkhurst, P., Schnabler, S., Trevino, S., Cook, K., & Ratliff, M. (2018). *The Full Aggregate Report: A Comprehensive Evaluation of Stewards of Children in Rural Oregon*. The Center for the Prevention of Abuse and Neglect, University of Oregon.



THE RURAL OREGON EVALUATION

The Oregon Study is the first rural-focused statewide evaluation of Stewards of Children. The study, led by the University of Oregon's Center for the Prevention of Abuse and Neglect, was conducted in close partnership with Keavy Cook and Mary Ratliff, The Ford Family Foundation, using a Developmental Evaluation framework. This included shared development of evaluation questions, agreements and collaboration with research methods and strategies, joint decision-making across the evaluation period, shared collaboration with each SOC site, and monthly research team planning meetings.

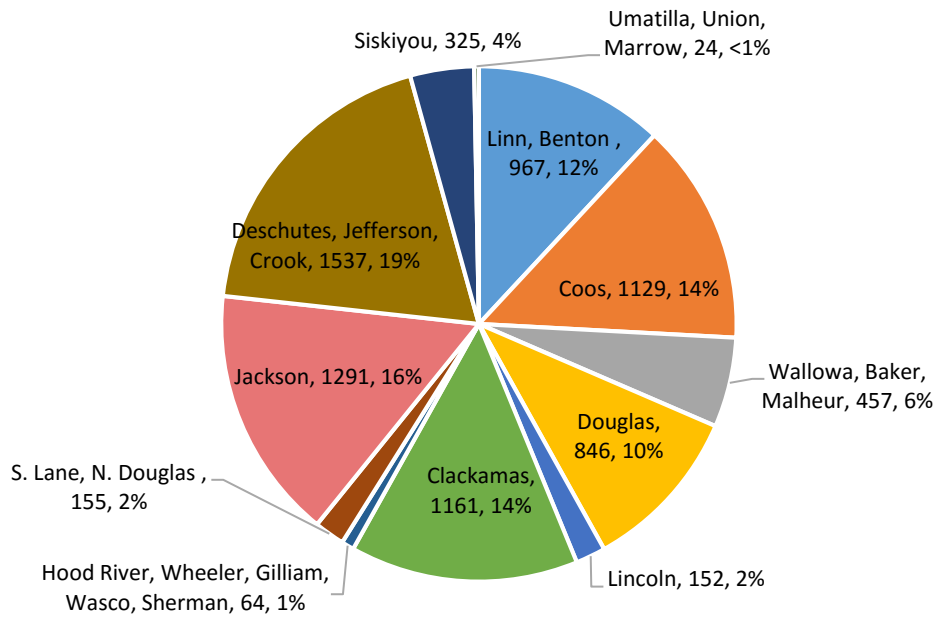
This evaluation explored previously unanswered questions relating to the implementation of SOC, including:

- 1) Do SOC participants demonstrate any changes in knowledge, attitudes and/or behavior simply from attendance at a SOC training?
- 2) If so, do changes in knowledge and attitudes persist 6, 12 and 18 months following the training?
- 3) If so, do changes in child sexual abuse prevention behaviors persist 6, 12 and 18 months following the training?
- 4) How do changes in knowledge, behaviors and attitudes among SOC attendees compare to a random selection of rural Oregonians who have had no exposure to SOC?
- 5) Does SOC contribute to an increase in reports to child protective services at Oregon sites of delivery?
- 6) What impact does SOC have on their own agency, on communities where it is delivered and among partner organizations?

THE FOCUS OF THIS REPORT: AT A GLANCE

This report is divided into two sections. Section I is a brief overview of key study findings. Section II is a comprehensive description of findings presented in a series of appendices. Data were collected between September, 2015 and March, 2018. The pre-post portion of the evaluation included 8,108 participants in 10 sites throughout rural Oregon and one in Siskiyou, California. The sites and the number of individuals trained is depicted below. This report also summarizes a) focus group interviews, b) 18-month longitudinal data collected among a randomly selected subset of the full participant group, c) a phone survey among randomly selected rural Oregonians, and d) an evaluation of the impact of SOC on reports to child protective services.

Cumulative Pre-Post Surveys Received by Site (n = 8,108)



SECTION I: KEY STUDY FINDINGS

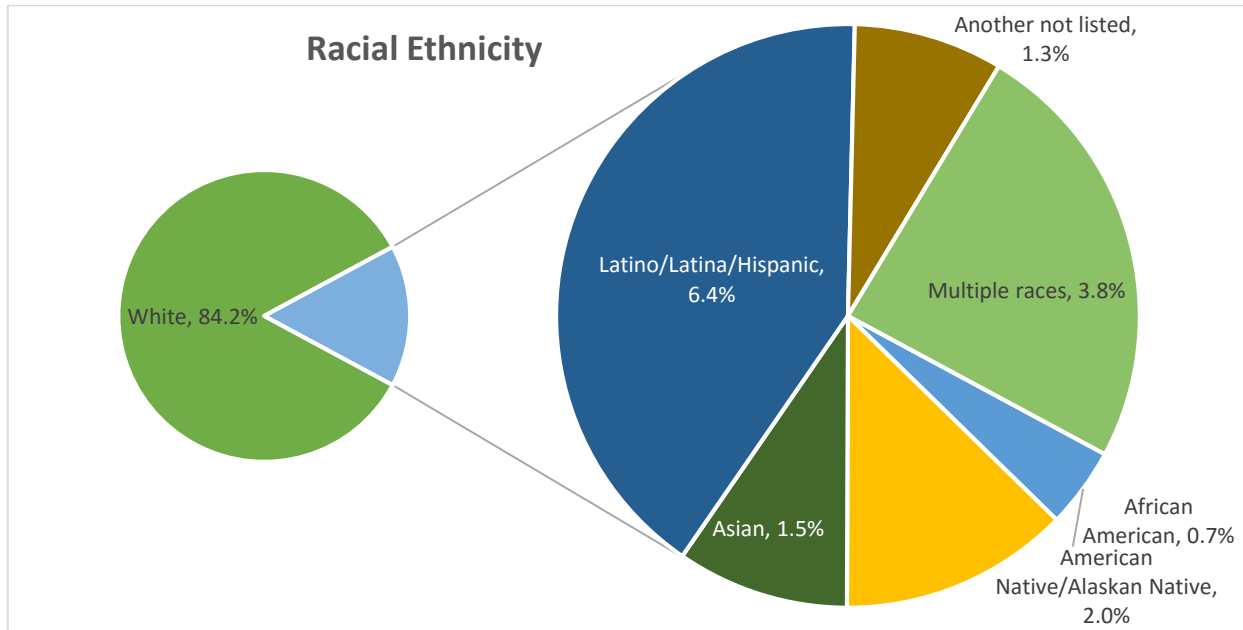
WHO PARTICIPATED IN THE EVALUATION?

Pre-post evaluation participants (n=8,108) mostly identified as female (76%), white (82%), and their ages ranged from 18 to 97 years, with an average participant age of 44. Fifty four percent of participants were required by their employer to attend SOC, 35% were affiliated with k-12 schools, 12% with social service organizations, 12% with faith organizations, and 11% with preschool or childcare settings. A majority of participants (63.5%) have earned advanced college degrees, including two-year College certificates (11%), an undergraduate degree (21%), or a graduate degree (26%). Household income among participants exceed Oregon averages – nearly 54% of all participants reported annual income above \$50,000.00.

*A full 99% of all participants would recommend
Stewards of Children to a friend or coworker.*

Personal Experience with Child Sexual Abuse. Among all participants, 32% responded “yes” to the personal experiences with child sexual abuse item: “Based on the definition of child sexual abuse in the Stewards of Children training, I was sexually abused in my childhood”. The prevalence of child sexual abuse varied by education levels, i.e., 29% of those with a two-year degree or higher personally experienced child sexual abuse, compared with 37% of those with less than a two-year degree. Rates of childhood sexual abuse among participants in this evaluation far exceed the estimates (1 in 10) purported in SOC materials.

Racial Ethnicity of SOC Participants



DOES STEWARDS OF CHILDREN IMPACT ABUSE PREVENTION KNOWLEDGE AND ATTITUDES?

Knowledge. Knowledge was evaluated with 14 questions, given immediately prior and immediately following the training. Among all participants, correct responses increased by nearly 11% (71.6% correct pre, 82.3% correct post) – a statistically significant and large effect. For example, after attending SOC participants were much more likely to know:

- ✓ very young children are at highest risk for child sexual abuse
- ✓ using correct language for body parts is a useful sexual abuse prevention tool
- ✓ specific actions and steps that one can take to prevent child sexual abuse

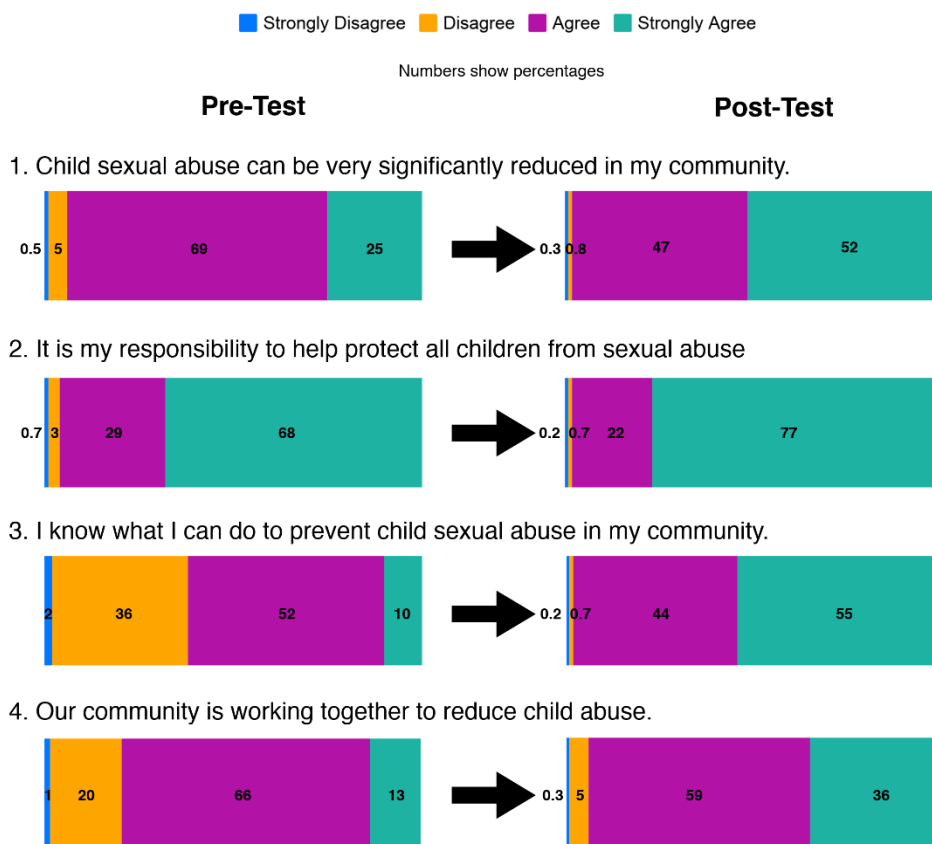
Knowledge did not increase equally across all items. For example, many participants following the training were not clear that sexual assault often does not include physical signs (29% incorrect), and that showing anger upon disclosure can thwart further sharing of information by the child (25% incorrect).

Attitudes and Beliefs. Attitudes and prevention beliefs were evaluated with 5 specific questions, asked of all participants immediately prior and immediately following the training. Following SOC, participants were much more likely to agree or strongly agree that child sexual abuse is preventable and that they can personally contribute to its prevention. After attending the training, participants were far more likely to:

- ✓ strongly agree that child sexual abuse can be reduced and believe that they know what to do to contribute to prevention efforts in their community
- ✓ strongly believe that it is their responsibility to protect children
- ✓ strongly agree that their community is working together to reduce child sexual abuse in a planned manner

These changes were significant, included large differences, and seem to reflect a kind of optimism and sense of shared action that occurs as a part of participating in SOC for many participants.

Cumulative Pre- and Post-Test Attitudes and Beliefs

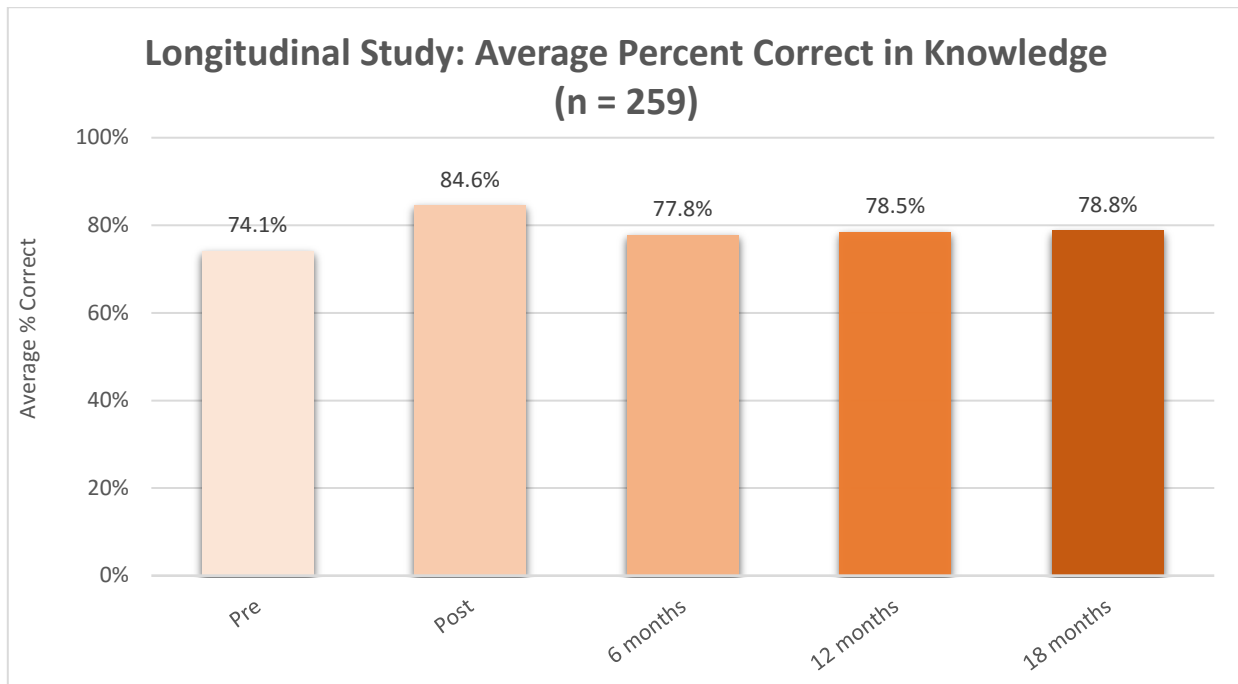


For more information about pre and post-training changes, please see Section II, Appendix A.

DID CHANGES IN KNOWLEDGE, ATTITUDES AND BELIEFS PERSIST OVER TIME?

In order to determine whether changes in knowledge, attitudes and beliefs persist over time, 259 rural participants were randomly selected and invited to complete the questionnaire at 6 months post-training. These same individuals were asked to participate again at 12 and 18 months post-training³. Longitudinal participants closely match all training participants on most demographic factors (e.g., gender, household income, education). Longitudinal participants reported spending slightly less hours per week with children relative to all training participants.

Knowledge. The percentage of correct responses on many of the knowledge items persisted even 18 months following the SOC training. For nine of fourteen knowledge questions, at 18 months post-training, participants were correct equal to or above their correct responses immediately following the training. In other words, most participants retained accurate information on most items. For the 5 knowledge questions that fell below the post-test correct score, 2 remained above baseline (pre-training scores), and 2 returned to baseline. For one question – a question regarding whether children tell someone about their abuse at or around the time it happened – the correct response fell nearly 15% below baseline. This suggests that many participants remained unclear as to whether children tend to tell someone about sexual abuse at or around the time it is occurring (based on best available evidence, most children do not). Finally, 3 of the knowledge items that dropped below the post-test score required the retention of numbers and percentages (e.g., percent of assaults carried out by strangers). Questions of this kind often show decreases in accuracy over time across many types of trainings.



³ At 12 months 26% fewer participants completed the questionnaire (n=193), and 13% fewer completed the questionnaire at 18 months (n=167).

Attitudes and Beliefs. The changes in attitudes in beliefs that participants reported right after the training remained largely true for people even 18 months after the training. People remained hopeful that child sexual abuse can be prevented and accepted personal responsibility for contributing to prevention at very high rates. Two moderate differences were found. At 18 months, the strongly agree response to *“I personally know what to do to prevention sexual abuse in their community”* increased by 10%, and *“our community is working together to reduce child sexual abuse”* dropped by 5%. This suggests that several people felt even more confident about their personal ability to reduce sexual abuse 18-months post-training, while several others were somewhat less hopeful that people in their community were working on an organized, collective approach.

Immediately after the training participants were 3 times more likely to believe their community *“has a plan to reduce child sexual abuse”* (prior to the training, 23% yes; post-training, 74% yes].

Knowledge, Attitudes and Beliefs – Findings from Spanish Language Trainings

Between December, 2016 and February, 2018, 232 Spanish language participants completed the training and the evaluation in Spanish. Among the 232 Spanish language participants, 80% identified as female and 84% identified as Latino, Latina, or Hispanic. Among all study participants, nearly 64% have an advanced college degree; 21% of Spanish language participants reported an advanced degree. Nearly 54% of all participants reported annual income above \$50,000.00; 19% of Spanish language participants reported annual income above \$50,000.00. Just over 31% of Spanish language participants identified as survivors of child sexual abuse – virtually identical to all other study participants.

When compared to the full participant group (n=8,108), attitude and knowledge changes among Spanish-speaking participants were overall very similar. All attitude changes, for example, trended in the same direction and with similar strength. Following SOC, Spanish-speaking participants were much more likely to agree or strongly agree that child sexual abuse can be very significantly reduced, that it is their responsibility to contribute to prevention, and that they know what to do as an individual to achieve this.

Knowledge change also was quite similar overall for Spanish language participants and the full participant group, with a few notable differences. Knowledge changes increased across most items for Spanish language participants. For example, following the training, an additional 28% of Spanish language participants knew that limiting one-adult/one-child situations is one way to prevent child sexual abuse. With regard to incorrect responses, the question about expression of anger had a low correct response both pre and post training – suggesting perhaps more broad and varied opinions about the value of openly expressing anger toward the abusive individual in the presence a child survivor. The usefulness of asking specific questions of children to determine whether the abuse report is true also score relatively low following the training – the correct response increased by 24 percentage points, though 36% of Spanish language participants incorrectly responded to this question post-training.

The training was very highly endorsed by all participants. Among Spanish-speaking participants, nearly 100% said they would recommend this training to a friend or coworker.

It is important to note: The Spanish language comparisons should be interpreted with caution. The sample size (n=232), although the largest data set of its kind, is quite small relative to the full participant group (n=8,108). Findings may change and will be increasingly more valid as the Spanish language sample size grows over time.

For more detailed information, please see Section II, Appendix B.

DOES SOC IMPACT BEHAVIOR AND DID ANY CHANGE PERSIST OVER TIME?

Immediately prior to the training, all participants were asked whether they had engaged in 16 different kinds of child sexual abuse prevention behaviors over the previous 6 months. Questions included, for example, “*did you discuss the issue of sexual abuse with a child or teenager?*” The 16 behaviors were all discussed and encouraged in the SOC training. These same 16 questions were asked of all longitudinal participants at 6, 12 and 18th months after the training.

Participants reported many behavioral actions – and these actions persisted over time. The changes occurred for participants, on average, regardless of demographic characteristics (e.g., gender, household income, urban/rural). At 6 months post-training, participants reported engaging in many more of the 16 behaviors and with much more overall frequency than all participants immediately prior to the training (baseline). For example, at baseline, 50% of all participants reported that they “looked for signs of sexual abuse in children in my life.” When asked 6 months later, this increased to 79%. Longitudinal participants were also 2.1 times more likely to “ask a staff member at a school, church, after-school, or other community-based program about the organization’s child sexual abuse prevention policies” than all training participants at baseline. This finding suggests that SOC influences sexual abuse prevention action and that these actions persist across time.

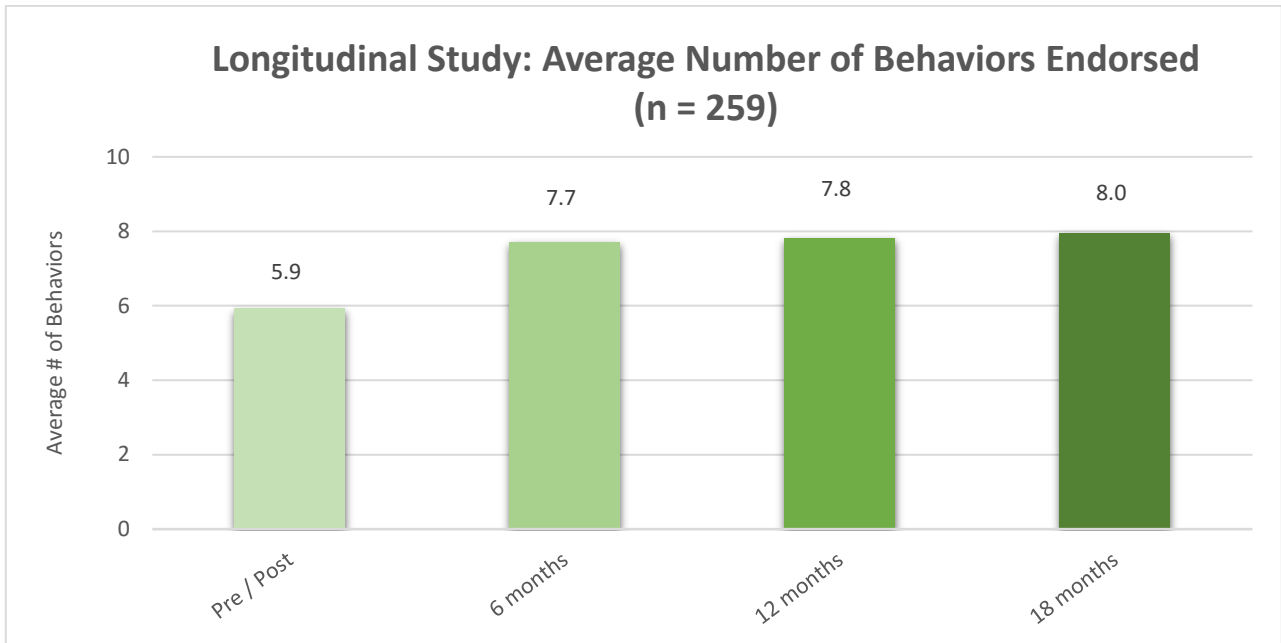
At 6 months post-training, participants reported engaging in many more of the 16 behaviors and with much more overall frequency than all participants immediately prior to the training.

Examining a ‘Parent and Child Access Prevention Behavior Effect.’ Among all participants, parents and people who spent 20 or more hours per week with children and/or youth (e.g., teachers) were much more likely to engage in certain protective behaviors. This included child-focused communication about sexual abuse and assessing and monitoring child safety. For example, following the training, parents were much more likely than non-parents to monitor a child’s internet use, talk with a child or teenager about sexuality and internet safety, and make sure multiple adults are present in activities that involve children. This can be explained, perhaps in large part, by the amount of contact parents and people in certain professions have with children – providing more opportunity and attunement for child sexual abuse prevention actions.

For more detailed information, please see Section II, Appendix C.

Behavior Change at 18 Months post-Training. Longitudinal participants continued to engage in many child protection behaviors 18 months following the training. Among all 16 actions, all remained well above the pre-training percentages, 5 increased actions over and above the 6-month increase, and 10 actions remained equal to the 6-month post-training increase. A few highlights:

- ✓ At pre-test, 50% of participants “looked for signs of sexual abuse in children.” At 18-months post-training, this increased to 84%.
- ✓ At 18-months, nearly 50% of participants had offered support or advice to someone about child sexual abuse (in the previous 6-month period). This is 21 points higher than pre-test participants.
- ✓ Longitudinal participants were 2.3 times more likely to “ask a staff member at a school, church, after-school, or other community-based program about the organization’s child sexual abuse prevention policies” than pre-test participants.



For more detailed information, please see Section II, Appendix D.

HOW DO CHANGES IN KNOWLEDGE, ATTITUDES, BELIEFS AND BEHAVIORS COMPARE WITH RANDOMLY SELECTED RURAL OREGONIANS?

Because many of the SOC training participants were required by their employer to attend the training, and a majority work in k-12 (school), social service, or preschool and childcare settings, it is difficult to know whether the changes in attitudes, knowledge, beliefs and behaviors would occur at similar rates for other rural Oregonians. In order to better make this comparison, we

randomly called rural Oregonians. People were eligible to participate if they could complete the questionnaire in English (a study limitation), were at least 18 years old, and had no knowledge or experience with SOC. A total of 231 people participated in this portion of the evaluation, randomly selected by a contracted call center, calling cell and landline households across rural Oregon.

Randomly phoned participants (Random Digit Dial, RDD) were demographically dissimilar to Stewards of Children training attendees in several ways and, overall, more closely represent the general public. For example, pre-post and longitudinal participants were disproportionately female (76%), while 65% of RDD participants identify as female. RDD participants, when compared to all other study participants, are more like the general public:

- ✓ Level of Completed Formal Education – Among RDD participants, 22% have a high school education or a GED; 18% have a graduate degree. The SOC training participants, by comparison: 11% have a high school education or GED; 26% have a graduate degree.
- ✓ Lower Income Range – Among RDD participants, 42% have income less than \$34,999, while 31% of SOC participants earn less than \$34,999/year.
- ✓ Upper income Range – Among RDD participants, 10% have income more than \$75,000, while 33% of SOC participants earn more than \$75,000/year.

Knowledge Items on pre and post measure

1.	Compared to girls, the sexual abuse of boys is quite rare. FALSE
2.	About 1 in 20 children before their 18 th birthday experience sexual abuse that includes some type of physical contact. FALSE
3.	If a child reports sexual abuse to me, I should ask specific questions to determine if the report is true and to determine exactly what happened. FALSE
4.	Nearly 30% of child sexual abuse assaults are carried out by strangers. FALSE
5.	Most children who are sexually abused tell someone about their abuse at or around the time it happened. FALSE
6.	When telling about an incident of sexual abuse, children and teens tend to exaggerate what happened to them. FALSE
7.	Using correct language for body parts with young children, such as penis and vagina, is a very useful tool for sexual abuse prevention. TRUE
8.	If you see an adult “pressing the boundaries” of acceptable behavior with children, you should describe the inappropriate behavior, set limits, and move on (‘move on’ means to set a limit in a calm, direct way). TRUE
9.	Child sexual abuse includes any sexual act between two minors when one exerts power over another. TRUE
10.	Most of the time there are physical signs that children have been sexually abused. FALSE
11.	According to reports, nearly 15% of all children who are sexually abused are 11 years old or younger. FALSE
12.	Child sexual abuse often leads to lasting physical problems. TRUE
13.	Showing your anger toward the person who abused a child is supportive for the child and often gives the child confidence to tell even more information about the abuse. FALSE
14.	According to reports, 80% of child sexual abuse incidents happen in a one-adult/one-child situation, so limiting one-adult/one-child situations is one of the best ways to prevent child sexual abuse. TRUE

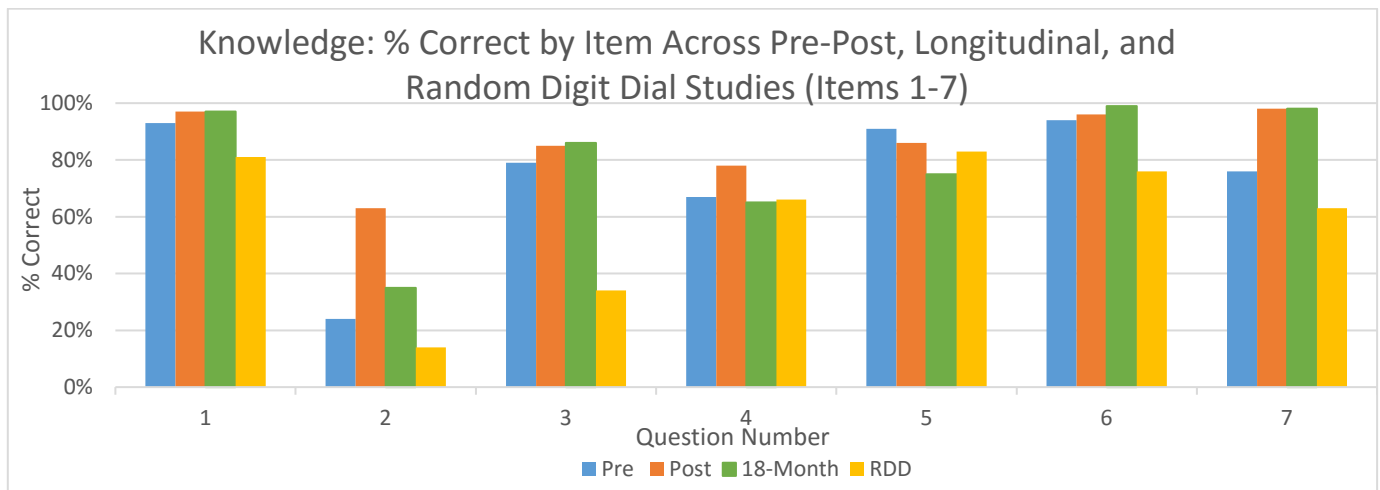
RDD Knowledge. RDD participants, selected randomly among rural Oregonians, answered many more questions incorrectly than SOC attendees. RDD participants likely represent a more accurate picture of general public knowledge than do Stewards of Children training attendees.

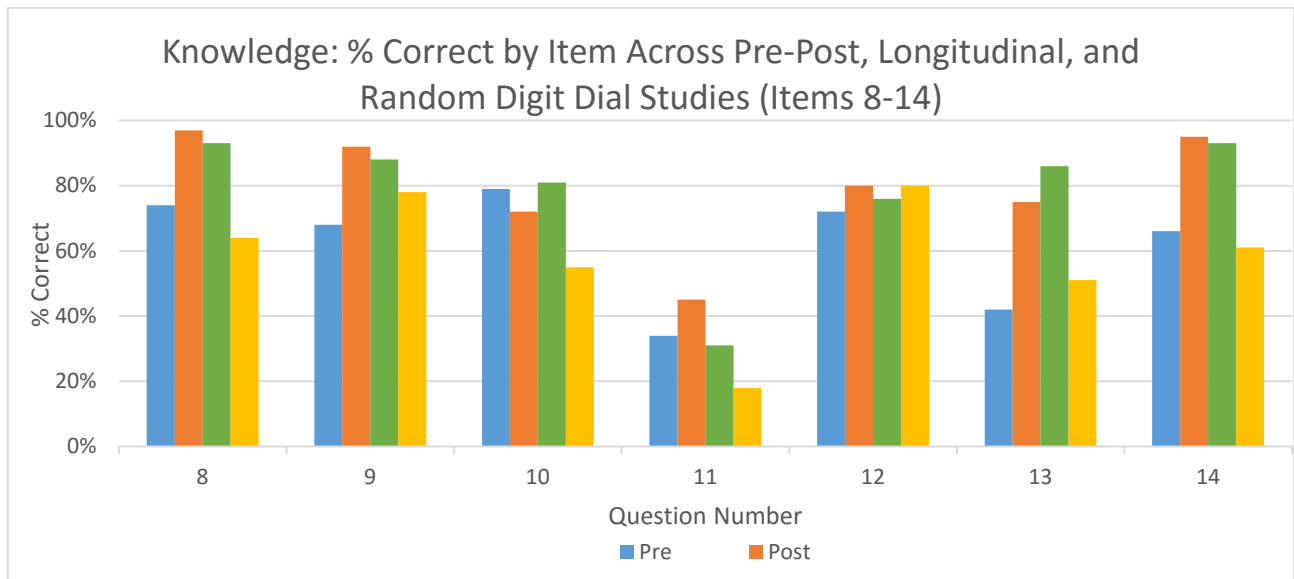
RDD Beliefs and Attitudes. Nearly all participants, including those called randomly (RDD), agreed or strongly agreed that child sexual abuse can be significantly reduced and that they have a responsibility to help protect children. This represents an optimism for prevention and a belief in personal responsibility among all study participants – including those phoned randomly and who have no knowledge of SOC and its curriculum content.

RDD Behavior. Random digit participants engaged in many fewer child sexual abuse prevention behaviors than SOC training participants. This is statistically significant and with strong effects. For example, immediately prior to the training, 50% of participants “looked for signs of sexual abuse in children.” At 18-months after the SOC training, this increased to 84%. For RDD participants only 33% took action of this kind. This suggests that SOC trainees engaged in many more child protection behaviors in comparison to rural Oregonians who had no SOC knowledge or exposure. A few additional examples:

- ✓ 68% of 6-month longitudinal participants “took action to learn more about reducing or preventing child sexual abuse,” compared to 23% of RDD participants.
- ✓ Longitudinal participants at 18-months post training were 2.5 times more likely to “ask a staff member at a school, church, after-school, or other community-based program about the organization’s child sexual abuse prevention policies” than at pre-test and fully 4 times more likely than RDD participants.

Six months after the training, 68% of Stewards participants took action to learn more about reducing or preventing child sexual abuse—compared to only 23% of a random selection of rural Oregonians

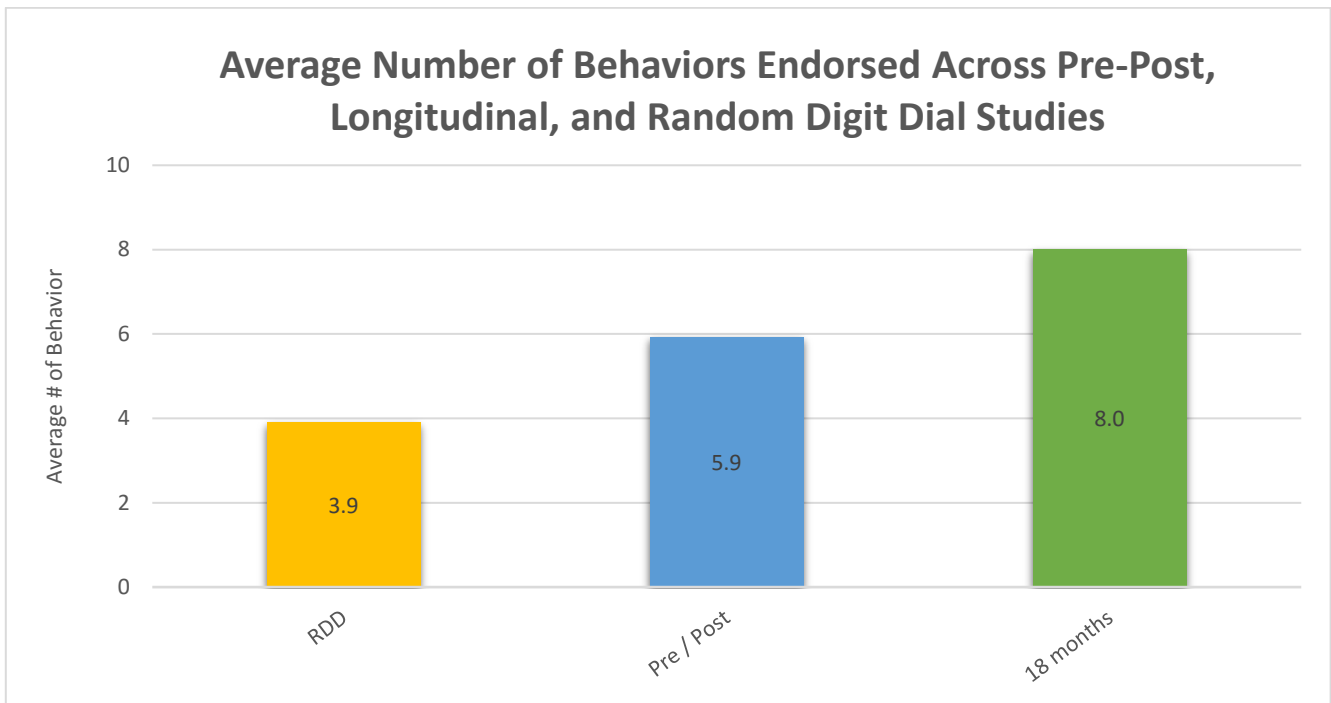




Behavioral Questions

In the past 6 months, I have...

- talked with a child or teenager about sexuality
- discussed the issue of sexual abuse with a child or teenager
- looked for signs of sexual abuse in children in my life
- acted on suspicions that a child could be a victim of sexual abuse
- spoken with a child/children about internet safety
- monitored a child's/children's internet use
- asked a staff member at a school, church, after-school, or other community-based program about the organization's child sexual abuse prevention policies.
- evaluated the potential for sexual abuse to occur when deciding whether my child or another child should participate in an activity.
- checked a sex offender registry.
- made an official report to either child protective services or law enforcement regarding a suspicion about sexual abuse.
- called a helpline number regarding an issue of child sexual abuse.
- made sure that a situation in which an adult is supervising a child or group of children is observable and interruptible.
- made sure that multiple adults are present in an activity that involves children.
- shared with another adult an article, book, brochure, website or other information about reducing or preventing child sexual abuse.
- taken some action to learn more about reducing or preventing child sexual abuse.
- offered advice or support to someone about child sexual abuse.



For more information about the random digit findings, please see Section II, Appendix D.

DOES FACILITATOR EXPERIENCE INFLUENCE CHANGES IN KNOWLEDGE, ATTITUDES AND BELIEFS?

In order to determine whether more experienced facilitators were associated with more pronounced knowledge, attitudes and beliefs changes among training attendees, we compared facilitators who had provide more than 5 trainings with those who had provided fewer than 5. For all practical purposes, there were no meaningful differences – the experience level of the facilitator had no differential impact on participants’ knowledge, attitudes and beliefs scores.

For more detailed information, please see Section II, Appendix E.

HAS SOC INCREASED REPORTS TO CHILD PROTECTIVE SERVICES?

At this point in time, SOC has not appeared to impact reports to child protective services. Although report rates across Oregon increased significantly in 2016 relative to 2011-2015, the differences are similar in parts of the State where SOC has and has not been delivered. This suggests that factors other than SOC have contributed to the increase. These factors may be external and environmental, e.g., increase in school days across Oregon, policy and practice changes, and increased awareness of abuse and neglect due to social and political events. Additionally, relative to state-wide data, SOC has been delivered for only a small window of time. If SOC in fact impacts reports to child protective services, additional time is needed for this to be detected.

For more specific information, please see Section II, Appendix F.

WHAT IMPACT HAS SOC HAD ON PROVIDER PROGRAMS, COMMUNITY PARTNERS, AND THE PUBLIC AT LARGE?

Several focus group interviews investigated the impact of SOC on the community at large, provider organizations, and community partners. Focus group interviews were conducted at the annual conference on May 18th. Thirty-two participants were interviewed in three separate groups, including site administrators, trainers, facilitators, and development personnel. At least one individual from each of the eleven SOC sites participated in the interview.

Participants were asked 1) how their organization has been impacted by SOC delivery, 2) whether their relationships with other organizations had been impacted, and 3) whether there was any community change that they attributed to SOC delivery. Participants uniformly agreed that SOC has had an impact on their organization, their relationship with partner and new-partner organizations, and that it has contributed to an increased awareness about a) the problem of child sexual abuse overall, b) their organization, and c) the services provided by SOC organizations. Participants were in broad agreement that SOC has helped to expand the identity of the 11 sites, e.g., “It (SOC) has gone from being a new initiative to being a question about who we are as an organization.” Several participants suggested that their organization is providing a fuller array of services and that SOC has led to a re-organization of their prevention efforts, e.g., “This gives us an opportunity to really grow our adult training offerings. We’ve been able to grow exponentially.”

Participants also uniformly agreed that SOC has productively impacted their relationship with other organizations, and has sparked new and deeper collaboration about child sexual abuse and abuse prevention between many community groups. Participants remarked: “It has started relationships for us;” “It is... like propellant for starting conversations.” Participants also broadly agreed that SOC has led to changes in the community at large, e.g., “It has raised awareness of child abuse as an issue in our community that I’m not sure would have existed otherwise.” And, “We’ve been able to reach people that had no idea... I do feel like people are thinking about it – including recognizing that it’s the adult’s responsibility, not the child.” One other participant captured the view of many in saying, “This issue has been shrouded. I think the training has changed a lot of people’s perceptions.”

I would say we are now intentionally reaching out to organizations with much more focus. It’s given us a purpose to do that – and we get feedback from people saying, “I didn’t know you do that, too.” It’s expanding understanding of who we are and what we do.

For more information about these focus group interviews, please see Section II, Appendix G.

Appendix A

Stewards of Children – Full Pre and Post Training Report

The 2018 Full pre and post training report is the final cumulative report and is based on 8,114 respondents. This report includes all of the data from the 233 Spanish version of the survey which makes up 2.9% of the sample.

Missing Data

- Less than 1% of surveys were missing the date
- Less than 1% were missing zip code
- 2% did not provide any demographic characteristics
- 1% complete less than half of the pretest knowledge items; less than 1% completed none of the items
- 2% completed less than half of the pretest attitudes and belief items; 1% completed none of the items
- 5% completed less than half of the behavior items; 4% completed none of the items
- 5% complete less than half of the posttest knowledge items; 4% completed none of the items
- 6% completed less than half of the posttest attitudes and belief items; 5% complete none of the items.
- 4% did not complete any of the posttest items.
- 12% did not disclose whether or not they were sexually abuse in childhood

Demographics and Participant Characteristics

Final cumulative participants were:

- Mostly female (76%)
- Between 14 and 97 years of age (Mean = 43.9, SD = 14.6)
- 54% had previous training related to child abuse
- 39% attended a training directly related to child sexual abuse prevention
- 54% were required by their employer to attend the training
- 50% said they had discussed child sexual abuse with a child
- Participants were attending the training as part of their involvement with (table sorted):

Organization	%
K-12	35
Other	20
Social service organization	12
A faith community	12
Preschool/childcare	11
Mental health organization	6
No group or organization affiliation	5
College/University	4

Child protective services	4
Health care organization	4
A sports organization	2
Law enforcement	1
Civic group	1

	N	%
Race		
White	6,370	82.0
African American	51	0.7
American Native/Alaskan Native	151	1.9
Asian	117	1.5
Latino/Latina/Hispanic	679	8.7
Other	106	1.4
Multiple races	290	3.7
Annual household income		
Less than \$10,000	581	7.8
\$10,001 - \$25,000	916	12.3
\$25,001 - \$34,999	833	11.1
\$35,000 - \$49,999	1,094	14.6
\$50,000 - \$74,999	1,590	21.3
\$75,000 - \$99,999	1,088	14.6
\$100,000 - \$149,999	977	13.1
\$150,000+	395	5.3
Highest level of education		
Less than high school	159	2.0
High school or GED	823	10.5
Some vocational	230	2.9
Vocational/technical degree	171	2.2
Some college	1,480	18.8
Two-year college degree	875	11.1
Four-year college degree	1,614	20.5
Some graduate school	469	6.0
Graduate degree	2,038	25.9
Currently a parent or ever been a primary caregiver of child	5,898	74.7
Currently a parent of child under the age of 18?		
No	4,103	51.9
Yes, full time	3,270	41.4
Yes, part time	529	6.7
Are you a mandatory reported of child abuse and neglect?		
Yes	5,956	77.0
No	1,136	14.7
I don't know	644	8.3

Of the sample 32% of participants responded “yes” to “Based on the definition of child sexual abuse in the Stewards of Children training, I was sexually abused in my childhood”. Of minorities in the sample 37% responded “yes” (compared to 31% for non-minorities). Of those with a two-year degree or higher 29% responded “yes” (compared to 37% with less than a two-year degree). Below are the demographic characteristics for the 32% of the sample who indicated they were sexually abuse in childhood.

	N	%
Race		
White	1,771	80.0
African American	11	0.5
American Native/Alaskan Native	60	2.7
Asian	23	1.0
Latino/Latina/Hispanic	195	8.8
Other	37	1.7
Multiple races	118	5.3
Sex		
Female	272	12.3
Male	1,939	87.4
Other	7	0.3
Annual household income		
Less than \$10,000	204	9.4
\$10,001 - \$25,000	309	14.2
\$25,001 - \$34,999	289	13.3
\$35,000 - \$49,999	348	16.0
\$50,000 - \$74,999	456	21.0
\$75,000 - \$99,999	280	12.9
\$100,000 - \$149,999	215	9.9
\$150,000+	74	3.4
Highest level of education		
Less than high school	53	2.4
High school or GED	234	10.5
Some vocational	87	3.9
Vocational/technical degree	63	2.8
Some college	475	21.2
Two-year college degree	313	14.0
Four-year college degree	443	19.8
Some graduate school	138	6.2
Graduate degree	432	19.3
Area population		
Urban	725	31.8
Rural	1,505	66.1
Outside Oregon catchment	47	2.1
Mandatory reporter		
Yes		

No		
I don't know		

Changes in Knowledge

At the pretest assessment the average knowledge score was 70.6% correct (SD = 12.6) and the score increased to 79.4% at posttest (SD = 13.3). The gains were statistically significant ($t[7744] = 54.14$, $p < .001$) and associated with a large effect size ($r = .52$). The following table shows the percent correct at pre and post for each of the knowledge items.

The change in pretest to posttest knowledge scores were re-assessed after exclusion of the item “children rarely take back (recant) a discloser of child abuse”. The pretest average knowledge score was 71.6% correct (SD=12.7) and the score increased to 82.3 (SD=13.4) at posttest ($t[7744] = 64.63$, $p < .001$, $r = .59$, large effect).

	Item	% Correct	
		Pre	Post
1.	Compared to girls, the sexual abuse of boys is quite rare. FALSE	93	97
2.	About 1 in 20 children before their 18 th birthday experience sexual abuse that includes some type of physical contact. FALSE	24	63
3.	If a child reports sexual abuse to me, I should ask specific questions to determine if the report is true and to determine exactly what happened. FALSE	78	85
4.	Nearly 30% of child sexual abuse assaults are carried out by strangers. FALSE	67	78
5.	Most children who are sexually abused tell someone about their abuse at or around the time it happened. FALSE	90	86
6.	When telling about an incident of sexual abuse, children and teens tend to exaggerate what happened to them. FALSE	94	96
7.	Using correct language for body parts with young children, such as penis and vagina, is a very useful tool for sexual abuse prevention. TRUE	76	98
8.	If you see an adult “pressing the boundaries” of acceptable behavior with children, you should describe the inappropriate behavior, set limits, and move on (‘move on’ means to set a limit in a calm, direct way). TRUE	73	97
9.	Child sexual abuse includes any sexual act between two minors when one exerts power over another. TRUE	68	92
10.	Most of the time there are physical signs that children have been sexually abused. FALSE	79	71
11.	According to reports, nearly 15% of all children who are sexually abused are 11 years old or younger. FALSE	34	44
12.	Child sexual abuse often leads to lasting physical problems. TRUE	73	80
13.	Showing your anger toward the person who abused a child is supportive for the child and often gives the child confidence to tell even more information about the abuse. FALSE	83	75
14.	According to reports, 80% of child sexual abuse incidents happen in a one-adult/one-child situation, so limiting one-adult/one-child situations is one of the best ways to prevent child sexual abuse. TRUE	66	95

Changes in Attitudes and Beliefs

At the pretest assessment the average attitude and belief score was 3.1 correct (SD = 0.4) and the score increased to 3.5 at posttest (SD = 0.4). The gains were statistically significant ($t[7600] = 91.87, p < .001$) and associated with a large effect size ($r = .72$). Below is a summary of the attitude and belief items at pre and posttest.

	Percent Reported			
	Strongly disagree	Disagree	Agree	Strongly agree
<i>Pretest Attitude and Belief Items</i>				
Child sexual abuse can be very significantly reduced in my community.	1	5	69	25
It is my responsibility to help protect all children from sexual abuse.	1	3	29	68
I know what I can do to prevent child sexual abuse in my community.	2	36	52	10
Our community is working together to reduce child abuse.	1	20	66	13
<i>Posttest Attitude and Belief Items</i>				
Child sexual abuse can be very significantly reduced in my community.	<1	1	47	52
It is my responsibility to help protect all children from sexual abuse.	<1	1	22	77
I know what I can do to prevent child sexual abuse in my community.	<1	1	44	55
Our community is working together to reduce child abuse.	<1	5	59	36

At pretest 6% indicated “no” we do not have a plan to reduce childhood sexual abuse in my community, 25% indicated “yes”, and 68% indicated “I don’t know”. At posttest it shifted to 3% indicating “no”, 72% “yes”, and 25% “I don’t know”.

A full 99% of participants responded “yes” to “Would you recommend this training to a friend or co-worker?”

Behavioral Change

Below is a summary of the behavioral items at pretest. We will ask these questions again of people who participate in the longitudinal study.

In the past 6 months, I have...	True	
	N	%
talked with a child or teenager about sexuality	3573	46
discussed the issue of sexual abuse with a child or teenager	2565	33
looked for signs of sexual abuse in children in my life	3805	49
acted on suspicions that a child could be a victim of sexual abuse	1473	19
spoken with a child/children about internet safety	4433	57
monitored a child's/children's internet use	3950	51
asked a staff member at a school, church, after-school, or other community-based program about the organization's child sexual abuse prevention policies.	1042	14
evaluated the potential for sexual abuse to occur when deciding whether my child or another child should participate in an activity.	3025	40
checked a sex offender registry.	2246	29
made an official report to either child protective services or law enforcement regarding a suspicion about sexual abuse.	899	12
called a helpline number regarding an issue of child sexual abuse.	368	5
made sure that a situation in which an adult is supervising a child or group of children is observable and interruptible.	3854	51
made sure that multiple adults are present in an activity that involves children.	4682	61
shared with another adult an article, book, brochure, website or other information about reducing or preventing child sexual abuse.	1590	21
taken some action to learn more about reducing or preventing child sexual abuse.	4009	52
offered advice or support to someone about child sexual abuse.	2115	28

In that past 6 months % of respondents indicated they discussed the issue of child sexual abuse with (table sorted):

	%
Coworker	36
Relative	36
Friend	30
Other	15
Supervisor	14
Law enforcement or child protective services	10
Clergy or other faith leader	5
Neighbor	3

Rural vs. Urban

Most of the participants came from rural catchment areas (n=5140, 63%), 35% (n=2797) Urban, and 2% (n=164) were outside the Oregon/Siskiyou catchment area.

Changes in Knowledge

At the pretest assessment the average knowledge score for rural residents was 70.2% (SD = 12.6) and the score increased to 79.8% at posttest (SD = 13.4). The gains were statistically significant ($t[4888] = 41.49, p < .001$) and associated with a large effect size ($r = .51$).

At the pretest assessment the average knowledge score for urban residents was 71.5% (SD = 12.6) and the score increased to 80.7% at posttest (SD = 12.6). The gains were statistically significant ($t[2697] = 34.98, p < .001$) and associated with a large effect size ($r = .56$).

The following table shows the percent correct at pre and post for each of the knowledge items.

	Item	% Correct			
		Rural		Urban	
		Pre	Post	Pre	Post
1.	Compared to girls, the sexual abuse of boys is quite rare. FALSE	93	97	94	97
2.	About 1 in 20 children before their 18 th birthday experience sexual abuse that includes some type of physical contact. FALSE	23	61	25	66
3.	If a child reports sexual abuse to me, I should ask specific questions to determine if the report is true and to determine exactly what happened. FALSE	77	84	80	87
4.	Nearly 30% of child sexual abuse assaults are carried out by strangers. FALSE	66	77	67	79
5.	Most children who are sexually abused tell someone about their abuse at or around the time it happened FALSE	90	86	91	86
6.	When telling about an incident of sexual abuse, children and teens tend to exaggerate what happened to them. FALSE	94	96	95	97
7.	Using correct language for body parts with young children, such as penis and vagina, is a very useful tool for sexual abuse prevention. TRUE	74	97	79	98
8.	If you see an adult “pressing the boundaries” of acceptable behavior with children, you should describe the inappropriate behavior, set limits, and move on (‘move on’ means to set a limit in a calm, direct way). TRUE	72	97	75	97
9.	Child sexual abuse includes any sexual act between two minors when one exerts power over another. TRUE	68	92	69	92
10.	Most of the time there are physical signs that children have been sexually abused. FALSE	79	70	79	73
11.	According to reports, nearly 15% of all children who are sexually abused are 11 years old or younger. FALSE	33	42	34	48
12.	Child sexual abuse often leads to lasting physical problems. TRUE	73	80	73	81

	Item	% Correct			
		Rural		Urban	
		Pre	Post	Pre	Post
13.	Showing your anger toward the person who abused a child is supportive for the child and often gives the child confidence to tell even more information about the abuse. FALSE	83	73	84	78
14.	According to reports, 80% of child sexual abuse incidents happen in a one-adult/one-child situation, so limiting one-adult/one-child situations is one of the best ways to prevent child sexual abuse. TRUE	65	94	67	96
15.	Children rarely take back (recant) a disclosure of child sexual abuse. FALSE	56	39	58	38

Changes in Attitudes and Beliefs

At the pretest assessment the average attitude and belief score for rural residents was 3.1 (SD = 0.4) and the score increased to 3.5 at posttest (SD = 0.4). The gains were statistically significant ($t[4794] = 70.22$, $p < .001$) and associated with a large effect size ($r = .72$). Below is a summary of the attitude and belief items at pre and posttest.

At the pretest assessment the average attitude and belief score for urban residents was 3.1 (SD = 0.4) and the score increased to 3.6 at posttest (SD = 0.4). The gains were statistically significant ($t[2651] = 58.63$, $p < .001$) and associated with a large effect size ($r = .75$). Below is a summary of the attitude and belief items at pre and posttest.

	Percent Reported			
	Strongly disagree	Disagree	Agree	Strongly agree
<i>Pretest Attitude and Belief Items</i>				
Child sexual abuse can be very significantly reduced in my community.				
Rural	1	6	69	24
Urban	1	4	69	27
It is my responsibility to help protect all children from sexual abuse.				
Rural	1	3	30	67
Urban	1	3	27	70
I know what I can do to prevent child sexual abuse in my community.				
Rural	2	37	52	10
Urban	2	36	52	10
Our community is working together to reduce child abuse.				
Rural	1	22	64	12
Urban	1	17	69	13
<i>Posttest Attitude and Belief Items</i>				

Child sexual abuse can be very significantly reduced in my community.				
Rural	<1	1	49	50
Urban	<1	1	43	56
It is my responsibility to help protect all children from sexual abuse.				
Rural	<1	1	23	76
Urban	<1	1	20	79
I know what I can do to prevent child sexual abuse in my community.				
Rural	<1	1	48	52
Urban	<1	1	39	60
Our community is working together to reduce child abuse.				
Rural	<1	6	61	33
Urban	<1	3	56	41

At pretest 7% rural residents indicated “no” we do not have a plan to reduce childhood sexual abuse in my community, 24% indicated “yes”, and 70% indicated “I don’t know”. At posttest it shifted to 4% indicating “no”, 69% “yes”, and 27% “I don’t know”.

At pretest 5% urban residents indicated “no” we do not have a plan to reduce childhood sexual abuse in my community, 28% indicated “yes”, and 66% indicated “I don’t know”. At posttest it shifted to 2% indicating “no”, 78% “yes”, and 20% “I don’t know”.

A full 99% of rural participants and 99% of urban participants responded “yes” to “Would you recommend this training to a friend or co-worker?”

Behavioral Change

Below is a summary of the behavioral items at pretest. We will ask these questions again of people who participate in the longitudinal study.

In the past 6 months, I have...	% True	
	Rural	Urban
talked with a child or teenager about sexuality	46	47
discussed the issue of sexual abuse with a child or teenager	33	33
looked for signs of sexual abuse in children in my life	50	48
acted on suspicions that a child could be a victim of sexual abuse	19	19
spoken with a child/children about internet safety	57	58
monitored a child's/children's internet use	51	51
asked a staff member at a school, church, after-school, or other community-based program about the organization's child sexual abuse prevention policies.	13	14
evaluated the potential for sexual abuse to occur when deciding whether my child or another child should participate in an activity.	39	40
checked a sex offender registry.	30	27
made an official report to either child protective services or law enforcement regarding a suspicion about sexual abuse.	11	12
called a helpline number regarding an issue of child sexual abuse.	5	5
made sure that a situation in which an adult is supervising a child or group of children is observable and interruptible.	50	52
made sure that multiple adults are present in an activity that involves children.	60	62
shared with another adult an article, book, brochure, website or other information about reducing or preventing child sexual abuse.	21	21
taken some action to learn more about reducing or preventing child sexual abuse.	52	53
offered advice or support to someone about child sexual abuse.	28	26

In that past 6 months rural residents indicated they discussed the issue of child sexual abuse with (tabled sorted):

	%
Coworker	37
Relative	36
Friend	30
Other	16
Supervisor	14
Law enforcement or child protective services	10
Clergy or other faith leader	5
Neighbor	3

In that past 6 months urban residents indicated they discussed the issue of child sexual abuse with (tabled sorted):

	%
Coworker	37
Relative	36
Friend	31
Supervisor	15
Other	14
Law enforcement or child protective services	11
Clergy or other faith leader	5
Neighbor	3

Appendix B Stewards of Children

Spanish-Speaking Participant Demographics and Characteristics

Spanish-speaking participants ($n = 232$) surveyed during December 5, 2016 – February 28, 2018:

- Mostly female (80%)
- Between 16 and 69 years of age ($M = 39.6$; $SD = 11.0$)
- Mostly identified as Latino/Latina/Hispanic (83.6%)
- 31.3% had previous training related to child abuse
- 29.6% previously attended a training directly related to child sexual abuse prevention
- 25.2% were required by their employer to attend the training
- Over half of participants said they had previously talked to a child about child sexual abuse (55.9%)
- 39.0% identified as mandatory reporters
- Most were parents or primary caregivers of children (84.4%)
- Many identified as survivors of child sexual abuse (31.3%) (22.8% did not respond to this question)

Compared to participants who completed the English language version of the evaluation, Spanish-speaking participants were less likely to identify as mandatory reporters, be required by an employer to attend the Stewards training, or attend a previous training related to child abuse or child sexual abuse. More Spanish-speaking participants identified as parents or primary caregivers compared to English-speaking participants (84%; 75%). Spanish-speaking participants were slightly more likely to have discussed child sexual abuse with a child (56%) compared to English-speaking participants (50%). The percentage of participants who identified as survivors of child sexual abuse was similar among both groups at just under one third of the sample.

Most participants came from rural Oregon catchment areas ($n = 166$; 72%), 23% ($n = 52$) from urban areas, and 5% ($n = 11$) were outside the Oregon catchment area.

POC/SOC 1.0 Spanish-Speaking Participant Characteristics		
	N	%
Race		
White	4	1.7
African American	0	0
American Native/Alaskan Native	0	0
Asian	1	0.4
Latino/Latina/Hispanic	194	83.6
Other	5	2.2
Multiple races	0	0
Annual household income		
Less than \$10,000	22	11.9
\$10,001 - \$25,000	38	20.5
\$25,001 - \$34,999	43	23.2
\$35,000 - \$49,999	47	25.4

POC/SOC 1.0 Spanish-Speaking Participant Characteristics		
	N	%
\$50,000 - \$74,999	26	14.1
\$75,000 - \$99,999	7	3.8
\$100,000 - \$149,999	2	1.1
\$150,000+	0	0
Highest level of education		
Less than high school	33	17.1
High school or GED	84	43.5
Some vocational	13	6.7
Vocational/technical degree	15	7.8
Some college	8	4.1
Two-year college degree	18	9.3
Four-year college degree	17	8.8
Some graduate school	2	1.0
Graduate degree	3	1.6
Currently a parent or ever been a primary caregiver of child?		
Yes	173	84.4
No	32	15.6
Currently a parent of child under the age of 18?		
Yes, full time	137	66.5
Yes, part time	29	14.1
No	40	19.4
Are you a mandatory reporter of child abuse and neglect?		
Yes	71	39.0
No	67	36.8
I don't know	44	24.2

31% of Spanish-speaking participants indicated they had been sexually abused during childhood (23% did not respond to this question). Below are the demographic characteristics for the 31% who identified as survivors of child sexual abuse.

	N	%
Race		
White	1	1.8
African American	0	0
American Native/Alaskan Native	0	0
Asian	0	0
Latino/Latina/Hispanic	50	89.3
Other	1	1.8
Multiple races	0	0
Sex		
Female	46	90.2
Male	5	9.8

Other	0	0
Annual household income		
Less than \$10,000	4	8.5
\$10,001 - \$25,000	13	27.7
\$25,001 - \$34,999	6	12.8
\$35,000 - \$49,999	13	27.7
\$50,000 - \$74,999	9	19.1
\$75,000 - \$99,999	2	4.3
\$100,000 - \$149,999	0	0
\$150,000+	0	0
Highest level of education		
Less than high school	9	18.8
High school or GED	18	37.5
Some vocational	3	6.3
Vocational/technical degree	2	4.2
Some college	2	4.2
Two-year college degree	4	8.3
Four-year college degree	8	16.7
Some graduate school	0	0
Graduate degree	2	4.2
Area population		
Urban	8	14.3
Rural	43	76.8
Outside Oregon catchment	5	8.9
Mandatory reporter		
Yes	18	39.1
No	19	41.3
I don't know	9	19.6

Knowledge

The average pre-test knowledge score (excluding the 'recant' item) was 65.2% correct ($SD = 2.3$); this score increased to 73.3% correct ($SD = 3.5$) at post-test ($t[231] = 2.21, p = .03, r = .36$). The table below contains the average knowledge scores by item at pre- and post-test.

Percent Correct by Individual Knowledge Item at Pre/Post			
	Item	% Correct	
		Pre	Post
1.	Compared to girls, the sexual abuse of boys is quite rare. FALSE	92	96
2.	About 1 in 20 children before their 18 th birthday experience sexual abuse that includes some type of physical contact. FALSE	22	36
3.	If a child reports sexual abuse to me, I should ask specific questions to determine if the report is true and to determine exactly what happened. FALSE	40	64

Percent Correct by Individual Knowledge Item at Pre/Post			
	Item	% Correct	
		Pre	Post
4.	Nearly 30% of child sexual abuse assaults are carried out by strangers. FALSE	62	66
5.	Most children who are sexually abused tell someone about their abuse at or around the time it happened. FALSE	80	80
6.	When telling about an incident of sexual abuse, children and teens tend to exaggerate what happened to them. FALSE	92	92
7.	Using correct language for body parts with young children, such as penis and vagina, is a very useful tool for sexual abuse prevention. TRUE	86	99
8.	If you see an adult “pressing the boundaries” of acceptable behavior with children, you should describe the inappropriate behavior, set limits, and move on (‘move on’ means to set a limit in a calm, direct way). TRUE	71	93
9.	Child sexual abuse includes any sexual act between two minors when one exerts power over another. TRUE	75	98
10.	Most of the time there are physical signs that children have been sexually abused. FALSE	53	39
11.	According to reports, nearly 15% of all children who are sexually abused are 11 years old or younger. FALSE	39	29
12.	Child sexual abuse often leads to lasting physical problems. TRUE	86	85
13.	Showing your anger toward the person who abused a child is supportive for the child and often gives the child confidence to tell even more information about the abuse. FALSE	52	58
14.	According to reports, 80% of child sexual abuse incidents happen in a one-adult/one-child situation, so limiting one-adult/one-child situations is one of the best ways to prevent child sexual abuse. TRUE	63	91

Following the Stewards of Children training, an additional 28% of participants knew that limiting one-adult/one-child situations is one of the best ways to prevent child sexual abuse. Additional knowledge questions that showed marked increases from pre- to post-test included items 3, 8, and 9. Looking at responses collected using the English language version of the evaluation, significant gains in knowledge are also observed on items 8, 9, and 14. Items 1 and 6 received a high percent correct response at pre-test (both 92%) and remained high at post-test as well (96%; 92%)—these figures are similar among English-speaking participants. Item 2 had a low correct response rate both before and after the training (22% pre; 36% post). Participants who attended the training in English were nearly twice as likely to respond correctly to this item at post-test (63%).

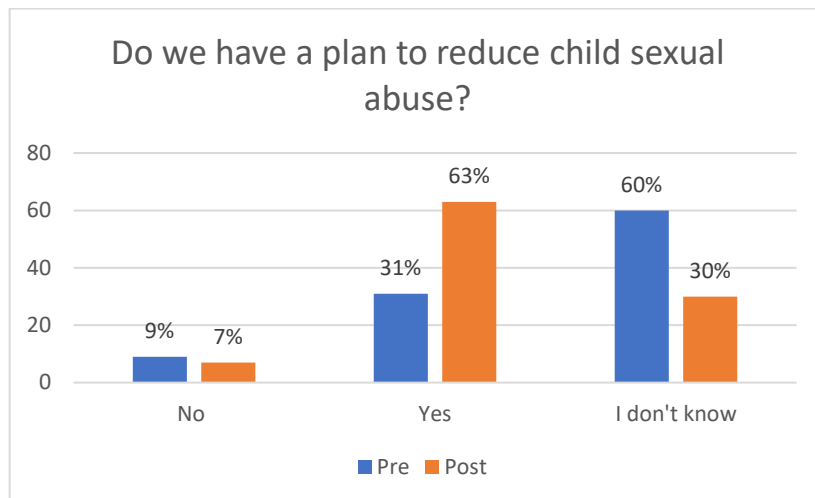
Attitudes and Beliefs

On a scale of 1-4 with 1 as “Strongly disagree” and 4 as “Strongly agree,” the average pre-test attitude and belief score was 3.2 ($SD = 0.5$); this score increased to 3.6 ($SD = 0.4$) at post-test ($t[189] = 8.82, p < .001, r = .46$). These average agreement scores are very similar to those reported among English-speaking participants.

Percent Agreement of Attitudes and Beliefs Items at Pre/Post				
	Percent Reported			
	Strongly disagree	Disagree	Agree	Strongly agree
<i>Pretest Attitude and Belief Items</i>				
Child sexual abuse can be very significantly reduced in my community.	2	8	45	45
It is my responsibility to help protect all children from sexual abuse.	1	3	29	68
I know what I can do to prevent child sexual abuse in my community.	2	25	43	30
Our community is working together to reduce child abuse.	2	17	51	30
<i>Posttest Attitude and Belief Items</i>				
Child sexual abuse can be very significantly reduced in my community.	1	1	41	58
It is my responsibility to help protect all children from sexual abuse.	0	1	26	74
I know what I can do to prevent child sexual abuse in my community.	0	2	38	60
Our community is working together to reduce child abuse.	1	7	45	47

Does Stewards have an impact on participants' beliefs about whether a plan exists to reduce sexual abuse in their community?

Before the training, 9% of participants indicated “no” we do not have a plan to reduce childhood sexual abuse in my community, 31% indicated “yes,” and 60% indicated “I don’t know.” Post-training these responses shifted to 7% indicating “no,” 63% “yes,” and 30% “I don’t know.”



Nearly 100% of Spanish-speaking participants said they would recommend this training to a friend or coworker.

**Note: Questions assessing behavioral change were not included on the Spanish version of the evaluation.*

**Appendix C
Stewards of Children**

Parent and Child Access Report

Sample

This report is based on the final Pretest to Posttest sample of 8,114 participants. Rates of missing data for the parenting items ranged from 2.6 – 4.0%.

Primary Caregiver

The survey indicated that 5,898 (74.7%) of participants were a parent or primary caregiver at any time in their life, whereas 1,995 (25.5%) indicated they were not a parent or primary caregiver. Table 1 shows pretest and posttest scores for the knowledge and attitudes and beliefs scales, separately for participants who reported they were not a parent or primary caregiver and those who reported they were not. Also, difference scores (defined as posttest-pretest scores) are provided and a grouped t-test compared the differences between the two groups. Cohen’s d is provided as a measure of effect size and follows the convention .2, .5, and .8 as small, medium, and large effects, respectively. Because the study has a lot of statistical power emphasis should be placed on effect sizes, not p-values.

Participants who were not a parent or caregiver showed greater gains from pretest to posttest compared to participants who reported they were a parent or primary caregiver. However, the associated effect size shows the difference was small. Group differences in attitudes and beliefs were trivial.

Table 1

	Not a Parent or CG			Parent or CG			Test Statistics		
	Pre	Post	Diff	Pre	Post	Diff	t-value	p-value	d
Knowledge	70.23	82.97	12.40	71.90	82.34	10.19	5.83	<.001	.15
Attitudes and Beliefs	3.11	3.54	0.43	3.10	3.52	0.42	0.72	.470	.02

The behavior items endorsed by each group are shown in Table 2. The behaviors are grouped into seven constructs. Each item in each construct shows the percentage of non-parent/non-caregiver and parent/caregiver that endorsed the behavior. A chi-square statistic test was used to test whether the percentage of endorsement differed by group. Cohen’s phi coefficient is provided as a measure of effect size and follows the convention .10, .30, and .50 as small, medium, and large effects, respectively. Four of the seven constructs consist of more than one item. For those constructs, the average phi coefficient for the constructed is provided in the bold text.

Most of the items show trivial to small group differences. As a construct, the Child-Focused Communication showed the largest effect (phi = .17), a small to medium size. Two behaviors monitored a child’s internet use and evaluated the potential for sexual abuse to occur when deciding if a child participates in an activity, were both medium level effects and endorsed at greater rates for parent/caregiver relative to non-parent/non-caregiver.

Table 2

	Not a	Parent or	Test Statistics		
	Parent or CG	CG	χ^2	p-value	phi
<i>Child-Focused Communication</i>	%	%			.17
Talked w/ child or teenage about sexuality (a)	32.4	50.9	199.4	<.001	.16
Discussed the issue of sexual abuse with a child or teenager (b)	20.3	37.5	193.4	<.001	.16
Spoken with a child about internet safety (e)	42.1	62.4	243.4	<.001	.18
<i>Assess & Monitor</i>					.13
Monitored a child's internet use (f)	29.6	58.3	478.1	<.001	.25
Looked for signs of sexual abuse in children in my life (c)	41.7	51.8	58.69	<.001	.09
Checked a sex offender registry (i)	22.8	31.3	50.6	<.001	.08
Made sure multiple adults are present in activity with children (m)	55.9	62.7	28.4	<.001	.06
Made sure situation with child or children is observable and interruptible (l)	45.9	52.2	23.4	<.001	.06
Evaluated potential for sexual abuse to occur when deciding if child participates in activity (h)	17.9	46.9	504.3	<.001	.26
<i>Policy</i>					
Asked staff member at school, church, etc. about child sexual abuse policies (g)	13.1	13.7	0.45	.501	.01
<i>Educate & Support</i>					.07
Shared with another adult article, books, etc. about reducing or preventing childhood sexual abuse (n)	16.1	22.4	35.2	<.001	.07
Offered advice or support to someone about child sexual abuse (p)	22.5	29.5	35.3	<.001	.05
<i>Resource-Seeking</i>					.04
Called a help-line regarding issue of child sexual abuse (k)	4.0	4.9	3.0	.082	.02
Offered advice about child sexual abuse (o)	48.2	54.0	19.1	<.001	.05
<i>Report</i>					
Made an official report regarding a suspicion about sexual abuse (j)	9.7	12.3	9.2	.002	.04
<i>Acted on Suspicion</i>					
Acted on suspicions that a child could be a victim of sexual abuse (d)	15.8	20.2	18.3	<.001	.05

Currently Parent Children under Age 18

The survey indicated that 4,103 (51.9%) of participants did not currently parent a child under the age of 18, whereas 3,799 (46.8%) indicated they did. Table 3 shows pretest and posttest scores for the knowledge and attitudes and beliefs scales, separately for participants who did not parent a child under 18 years of age and those that did. Also, difference scores (defined as posttest-pretest scores) are provided and a grouped t-test that compared the differences between the two groups. Cohen’s d is provided as a measure of effect size and follows the convention .2, .5, and .8 as small, medium, and large effects, respectively.

Trivial differences were detected between participants who did not currently parents a child under age of 18 and those who did for both knowledge and attitudes and beliefs.

Table 3

	Not Currently Parent			Currently a Parent			Test Statistics		
	Pre	Post	Diff	Pre	Post	Diff	t-value	p-value	d
Knowledge	71.2	82.8	11.2	71.7	82.2	10.2	3.09	.002	.08
Attitudes and Beliefs	3.11	3.52	0.42	3.10	3.53	0.42	0.72	.474	.02

The behavior items endorsed by each group are shown in Table 4. The behaviors are grouped into seven constructs. A chi-square statistic test was used to test whether the percentage of endorsement differed by group. Cohen’s phi coefficient is provided as a measure of effect size and follows the convention .10, .30, and 50 as small, medium, and large effects, respectively. Four of the seven constructs consist of more than one item. For those constructs, the average phi coefficient for the constructed is provided in the bold text.

As a construct, the Child-Focused Communication showed the largest effect (phi = .29), a medium effect. Two behaviors monitored a child’s internet use and evaluated the potential for sexual abuse to occur when deciding if a child participates in an activity, were both medium to large effects and endorsed at greater rates for current parents relative to participants who reported not currently a parent.

Table 4

	Not a Current Parent	Current Parent	Test Statistics		
	%	%	χ^2	p-value	phi
<i>Child-Focused Communication</i>					.29
Talked w/ child or teenage about sexuality (a)	31.1	63.1	777.8	<.001	.32
Discussed the issue of sexual abuse with a child or teenager (b)	20.3	47.1	613.4	<.001	.28
Spoken with a child about internet safety (e)	44.2	71.8	589.1	<.001	.28
<i>Assess & Monitor</i>					.23
Monitored a child’s internet use (f)	30.1	74.6	1502.8	<.001	.45
Looked for signs of sexual abuse in children in my life (c)	43.4	55.7	114.6	<.001	.12

	Not a Current Parent	Current Parent	Test Statistics		
Checked a sex offender registry (i)	24.0	34.7	106.3	<.001	.12
Made sure multiple adults are present in activity with children (m)	52.6	70.2	244.5	<.001	.18
Made sure situation with child or children is observable and interruptible (l)	44.1	57.9	142.5	<.001	.14
Evaluated potential for sexual abuse to occur when deciding if child participates in activity (h)	21.9	59.2	1093.5	<.001	.38
<i>Policy</i>					
Asked staff member at school, church, etc. about child sexual abuse policies (g)	13.3	13.6	0.19	.661	.01
<i>Educate & Support</i>					
Shared with another adult article, books, etc. about reducing or preventing childhood sexual abuse (n)	19.9	21.6	3.38	.065	.02
Offered advice or support to someone about child sexual abuse (p)	25.8	29.6	13.9	<.001	.04
<i>Resource-Seeking</i>					
Called a help-line regarding issue of child sexual abuse (k)	4.3	5.2	3.31	.069	.02
Offered advice about child sexual abuse (o)	50.4	54.4	12.2	<.001	
<i>Report</i>					
Made an official report regarding a suspicion about sexual abuse (j)	10.3	13.0	12.6	.001	.04
<i>Acted on Suspicion</i>					
Acted on suspicions that a child could be a victim of sexual abuse (d)	8.9	10.1	24.8	<.001	.06

People Currently Living in the Household Age 18 or Older

The variable that ascertained how many people living in the household ranged from 0 to 10 (a few cases has more than 10 and were recoded to 10 or more). The distribution showed that 46% reported zero, 19% one person, 19% two people, 8% three people, 3% four people, 1 % five people, and less than one-half percent for 6, 7, 8, 9, and 10 or more people.

The variable was correlated with the amount of change from pretest to posttest for the knowledge and attitudes and belief scales. Near zero correlations were found when the variable was correlated with change in knowledge ($r = -0.01$) and change in attitudes and beliefs ($r = 0.02$). The results indicate there is no meaningful relationship between the number of people living in a house under the age of 18 and how well participants scored on the knowledge and attitude and belief constructs from pretest to posttest.

Average Time Spent with Children

Across all participants 19% (n=1503) reported they spent 0-5 hours/week on average in the past 6-months with children and/or youth ages 0-17, 15% (n=1163) spending 6-20 hours/week, and 66% (n=5172) reported more than 20 hours/week. Table 5 shows the mean scores for knowledge and attitudes and beliefs by each of the three groups that reported spending time with children and youth.

Table 5

	0-5 Hours/Week			6-20 Hours/Week			20+ Hours/Week		
	Pre	Post	Diff	Pre	Post	Diff	Pre	Post	Diff
Knowledge	70.4	81.0	10.6	70.5	81.6	11.0	72.5	83.3	10.8
Attitudes and Beliefs	3.07	3.51	0.45	3.10	3.52	0.43	3.12	3.53	0.42

A one-way ANOVA was used to compare the three groups on change in knowledge and attitudes and beliefs. The omnibus test was non-significant ($F[2,7536] = 0.35, p = .709$) for change in knowledge scores indicating the change in scores did not significantly differ by group. The omnibus test was statistically significant ($F[2,7427] = 3.70, p = .025$) for change in attitude and belief scores. Post-hoc Scheffe tests showed that the change for the group that reported spending more than 20+ hours a week with children and youth significantly differed from those who reported 0-5 hours per week. However, the change was associated with a trivial difference ($d = .08$).

The behavior items endorsed by each group are shown in Table 6. The behaviors are grouped into seven constructs. A chi-square statistic test was used to test whether the percentage of endorsement differed by group. Cohen's phi coefficient is provided as a measure of effect size and follows the convention .10, .30, and .50 as small, medium, and large effects, respectively. Four of the seven constructs consist of more than one item. For those constructs, the average phi coefficient for the constructed is provided in the bold text.

As a construct, the Child-Focused Communication showed the largest effect ($\phi = .28$), a medium effect. At the item level monitored a child's internet use showed the largest effect ($\phi = .42$) and was a near large effect with rates of the behavior increasing as time spent with a child increased. Five medium effects were found: talked with a child or teenager about sexuality ($\phi = .29$), spoken with a child about internet safety ($\phi = .32$), made sure multiple adults are present in activity with children ($\phi = .29$), made sure situation with child or children is observable and interruptible ($\phi = .27$), and evaluated potential for sexual abuse to occur when deciding if child participates in activity ($\phi = .26$). For all of the medium effects the rates of the behavior increased as reported time spent with children increased.

Table 6

	0-5	6-20	20+	Test Statistics		
	hours per week	hours per week	hours per week	χ^2	p- value	ϕ
<i>Child-Focused Communication</i>	%	%	%			.28
Talked w/ child or teenage about sexuality (a)	19.4	38.1	56.1	649.1	<.001	.29

	0-5 hours per week	6-20 hours per week	20+ hours per week	Test Statistics		
Discussed the issue of sexual abuse with a child or teenager (b)	12.6	28.0	40.3	408.82	<.001	.23
Spoken with a child about internet safety (e)	27.7	48.4	68.1	798.0	<.001	.32
<i>Assess & Monitor</i>						.25
Monitored a child's internet use (f)	12.9	37.0	65.6	1358.3	<.001	.42
Looked for signs of sexual abuse in children in my life (c)	29.9	47.2	55.5	297.3	<.001	.20
Checked a sex offender registry (i)	23.0	30.1	30.7	33.3	<.001	.07
Made sure multiple adults are present in activity with children (m)	33.5	59.1	69.6	622.4	<.001	.29
Made sure situation with child or children is observable and interruptible (l)	24.4	48.7	59.0	537.6	<.001	.27
Evaluated potential for sexual abuse to occur when deciding if child participates in activity (h)	17.1	29.9	48.5	517.7	<.001	.26
<i>Policy</i>						
Asked staff member at school, church, etc. about child sexual abuse policies (g)	8.7	14.3	14.6	35.5	<.001	.07
<i>Educate & Support</i>						.04
Shared with another adult article, books, etc. about reducing or preventing childhood sexual abuse (n)	21.2	23.3	20.0	6.41	.040	.03
Offered advice or support to someone about child sexual abuse (p)	22.6	30.3	28.7	25.4	<.001	.06
<i>Resource-Seeking</i>						.02
Called a help-line regarding issue of child sexual abuse (k)	3.3	5.0	5.0	7.28	.026	.03
Offered advice about child sexual abuse (o)	51.4	54.2	52.3	2.07	.353	.02
<i>Report</i>						
Made an official report regarding a suspicion about sexual abuse (j)	7.4	11.6	12.9	32.5	<.001	.07
<i>Acted on Suspicion</i>						
Acted on suspicions that a child could be a victim of sexual abuse (d)	9.5	18.4	22.0	114.3	<.001	.12

Appendix D
Stewards of Children

Longitudinal Behavior, Knowledge and Attitudes Change: RDD Comparison

Table 1. Demographic and Participant Characteristics

	Stewards of the Children Study Sample				
	Longitudinal				Random Comp.
	Pre-Post	6-mo	12-mo	18-mo	
	%	%	%	%	%
Female	76.4	84.3	83.7	85.5	64.8
Age (Mean)	43.0	44.9	44.5	45.1	49.7
Race					
White	84.2	85.3	87.7	87.0	88.8
African American	0.7	0.0	0.0	0.0	1.3
American Native/Alaskan Native	2.0	3.2	3.2	3.1	1.8
Asian	1.5	0.8	1.1	1.2	0.0
Latino/Latina/Hispanic	6.4	5.6	4.3	4.9	5.4
Other	1.3	0.8	0.5	0.6	2.7
Multiple races	3.8	4.4	3.2	3.1	0.0
Annual household income					
Less than \$10,000	7.7	7.0	6.0	5.6	3.9
\$10,001 - \$25,000	12.1	11.5	10.9	10.6	18.6
\$25,001 - \$34,999	10.8	13.5	13.7	13.0	19.1
\$35,000 - \$49,999	14.4	15.2	14.8	16.1	15.7
\$50,000 - \$74,999	21.5	20.9	23.5	24.2	17.2
\$75,000 - \$99,999	14.8	14.8	13.7	14.3	10.8
\$100,000 - \$149,999	13.4	14.8	14.8	14.9	11.3
\$150,000+	5.4	2.5	2.7	1.2	3.4
Highest level of education					
Less than high school	1.6	1.2	0.5	0.0	4.9
High school or GED	9.6	8.9	7.8	7.2	22.2
Some vocational	2.8	2.7	2.1	2.4	1.8
Vocational/technical degree	2.0	1.6	1.6	1.2	1.8
Some college	19.2	18.7	17.7	18.0	22.2
Two-year college degree	11.2	11.7	10.9	10.2	12.4
Four-year college degree	20.8	21.4	22.9	23.4	15.1
Some graduate school	6.1	8.2	9.4	9.6	1.3
Graduate degree	26.5	25.7	27.1	28.1	18.2
Currently a parent of child under the age of 18?					
No	52.8	56.6	53.6	55.1	71.4
Yes, full time	40.7	38.0	39.7	37.7	26.0
Yes, part time	6.5	5.4	6.7	7.2	2.6
Are you a mandatory reported of child abuse and neglect?					
Yes	77.9	76.3	78.7	79.9	74.5
No	15.0	17.8	15.4	15.3	22.5

I don't know	7.0	5.9	5.9	4.9	3.0
In the past 6 weeks, average time spent with children or youth ages 0-17 years?					
0-5 hours/week	19.3	24.2	23.2	22.8	49.8
6-20 hours/week	14.9	16.9	14.4	15.0	14.7
More than 30 hours/week	65.8	58.8	62.4	62.3	35.5
Training directly related to child sexual abuse prevention	39.4	^a 44.2	^a 45.8	^a 47.3	31.8

Notes. Pre-post sample includes 2,712 urban and 4,861 rural participants, the longitudinal study 260 participants at 6-months, 194 at 12-months, and 167 at 18-months, and the random digit study 231 participants.

^aResponse at pretest, prior to Stewards of the Children training.

Table 2. Outcomes for Three Study Arms.

	Longitudinal											
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Percent of knowledge items correct	71.5	12.9	82.7	13.0	77.8	10.9	78.5	11.9	78.8	11.7	58.8	16.0
Count of behavioral items	5.5	3.7	NA	NA	7.6	3.4	7.7	3.6	7.9	3.4	3.9	3.8
CSA prevention belief items												
Child sexual abuse can be very significantly reduced in my community.	3.2	0.5	3.5	0.5	3.3	0.6	3.3	0.6	3.4	0.5	3.2	0.8
It is my responsibility to help protect children from sexual abuse.	3.6	0.6	3.8	0.5	3.8	0.4	3.8	0.5	3.8	0.4	3.6	0.8
I know what I can do to prevent child sexual abuse in my community.	2.7	0.7	3.5	0.5	3.2	0.6	3.2	0.5	3.3	0.9	2.8	0.9
Our community is working together to reduce child sexual abuse.	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.6	2.7	0.9

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 3. Outcomes for Three Study Arms by Gender.

	Longitudinal												
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison		
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD	
Knowledge score													
Female	72.3	12.4	83.1	12.5	78.3	10.7	79.6	10.7	79.4	10.3	59.9	14.5	
Male	70.3	13.3	81.8	14.4	75.4	10.7	73.7	15.3	75.3	17.2	56.7	18.6	
Behavior score													
Female	5.9	3.7	NA	NA	8.0	3.4	8.0	3.6	8.0	3.5	4.5	4.1	
Male	4.7	3.6	NA	NA	6.1	3.3	6.4	3.7	7.0	3.0	2.9	3.4	
CSA prevention belief items													
Child sexual abuse can be very significantly reduced in my community.													
Female	3.2	0.5	3.5	0.5	3.3	0.6	3.4	0.6	3.4	0.5	3.2	0.8	
Male	3.2	0.5	3.5	0.5	3.4	0.5	3.3	0.5	3.5	0.5	3.2	0.7	
It is my responsibility to help protect children from sexual abuse.													
Female	3.6	0.6	3.8	0.5	3.8	0.4	3.8	0.5	3.8	0.5	3.6	0.7	
Male	3.6	0.6	3.8	0.5	3.8	0.5	3.8	0.4	3.9	0.3	3.4	0.9	
I know what I can do to prevent child sexual abuse in my community.													
Female	2.7	0.7	3.6	0.5	3.2	0.6	3.3	0.6	3.3	0.6	2.9	0.9	
Male	2.7	0.7	3.5	0.5	3.1	0.5	3.1	0.4	3.3	0.5	2.7	0.8	
Our community is working together to reduce child sexual abuse.													
Female	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.6	2.7	0.9	
Male	2.9	0.6	3.3	0.6	2.8	0.5	2.7	0.5	2.8	0.6	2.5	0.9	

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 4. Outcomes for Three Study Arms by Mandatory Reporter Status.

	Longitudinal											
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Knowledge score												
Yes, mandatory reporter	72.8	12.1	83.7	12.3	77.8	10.8	78.8	11.3	78.5	10.8	62.4	14.2
No, not mandatory reporter	70.0	13.3	80.5	13.9	79.5	10.8	77.8	14.2	80.0	15.8	57.9	16.4
Behavior score												
Yes, mandatory reporter	5.9	3.7	NA	NA	8.1	3.4	8.2	3.6	8.3	3.4	6.2	4.4
No, not mandatory reporter	4.5	3.7	NA	NA	6.7	3.0	6.7	3.3	6.6	3.0	3.4	3.5
CSA prevention belief items												
Child sexual abuse can be very significantly reduced in my community.												
Yes, mandatory reporter	3.2	0.5	3.5	0.5	3.3	0.6	3.3	0.6	3.4	0.5	3.3	0.7
No, not mandatory reporter	3.2	0.5	3.5	0.6	3.4	0.5	3.4	0.6	3.5	0.5	3.2	0.8
It is my responsibility to help protect children from sexual abuse.												
Yes, mandatory reporter	3.7	0.6	3.8	0.4	3.8	0.4	3.8	0.5	3.8	0.4	3.8	0.4
No, not mandatory reporter	3.5	0.6	3.7	0.5	3.7	0.5	3.8	0.4	3.6	0.5	3.5	0.8
I know what I can do to prevent child sexual abuse in my community.												
Yes, mandatory reporter	2.7	0.7	3.6	0.5	3.2	0.6	3.2	0.6	3.4	0.6	3.1	0.7
No, not mandatory reporter	2.5	0.7	3.5	0.5	3.3	0.6	3.2	0.5	3.2	0.6	2.7	0.9
Our community is working together to reduce child sexual abuse.												
Yes, mandatory reporter	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.6	2.7	0.9
No, not mandatory reporter	2.9	0.6	3.3	0.6	2.8	0.7	2.8	0.5	2.7	0.6	2.7	0.9

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 5. Outcomes for Three Study Arms by Household Income.

	Longitudinal											
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Knowledge score												
Less than \$50,000 per year	69.7	12.5	81.0	13.9	76.9	10.2	77.8	11.6	78.8	13.0	57.3	15.2
More than \$50,000 per year	73.8	11.9	84.7	11.5	79.5	10.7	79.2	11.8	78.7	10.7	62.9	14.5
Behavior score												
Less than \$50,000 per year	5.4	3.7	NA	NA	7.4	3.5	7.3	3.7	7.8	3.9	4.4	4.1
More than \$50,000 per year	5.8	3.7	NA	NA	8.1	3.3	8.3	3.6	8.0	3.1	3.7	3.9
CSA prevention belief items												
Child sexual abuse can be very significantly reduced in my community.												
Less than \$50,000 per year	3.2	0.6	3.5	0.5	3.3	0.6	3.3	0.6	3.4	0.5	3.1	0.8
More than \$50,000 per year	3.2	0.5	3.5	0.5	3.4	0.5	3.4	0.6	3.4	0.5	3.3	0.6
It is my responsibility to help protect children from sexual abuse.												
Less than \$50,000 per year	3.6	0.6	3.7	0.5	3.8	0.4	3.7	0.5	3.7	0.6	3.6	0.7
More than \$50,000 per year	3.7	0.6	3.8	0.4	3.8	0.4	3.9	0.4	3.8	0.4	3.5	0.8
I know what I can do to prevent child sexual abuse in my community.												
Less than \$50,000 per year	2.7	0.7	3.5	0.5	3.3	0.6	3.2	0.5	3.3	0.6	3.0	0.8
More than \$50,000 per year	2.7	0.7	3.6	0.5	3.2	0.6	3.2	0.6	3.4	0.6	2.6	0.9
Our community is working together to reduce child sexual abuse.												
Less than \$50,000 per year	2.9	0.6	3.3	0.6	3.1	0.6	2.9	0.6	2.9	0.6	2.7	0.8
More than \$50,000 per year	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.6	2.5	0.9

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 6. Outcomes for Three Study Arms by Education.

	Longitudinal											
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Knowledge score												
Less than a bachelor's degree	68.8	12.8	79.3	13.9	75.9	10.5	77.0	11.6	76.7	11.9	57.2	15.4
Bachelor degree or greater	74.4	11.7	85.8	11.1	79.7	10.6	79.8	11.6	78.9	11.6	62.3	16.6
Behavior score												
Less than a bachelor's degree	5.3	3.7	NA	NA	8.1	3.4	8.1	3.8	8.1	3.8	3.8	3.7
Bachelor degree or greater	5.9	3.6	NA	NA	7.3	3.4	7.5	3.5	7.8	3.2	4.2	4.5
CSA prevention belief items												
Child sexual abuse can be very significantly reduced in my community.												
Less than a bachelor's degree	3.2	0.6	3.5	0.5	3.3	0.6	3.4	0.6	3.4	0.6	3.2	0.8
Bachelor degree or greater	3.2	0.5	3.5	0.5	3.3	0.5	3.3	0.5	3.4	0.5	3.3	0.8
It is my responsibility to help protect children from sexual abuse.												
Less than a bachelor's degree	3.6	0.6	3.7	0.5	3.8	0.4	3.8	0.4	3.8	0.5	3.6	0.7
Bachelor degree or greater	3.7	0.6	3.8	0.4	3.8	0.4	3.7	0.5	3.8	0.4	3.5	0.9
I know what I can do to prevent child sexual abuse in my community.												
Less than a bachelor's degree	2.7	0.7	3.5	0.5	3.3	0.5	3.3	0.6	3.4	0.6	2.9	0.9
Bachelor degree or greater	2.7	0.7	3.6	0.5	3.2	0.6	3.2	0.5	3.3	0.5	2.7	0.9
Our community is working together to reduce child sexual abuse.												
Less than a bachelor's degree	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.7	2.7	0.8
Bachelor degree or greater	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.5	2.6	0.9

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 7. Outcomes for Three Study Arms by Training.

	Longitudinal											
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Knowledge score												
Yes, CSA training	73.5	12.6	83.4	12.7	78.3	11.2	78.5	11.8	77.8	11.0	63.3	13.5
No, CSA training	70.3	13.0	82.3	13.0	77.5	10.8	78.5	12.1	79.6	12.4	57.1	16.3
Behavior score												
Yes, CSA training	6.8	3.7	NA	NA	8.3	3.3	8.4	3.3	8.4	3.1	5.3	4.6
No, CSA training	4.7	3.5	NA	NA	7.1	3.4	7.1	3.8	7.3	3.6	3.3	3.4
CSA prevention belief items												
Child sexual abuse can be very significantly reduced in my community.												
Yes, CSA training	3.2	0.5	3.5	0.5	3.4	0.6	3.3	0.6	3.3	0.5	3.2	0.7
No, CSA training	3.2	0.5	3.5	0.5	3.3	0.5	3.4	0.5	3.5	0.5	3.2	0.7
It is my responsibility to help protect children from sexual abuse.												
Yes, CSA training	3.7	0.5	3.8	0.4	3.9	0.4	3.8	0.4	3.8	0.4	3.6	0.8
No, CSA training	3.6	0.6	3.7	0.5	3.7	0.5	3.7	0.5	3.4	0.6	3.5	0.8
I know what I can do to prevent child sexual abuse in my community.												
Yes, CSA training	3.0	0.6	3.6	0.5	3.3	0.6	3.3	0.6	3.3	0.6	3.0	0.8
No, CSA training	2.5	0.7	3.5	0.5	3.1	0.5	3.2	0.5	3.4	0.6	2.7	0.9
Our community is working together to reduce child sexual abuse.												
Yes, CSA training	3.0	0.6	3.3	0.6	3.1	0.7	3.0	0.6	3.0	0.6	2.7	0.9
No, CSA training	2.8	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.6	2.6	0.9

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 8. Outcomes for Three Study Arms by Attendance Requirement.

	Longitudinal											
	Pre		Post		6-Months		12-Months		18-Months		Random Comparison	
	M	SD	M	SD	M	SD	M	SD	M	SD	M	SD
Knowledge score												
Yes, attendance required	71.8	12.6	83.1	12.9	76.6	10.8	78.8	11.9	77.5	10.3	NA	NA
No, attendance not required	71.3	13.2	82.4	12.9	78.9	11.0	78.3	12.0	80.3	13.0	NA	NA
Behavior score												
Yes, attendance required	5.6	3.6	NA	NA	7.8	3.3	7.9	3.5	8.3	3.2	NA	NA
No, attendance not required	5.4	3.8	NA	NA	7.4	3.4	7.4	3.8	7.4	3.6	NA	NA
CSA prevention belief items												
Child sexual abuse can be very significantly reduced in my community.												
Yes, attendance required	3.2	0.5	3.5	0.5	3.3	0.6	3.3	0.6	3.4	0.6	NA	NA
No, attendance not required	3.2	0.5	3.5	0.5	3.4	0.5	3.4	0.6	3.4	0.5	NA	NA
It is my responsibility to help protect children from sexual abuse.												
Yes, attendance required	3.7	0.6	3.8	0.5	3.9	0.4	3.8	0.4	3.8	0.4	NA	NA
No, attendance not required	3.6	0.6	3.8	0.5	3.7	0.5	3.7	0.6	3.8	0.5	NA	NA
I know what I can do to prevent child sexual abuse in my community.												
Yes, attendance required	2.8	0.7	3.5	0.5	3.2	0.6	3.2	0.6	3.3	0.6	NA	NA
No, attendance not required	2.6	0.7	3.5	0.5	3.2	0.5	3.2	0.5	3.3	0.6	NA	NA
Our community is working together to reduce child sexual abuse.												
Yes, attendance required	2.9	0.6	3.3	0.6	3.1	0.6	2.9	0.6	3.0	0.6	NA	NA
No, attendance not required	2.9	0.6	3.3	0.6	3.0	0.6	3.0	0.6	3.0	0.6	NA	NA

CSA prevention items response options were 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 10. Percentage of Participants who engaged in Childhood Sexual Abuse Prevention Behaviors during Prior 6 Months.

	Stewards of the Children Study Sample				
	Longitudinal				Random
	Pre-Post	6-Months	12-Months	18-Months	Comparison
In the past 6 months I have:	%	%	%	%	%
talked with a child or teenager about sexuality	46.0	56.4	58.5	64.7	26.4
discussed the issue of sexual abuse with a child or teenager	33.0	46.3	47.4	49.1	21.6
looked for signs of sexual abuse in children in my life	49.2	78.4	84.4	84.3	32.9
acted on suspicions that a child could be a victim of sexual abuse	19.1	21.3	26.7	22.7	16.5
spoken with a child/children about internet safety	57.2	69.8	68.4	67.7	36.8
monitored a child's/children's internet use	51.1	55.6	53.4	59.9	31.6
asked a staff member at a school, church, after-school, or other community-based program about the organization's child sexual abuse prevention policies	13.5	30.4	25.3	32.3	7.8
evaluated the potential for sexual abuse to occur when deciding whether my child or another child should participate in an activity	39.5	60.1	58.2	57.7	30.3
checked a sex offender registry	29.1	34.4	37.5	33.7	30.3
made an official report to either child protective services or law enforcement regarding a suspicion about sexual abuse	11.6	12.7	12.5	14.4	7.8
called a helpline number regarding an issue of child sexual abuse	4.8	2.3	4.7	1.8	5.2
made sure that a situation in which an adult is supervising a child or group of children is observable and interruptible	50.6	69.4	72.1	74.4	36.8
made sure that multiple adults are present in an activity that involves children	60.9	78.6	77.2	79.8	44.2
shared with another adult an article, book, brochure, website or other information about reducing or preventing child sexual abuse	20.7	44.6	42.4	42.8	17.7
taken some action to learn more about reducing or preventing child sexual abuse	52.4	67.7	62.1	62.3	22.8
offered advice or support to someone about child sexual abuse	27.7	44.5	49.2	48.5	25.1

Table 11. Percentage of Participants who correctly Identified True/False Items

	Stewards of the Children Study Sample Longitudinal					
	Pre	Post	6	12	18	Random
	%	%	Months	Months	Months	Comp.
1. Compared to girls, the sexual abuse of boys is quite rare. FALSE	93.1	96.7	94.2	95.4	97.0	80.9
2. About 1 in 20 children before their 18 th birthday experience sexual abuse that includes some type of physical contact. FALSE	23.7	63.0	25.4	33.5	34.7	13.9
3. If a child reports sexual abuse to me, I should ask questions to determine if the report is true and to determine exactly what happened. FALSE	79.3	85.2	87.7	86.1	85.6	34.3
4. Nearly 30% of child sexual abuse assaults are carried out by strangers. FALSE	66.8	77.9	64.6	62.4	65.3	66.1
5. Most children who are sexually abused tell someone about their abuse at or around the time it happened. FALSE	90.6	85.8	83.1	80.9	75.4	82.6
6. When telling about an incident of sexual abuse, children and teens tend to exaggerate what happened to them. FALSE	94.4	96.1	97.7	97.4	98.8	76.1
7. Using correct language for body parts with young children, such as penis and vagina, is a very useful tool for sexual abuse prevention. TRUE	75.5	97.6	94.2	93.3	97.6	63.0
8. If you see an adult “pressing the boundaries” of acceptable behavior with children, you should describe the inappropriate behavior, set limits, and move on (‘move on’ means to set a limit in a calm, direct way). TRUE	73.7	96.8	88.8	90.7	93.4	63.9
9. Child sexual abuse includes any sexual act between two minors when one exerts power over another. TRUE	68.3	92.2	84.6	85.6	87.7	77.8
10. Most of the time there are physical signs that children have been sexually abused. FALSE	79.4	71.5	85.8	86.6	81.4	54.8
11. According to reports, nearly 15% of all children who are sexually abused are 11 years old or younger. FALSE	33.5	44.5	35.0	41.2	31.1	17.8
12. Child sexual abuse often leads to lasting physical problems. TRUE	72.3	80.3	73.1	72.2	76.0	80.0
13. Showing your anger toward the person who abused a child is supportive for the child and often gives the child confidence to tell even more information about the abuse. FALSE	84.2	75.1	86.2	85.1	86.2	51.3
14. According to reports, 80% of child sexual abuse incidents happen in a one-adult/one-child situation, so limiting one-adult/one-child situations is one of the best ways to prevent child sexual abuse. TRUE	66.2	94.9	89.2	88.7	93.4	60.9
15. Children rarely take back (recant) a disclosure of child sexual abuse. FALSE	57.0	38.2	47.7	44.3	42.5	42.2

Appendix E
Stewards of Children

Facilitator Experience Impact

This memo summarizes the differences in study outcomes for participants instructed by group facilitators who led less than five sessions versus group facilitators who led five or more sessions. Participants who were in the pre-post survey dataset who were instructed by a group facilitator who led five or more sessions were coded “1,” and those by facilitators who led less than five sessions were coded “0”. It would have taken time for a facilitator to lead five or more sessions and September 2016 was determined to be a date that would have provided facilitators enough time to reach the five-session threshold. Thus, only participants identified as being instructed by a facilitator who led five sessions and assessed after September 2016 were included in the comparison to participants who were instructed by facilitators who led less than five sessions.

The sample for the analysis included 1,878 participants instructed by a facilitator who led less than five sessions and 3,368 participants instructed by a facilitator who led five or more sessions. Table 1 shows descriptive and test statistics comparing groups on change in knowledge and attitude and belief scores. Change scores were computed by subtracting posttest scores from pretest scores. Cohen’s d is provided as a measure of effect size and follows the convention .2, .5, and .8 as small, medium, and large effects, respectively. Because the study has a lot of statistical power emphasis should be placed on effect sizes, not p-values.

Results indicate that only trivial effects size differences were noted in change in knowledge and attitude and belief scores when comparing participant who were instructed by facilitators who led less than five sessions versus more than five sessions.

Table 1

	Less than 5 Sessions			More than 5 Sessions			Test Statistics		
	Pre	Post	Diff	Pre	Post	Diff	t-value	p-value	d
Knowledge	72.5	83.8	11.3	71.5	81.7	10.2	2.59	.010	.08
Attitudes and Beliefs	3.1	3.5	0.41	3.1	3.5	0.44	2.42	.016	.07

Appendix F Stewards of Children

Impact on Report Rates

This report outlines the analysis strategy for determining the impact of Stewards of Children on reports of child sexual abuse in Oregon and preliminary findings. The analysis strategy is centered in one overall question and two secondary questions. The overall question is: *Does Stewards of Children increase child abuse reports to child protection services?* The secondary questions include:

- 1) Secondary Question 1: *Is there a difference in child sexual abuse report rates in SOC targeted and untargeted Oregon zip codes?*
- 2) Secondary Question 2: *Is there a difference in child abuse and neglect report rates overall in targeted and untargeted zip codes?*

Analysis Strategy

In order to determine the impact of SOC on reports to child protection services, it is necessary to separate those people and communities who have had exposure to SOC from those who have not. To do this, drawing from our SOC database, we first identified zip codes¹ reported by SOC trainees. We labeled these 'targeted zip codes.' More specifically, targeted zip codes are those zip codes where 5 or more people attended a SOC training. We also identified 'untargeted zip codes' – those zip codes where fewer than 5 people attended a SOC training.

Next, we evaluated child abuse report data across Oregon from 2011-2016. In doing each of these things, we found:

Targeted and Untargeted Data Considerations:

- a. Targeted n=152 zip codes
 Pop. n=2.8 million
 Asterisk = <5 reports (165 zip codes across all years)
- b. Untargeted n=329 zip codes
 Pop. n=1.1 million
 Asterisk² = <5 reports (683 zip codes across all years)

Significant population differences were found between targeted and untargeted zip codes. Targeted zip codes (n=152) includes 2.8 million Oregonians, while untargeted zip codes (n=329) includes 1.1 million Oregonians. To account for these population differences we present report rates per 10,000 population. Additionally, given the long-term delivery of SOC in the Bend region, we will investigate in Stewards of Children, 2.0 a 'Bend effect.' We will also investigate a 'density' effect.

¹ Zip codes that did not have both population data and event data were excluded.

² Zip codes that include fewer than 5 reports were assigned an asterisk by DHHS as a precaution for privacy. Asterisk is coded as 2.5.

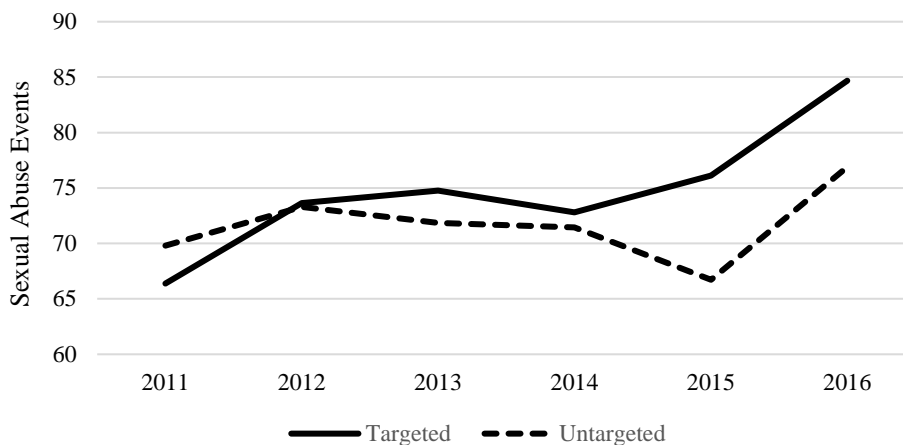


Findings

The findings depicted in the charts below should be interpreted with caution. In particular, Stewards has been delivered in targeted areas (with a Bend exception) only since June, 2015 (Sharepoint data entry began in June, 2015). As such, the years 2011-mid 2015 are baseline. Data in 2017 and 2018 are more likely to detect effects, if effects are occurring.

The graphs below report sexual abuse only (Graph A) and total abuse events (Graph B). Targeted and untargeted areas of the state both indicate a meaningful increase in report rates in 2016 relative to 2011. Although report rates increase in 2016 relative to 2011-2015, the differences are similar in SOC targeted and SOC untargeted parts of the state. This suggests that factors other than SOC have contributed to the increase. These factors may be external and environmental, e.g., increase in school days across Oregon, policy and practice changes, and increased awareness of abuse and neglect due to social and political events.

Graph A: Sexual Abuse Events Per
10,000 People Under Age 18



Graph B Total Abuse Events Per
10,000 People Under Age 18

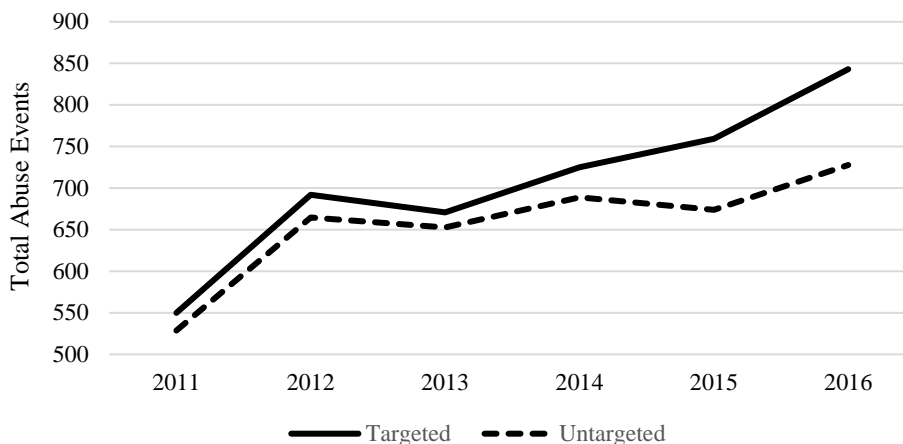


Table 1. All Data

		2011	2012	2013	2014	2015	2016
Targeted	Population < 18 years	618245	621588	619509	619697	615501	619640
	Sexual abuse events	4104	4577.5	4631.5	4512	4685	5247
	Sexual abuse events per 10,000	66.4	73.6	74.8	72.8	76.1	84.7
	Total events	33998.5	43004	41561.5	44933	46722	52234
	Total events per 10,000	549.9	691.8	670.9	725.1	759.1	843.0
Untargeted	Population < 18 years	245024	245095	242118	244237	245046	244566
	Sexual abuse events	1710.5	1796.5	1739.5	1745	1635	1880.5
	Sexual abuse events per 10,000	69.8	73.3	71.8	71.4	66.7	76.9
	Total events	12953	16284.5	15802	16823	16508.5	17797.5
	Total events per 10,000	528.6	664.4	652.7	688.8	673.7	727.7

Preferred Citation: *Stewards of Children – An Analysis of Impact on Reports to Child Welfare Across Oregon* (2018). Center for the Prevention of Abuse and Neglect, University of Oregon and The Ford Family Foundation.

Appendix G Stewards of Children

The Impact of SOC on Provider Programs, Community Partners, and the Public at Largeⁱ

Executive Summary¹ December, 2017

What impact is Stewards having in the community? What difference is it making in the organizations providing the trainings? Has Stewards influenced relationships between local groups? If so, how?

This 2-page Executive Summary briefly reports findings from focus group interviews conducted at The Ford Family Foundation's (TFFF) Protect Our Children (POC) Annual Conference in May, 2017. The interviews explored the 'systems-level' impact of Darkness to Light – Stewards of Children (SOC). Thirty-two participants were interviewed in three separate groups, including site administrators, trainers, facilitators, and development personnel. At least one individual from each of the 11 SOC sites participated in the interview. The interviews were recorded, transcribed verbatim, and analyzed using qualitative methods. The full 18-page report is available upon request.²

Participants were asked the following questions, and others – Due to Stewards of Children:

- How has your organization been impacted, if at all?
- How have your *relationships* with others organizations and groups changed, if at all?
- How has the *perception* of your organization changed in the community, if at all?
- Have you noticed *changes in your community* as a result of Stewards of Children trainings? If so, what?

Participants uniformly agreed that SOC has had an impact on their organization, their relationship with partner and new-partner organizations, and that it has contributed to an increased awareness about a) the problem of child sexual abuse overall, b) their organization, and c) the services provided by SOC organizations.

WITHIN SOC PROVIDER ORGANIZATIONS, SOC has fostered introspection, leading to broader views of agency focus and mission, and has changed views of how prevention activities fit within a traditional direct service framework. Participants reported that SOC has enhanced a sense of hopefulness within their organization and in the community at-large, i.e., “You have a sense that there’s a fair number of people who are really going to do something with this.” Participants also widely indicated that SOC has impacted organizational identity – “It (SOC) has gone from being a new initiative to being a question about who we are as an organization.” Several participants suggested that their organization is providing a fuller array of services and that SOC has led to a re-organization of their prevention efforts, e.g., “This gives us an opportunity to really grow our adult training offerings. We’ve been able to grow exponentially.”

¹ Report prepared by The Center for the Prevention of Abuse and Neglect, University of Oregon.

² Please contact Simone Schnabler (simones@uoregon.edu) or Mary Beattie (preventchildabuse@tfff.org).

Participants also uniformly agreed that SOC has productively impacted their relationship **WITH OTHER ORGANIZATIONS**, and has sparked new and deeper collaboration about child sexual abuse and abuse prevention between many community groups. Participants remarked: “It has started relationships for us;” “It is... like propellant for starting conversations;” and “This hadn’t happened prior to this, the (degree of) communication across agencies.” This has included new networks, more community-wide conversation about prevention and practical steps that people can take to protect children, and to a kind of prevention synergy – described by one participant as a “blooming effect.”

Participants also broadly agreed that SOC has led to **CHANGES IN THE COMMUNITY AT-LARGE**. This included an increased profile for their organizations, a broader understanding of the services they provide, and raised awareness about child sexual abuse. Two participants reflected the views of many: “We’re seen more as experts by the general population” and “Now, we’re the educator in the community. It’s allowed us to play a new role and, consequently, the community is perceiving us as educators.” Others highlighted SOC’s role in raising awareness about child sexual abuse: “It has raised awareness of child abuse as an issue in our community that I’m not sure would have existed otherwise.” And, “We’ve been able to reach people that had no idea... I do feel like people are thinking about it – including recognizing that it’s the adult’s responsibility, not the child.” Finally, “This issue has been shrouded. I think the training has changed a lot of people’s perceptions.”

Participants also pointed to **SEVERAL CHALLENGES**. They include time, both a) the barrier that a 3-hour training practically creates for potential participants, and b) the time it takes to recruit, set-up, and carry out a single training. Participants also pointed to the challenge of engaging hard-to-reach-groups and expressed concern about sustainability of the program over time – and particularly once Ford Family Foundation financial support expires.

Participants widely urged the development of specific marketing tools in order to better promote SOC. Participants were hopeful that targeted marketing could bolster recruitment, engage and increase attendance for hard-to-reach groups, and further promote prevention messaging. In regard to sustainability and marketing, one participant framed the challenge as ‘capacity,’ i.e.: “I feel like, on top of running SOC, (outreach) is beyond my capacity. Capacity is my keyword. There’s so much possibility, but capacity and focus – figuring out where you’re going to put your energy – I think we need more help with that.”

Overall, participants were very positive about SOC, about its impact on their organizations both internally and externally and seemed eager, with specific ideas, to continue to promote and implement SOC as part of their services. Participants hope to develop a better plan for post-grant sustainability and to receive assistance in marketing SOC in order to reach not-yet trained members of their communities.

I would say we are now intentionally reaching out to organizations with much more focus. It’s given us a purpose to do that – and we get feedback from people saying, “I didn’t know you do that, too.” It’s expanding understanding of who we are and what we do.

ⁱ Please use the following citation format for this report: *Stewards of Children Systems-Level Focus Group Executive Summary* (CPAN, 2017).

