

# Creating a Colorado Where Children Grow Up Free From Sexual Abuse

An Issue Brief on the Prevention of Child Sexual Abuse in Colorado  
November 2021



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The Colorado Child Sexual Abuse Prevention Coalition exists to promote effective and comprehensive education, advocacy and communication to prevent child sexual abuse and protect children.



**COLORADO**  
Office of Early Childhood  
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## Executive Summary

Adults are responsible for creating and sustaining safe, stable, nurturing relationships and environments where children can grow up healthy and reach their full potential. It is possible to ensure that every child, in every community, never experiences sexual abuse if prevention strategies are thoughtfully incorporated into all aspects of society by governments, businesses, nonprofits, community organizations and individuals.

**Creating a Colorado Where Children Grow Up Free From Sexual Abuse: An Issue Brief on the Prevention of Child Sexual Abuse in Colorado** examines data and trends related to child sexual abuse in Colorado, highlights efforts to prevent this trauma and presents recommendations to advance prevention statewide.

## Key Findings

Across Colorado, and in our own backyards, child sexual abuse is a major public health concern which must be addressed as a core element of child safety and family well-being. However, it can be difficult to confront the problem because child sexual abuse is vastly underreported. **Almost 73% of child victims don't disclose their abuse to anyone for at least one year, 45% don't tell anyone for almost five years**, and many never disclose at all.<sup>1</sup> Prior to the COVID-19 pandemic, for the previous five years, the number of children who have been sexually abused had steadily risen in Colorado.<sup>2</sup> From January 2014 through December 2020, more than 7,400 children in Colorado have been identified as having been sexually abused.<sup>3</sup> In 2020 alone, a year when reports of child maltreatment were dramatically down as a result of the COVID-19 pandemic and subsequent quarantine and stay-at-home orders, over 1,000 children were substantiated as victims of child sexual abuse through the child welfare system in Colorado, which doesn't account for all of the children who have not yet been identified.<sup>4</sup>



**ONE YEAR**

Almost 73% of child victims don't disclose their abuse to anyone for at least one year, 45% don't tell anyone for almost five years



The impact of trauma at a young age can last a lifetime, particularly in the absence of a strong connection to networks of survivors and community programs to aid in the life-long process of healing. It is estimated that approximately 1 in 10 children, and specifically 1 in 7 females and 1 in 25 males, will be sexually abused before adulthood.<sup>5</sup> Imagine a disease that affected 1 in 10 U.S. citizens, a disease associated with not only immediate trauma, but a wide array of long-term consequences, including:

- substance misuse, depression, and suicide
- hypertension, heart problems, stroke, and cancer
- behavioral, psychological, and chronic physical problems.<sup>6</sup>

The critical support that is needed to heal from this preventable trauma comes with a significant price tag that could be avoided. It is estimated that the average lifetime cost of sexual abuse per survivor is over \$210,000.<sup>7</sup> The financial costs to support children and youth in their healing processes in Colorado, identified from 2014 through 2020, is estimated to be more than \$1.5 billion.

In the spring of 2020, Illuminate Colorado commissioned a statewide survey of Coloradans related to the prevention of child sexual abuse. Key findings from that public opinion research are highlighted below along with recommendations to create a Colorado where children grow up free from child sexual abuse.

## Recommendations

It is incumbent upon this generation of Coloradans to protect the next by educating themselves on how to create safer communities where everyone is actively thinking about how to prevent children from being sexually abused. This is an opportunity to put the responsibility back where it belongs, with adults, and give all Coloradans the skills they need to protect children and create communities where children have the opportunity to grow up healthy, happy and safe by taking action through the following set of recommendations.

### Awareness & Social Norms

**RECOMMENDATION 1:** Fund strategic multi-year public awareness campaigns reaching all Coloradans to shift the norms related to child sexual abuse prevention by:

- Raising awareness among all adults of the need to model consent, healthy touch and safe, respectful ways to interact with children;
- Raising awareness among parents of the need to use anatomically correct terms with children; and
- Raising awareness among parents and caregivers of the positive norm of having ongoing conversations about healthy development.



### Training & Practice

**RECOMMENDATION 2:** Train adults on their collective responsibility to promote healthy child development and prevent, recognize and respond to child sexual abuse by:

- Promoting training to parents, caregivers, professionals and community members to become better equipped to promote healthy development and prevent, recognize, and respond to child sexual abuse;
- Institutionalizing training with early childhood professionals to deepen understanding of healthy childhood development to be inclusive of sexual development;
- Collaborating with various communities impacted by disproportionate rates of child sexual abuse and counties with higher combined six-year rates of child sexual abuse; and
- Increasing knowledge of parents, caregivers, professionals and community members to identify and address vulnerable situations and environments involving older youth or youth in a position of power.



A majority of adults (57%) say they are confident in their ability to identify situations when a child is at-risk for being sexually abused. Over two-thirds of parents (69%) say they are confident in their ability to identify these situations in which a child could be vulnerable to sexual abuse. Men over 55 years old are consistently the least confident in their ability to recognize unsafe situations.





**One in four adults (25%) say they have encountered a child they suspected may have been a victim of child sexual abuse.**

**RECOMMENDATION 3:** Expand learning opportunities to support adults in building skills and confidence in approaching conversations about child sexual abuse prevention by:

- Integrating the formation of language, scripting, and practice into training courses when appropriate to include terms and phrases adults can use when having discussions with family, friends, neighbors, and community members on creating safe environments and
- Expanding access to opportunities for families, including training and resources, on having conversations with children on healthy development and sexuality.

### Policy & Systemic Recommendations

**RECOMMENDATION 4:** Continue to identify, engage in, and support policies and system improvements to prevent initial occurrence or reoccurrence of child sexual abuse by:

- Supporting organizations that serve children and youth in identifying needed policy changes to prevent child sexual abuse;
- Building the five “Protective Factors” in and around all families;
- Expanding comprehensive sexual education in Colorado as an additional means to prevent child sexual abuse;
- Promoting coordinated and innovative research efforts to better understand the incidence and prevalence of child sexual abuse in Colorado; and
- Continuing the Colorado Child Sexual Abuse Prevention Coalition.



**While nearly half of parents (49%) did not have “the talk” with their parents when they were growing up, 66% of parents plan to have ongoing conversations with their children about sex or puberty.**

**Less than half of parents (47%) say they typically use anatomically correct terms, but, when informed that using anatomically correct terms is a way of preventing child sexual abuse, 71% of parents said they would consider using anatomical terms. It is particularly important to reach men aged 18-54 given that less than half of men (42%) use proper terms.**

**A majority of adults (85%) have not taken any training on child sexual abuse prevention. Of the adults who have taken a training on child sexual abuse prevention, 92% believe it was helpful. In fact, respondents who received training reported a 40 percentage point increase in ability to identify grooming behavior.**





**COLORADO**  
Child Sexual Abuse  
PREVENTION COALITION

## Prevention Underway

### Highlights of Child Sexual Abuse Prevention Efforts in Colorado

Effective child maltreatment prevention efforts involve a spectrum of strategies implemented across multiple levels to ensure children and youth in Colorado grow and develop free from abuse and neglect. In 2015, a group of stakeholders contributing to child sexual abuse prevention efforts across the state began convening to collectively strengthen, leverage, and expand reach and effectiveness of their work. From this group, the Colorado Child Sexual Abuse Prevention Coalition formed in 2016 to promote effective and comprehensive education, advocacy and communication to prevent child sexual abuse and protect children.

The complex nature and varying definitions of child sexual abuse led the coalition to develop the following shared understanding of child sexual abuse for the purposes of prevention efforts:

The involvement of a child or youth (aged 0-18) in sexual activity he or she does not fully comprehend, is unable to give informed consent to, or for which he or she is not developmentally prepared, or else that violates the laws or social taboos of society. Children can be sexually abused by adults, youth or other children who have power or perceived power in the relationship – by virtue of authority, physical ability or disability, age or stage of development, trust, or responsibility. Sexual abuse of children or youth includes sexual contact that is accomplished by force or threat of force, regardless of the age of the participants, and all sexual contact between an adult or youth and a child, regardless of whether there is deception or the child understands the sexual nature of the activity. Sexual contact between children also can be abusive if there is a significant disparity in age, development, or size, rendering a child or young person incapable of giving informed consent. The sexually abusive acts include, but are not limited to, sexual penetration, sexual touching and trafficking; non-contact sexual acts include, but are not limited to such acts as exposure or voyeurism. Sexual exploitation such as purposeful exposure and participation in pornography is part of the breadth of sexual abuse of children and youth.

**Following the establishment of the shared understanding, a review of national research and Colorado data, and collaborative work culminated in the formation of the following research-based recommendations to advance Colorado's child sexual abuse prevention efforts:**

- Establish a shared understanding of child sexual abuse in Colorado;
- Improve adult understanding of healthy development of children; expand best practice, trauma-informed, culturally responsive child and youth sexual abuse prevention programs; and
- Implement policies to amplify child sexual abuse prevention efforts in Colorado.

These recommendations intentionally encompass a comprehensive approach with preventive interventions at multiple levels of the social ecological model (i.e., individual, relationship, community, and societal)<sup>8</sup> to have a population level impact.

Over the last several years, child sexual abuse prevention strategies have been implemented in Colorado communities through a variety of prevention, intervention, and treatment programs and curricula. The Colorado School Safety Resource Center compiles and annually updates [Resources for Child Sexual Abuse and Assault Prevention](#), a list of programs and learning opportunities available across the state, in local communities, counties, and school districts with considerations for level of evidence, audience and cost.

In 2020, Colorado launched the Tip Colorado Initiative funded by the Colorado Children's Trust Fund through the Colorado Department of Human Services at [TipColorado.org](#) to empower more adults to protect children in every community in Colorado from experiencing child sexual abuse by promoting the Stewards of Children® training. Calculating the number of people who need to receive training in every county in Colorado and understanding what is necessary to create real social change in a community, Illuminate identified the tipping point for Colorado, as well as each county, where children grow up happy, healthy and safe in communities that prevent children from being sexually abused.

**Darkness to Light's Stewards of Children (SOC), an evidence-informed, adult-focused child sexual abuse prevention training proven to increase knowledge and change behavior, has revealed positive outcomes in Colorado.**

- 99% of participants reported that they are now willing to intervene if they see someone engage in risky behaviors with a child;
- 97% of participants reported that, as a result of the training, they will be vigilant in creating and respecting boundaries; and
- 96% of participants would recommend the SOC training to a friend, family member or colleague.

**By the end of 2020, Illuminate Colorado reached more than 380,500 Coloradans and, with support of more than 80 local authorized facilitators over several years, more than 8,000 people in Colorado have been trained to prevent, recognize and react responsibly to child sexual abuse. This is no small feat, but it is a far cry from reaching the necessary critical mass that we need to effectively prevent child sexual abuse in Colorado.**

**As the evidence base supporting community-level approaches to child sexual abuse prevention is less developed<sup>4</sup>, key themes have been identified by the Colorado Child Sexual Abuse Prevention Coalition to help guide prevention strategies, including:**

- Increased awareness and commitment, as well as, empowering tools and messaging for all adults of the shared responsibility to prevent child sexual abuse is critical. When all adults, not just parents, understand basic principles of prevention, collectively we can move closer to eliminating child sexual abuse.
- Parents, caregivers and professionals alike don't need to know it all. Being prepared to ask questions and the confidence to take action is a critical first step.
- At the heart of any change is strengthening adults' abilities to have productive, powerful and often difficult conversations. This strength-based shift is paramount to creating meaningful and lasting behavior change by empowering parents, caregivers, community members and professionals with the skills necessary to talk to other adults about child sexual abuse and creating safe environments.





Ultimately, building awareness, knowledge, skills, and confidence with adults, who are supported by communities, systems, and policies to create safe environments, leverages the best of the evidence and expertise available in the prevention of child sexual abuse.

- Adults also need to be able to have conversations with children about health and sexual development. Ensuring adults have access to age-appropriate resources (from infancy through adulthood), with an emphasis on evolving conversations for each life stage, as well as skill practice and follow-up support, will ultimately increase confidence in adults to work through perceived and concrete barriers to preventing child sexual abuse.
- Utilization of anatomically correct terms without shame in the right contexts is a critical skill for young people; while those who are transgender or gender-diverse may use different language for body parts, all young people still need to know how to advocate for themselves, talk to medical professionals, and meet additional needs.
- Statistics show us that 1 in 10 children are victims of child sexual abuse. Statistically speaking, there will be adult survivors of child sexual abuse in attendance of prevention trainings. Maintaining a trauma-informed focus, to ensure the risk of revictimization is minimized, is paramount in supporting adult survivors and their role in preventing child sexual abuse.

**Parents, caregivers and professionals alike don't need to know it all.  
Being prepared to ask questions and the  
confidence to take action is a critical first step.**

- Children, youth and adult survivors need access to individualized and specialized support and treatment in healing from child sexual abuse.
- Community-based conversations about child sexual abuse, accounting for the diversity across Colorado and including culturally responsive programming, is incredibly important. Building networks, inviting groups that are historically underrepresented, and reaching out to communities with higher rates of child sexual abuse in a non-biased way is key to creating a dialogue of prevention. Conversations can be strengthened when more voices are included, and space is allowed for adaptability to the unique needs of a community.

Ultimately, building awareness, knowledge, skills, and confidence with adults, who are supported by communities, systems, and policies to create safe environments leverages the best of the evidence and expertise available in the prevention of child sexual abuse.

# Improvements & Investments in Child Sexual Abuse Prevention & Identification in Colorado

House Bill 13-1271 authorized the creation of a steering committee tasked with developing a recommendation and implementation plan for a statewide child abuse and neglect hotline reporting system, corresponding public awareness campaign and rules relating to the operation of the system, as well as consistent practices for responding to reports and inquiries.

2014

Senate Bill 15-213, the Claire Davis School Safety Act, provided a limit on sovereign immunity in cases in which felony sexual assault occurs on school grounds or is related to a school activity and the school failed to exercise reasonable care in preventing it.

2016

House Bill 16-1224 added human trafficking to the definition of child abuse.

2013

House Bill 13-1081 created the comprehensive human sexuality education grant program to support public schools to create and implement education curriculum.

2014

Senate Bill 14-002 transferred the Safe2Tell program to the Colorado Department of Law and required it to provide awareness and education materials to participating schools and school districts. Safe2Tell Colorado has developed a set of promotional posters for Colorado schools and communities that encourage and empower students to anonymously report safety concerns and help friends who may be hurting.

The Colorado Children's Trust Fund established Child Sexual Abuse Prevention as a priority area, catalyzing the future development of the Child Sexual Abuse Prevention Coalition and the broad dissemination of adult focused training and education opportunities.

2015

The Every Student Succeeds Act (ESSA) passed in December 2015. ESSA defined child sexual abuse prevention and created an opportunity for allocation of funds to child sexual abuse prevention, including addressing school climate issues, norms, and a culture of consent and respect.

Senate Bill 15-020, commonly referred to as "Erin's Law," directed the Colorado School Safety Resource Center to support child sexual abuse education and prevention efforts throughout Colorado. Through SB 15-020, a full-time staff member was appointed to provide resources and training to schools, parents, and students. Each school district is encouraged to adopt a child sexual abuse and assault prevention plan, including comprehensive, age-appropriate curricula for kindergarten through 12th grade.

The Colorado Child Abuse and Neglect Hotline, 1-844-CO-4-KIDS, designed to provide one, easy-to-remember toll-free phone number for individuals to use statewide to report suspected child abuse and neglect became operational.

An ad hoc group of stakeholders contributing to child sexual abuse prevention efforts across the state began convening to create an environmental scan of child sexual abuse in Colorado. A review of national research, Colorado data, and collaborative work culminated in the formation of the following research-based recommendations to advance Colorado's child sexual abuse prevention efforts.

2016

The Colorado Child Sexual Abuse Prevention Coalition formalized to promote effective and comprehensive education, advocacy, and communication to prevent child sexual abuse and protect children.

House Bill 17-1302 created a carve-out from the felony of child exploitation for juveniles engaging in consensual sexting behavior and limited non-consensual sexting behaviors.

2017

2018

2018

House Bill 18-1064 authorized the Colorado Children's Trust Fund to administer the development, promotion, maintenance, and monitoring of an evidence-based or research-based child sexual abuse prevention training model to prevent and reduce the occurrence of child sexual abuse.

The Colorado Office of Early Childhood added a new course to the Professional Development Information System to create broad education of the early childhood workforce, promote healthy child development, and decrease the risk for child sexual abuse.

House Bill 19-1030 created the crime of "unlawful electronic sexual communication" to prohibit an adult in a position of trust from communicating electronically in a sexual manner with 15-17 year olds. A similar protection was already in place for youth aged 14 and younger through the "internet sexual exploitation of a child" statute; thus, HB19-1030 created similar protections for older youth.

2019

House Bill 19-1316 prohibited individuals younger than 16 years of age from obtaining a marriage license, and clarified that 16 and 17 year olds may only obtain a marriage license if a juvenile court determines that the underage party is capable of assuming the responsibilities of marriage and that the marriage would serve the underage party's best interests.

House Bill 19-1032 added certain content requirements for public schools that offer comprehensive human sensuality education, including instruction on consent as it relates to safe and healthy relationships.

Senate Bill 20-102 required that moving forward, health care providers subject to the Medical Transparency Act of 2010 must disclose to patients if they have a final conviction, plea, or disciplinary action for a sex offense or a finding of unprofessional conduct related to sexual misconduct.

2020



### Tip Colorado

Illuminate Colorado launched the Tip Colorado Initiative at [TipColorado.org](https://www.tipcolorado.org) to empower more adults to protect children in every community in Colorado from experiencing child sexual abuse by promoting the Stewards of Children® training.

# 2021

Illuminate Colorado created, launched and implemented two child sexual abuse prevention curricula. Facilitators from across the state were also trained to deliver the curricula in local communities.

Lines in the Sand: Identifying and Addressing Boundary Violations provides important context about setting boundaries and identifying concerning and problematic behaviors, like grooming, and how to address complicated situations.

What to Expect When Talking the “TALK” is designed to support caregivers, parents, and educators in becoming an askable adult and understanding how to support positive sexual development in toddlers, children and youth. From exploring how development progresses to addressing uncomfortable questions and situations, this course focuses on how parents, caregivers and professionals play a role in a child’s life and can positively impact a child’s sexual development, even before you think it is time for “The TALK”.

## Several bills focused on child sexual abuse prevention and response are passed by the Colorado legislature.

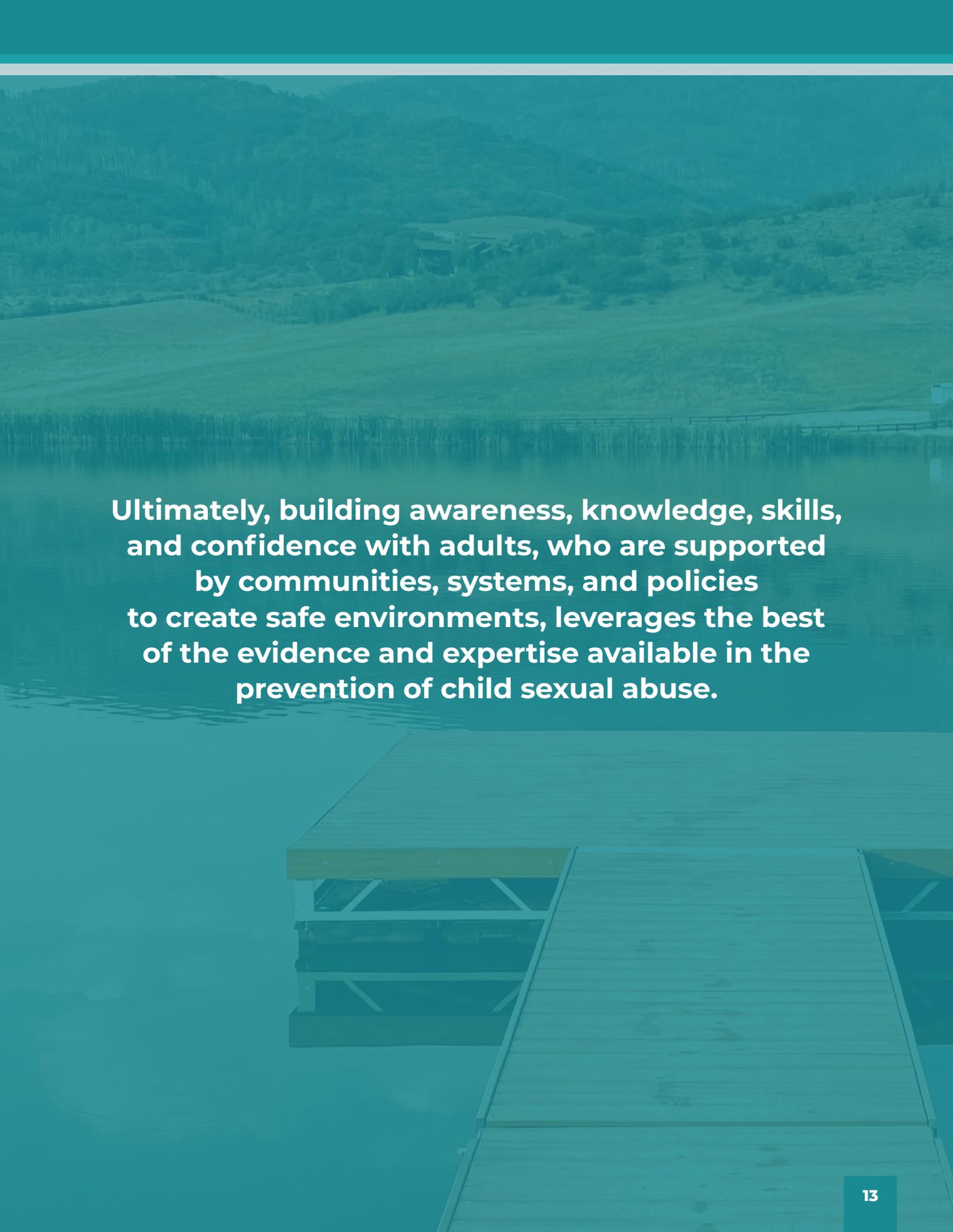
Senate Bill 21-073, Civil Action Statute of Limitations Sexual Assault, removes the statute of limitations and other restrictions on bringing a civil claim based on sexual misconduct, including derivative claims and claims brought against a person or entity that is not the perpetrator of the sexual misconduct.

Senate Bill 21-088, the Child Sexual Abuse Accountability Act, creates a new civil cause of action for any person sexually abused in Colorado while participating in a youth program as a child. The cause of action applies retroactively and victims whose assault occurred between January 1, 1960 and January 1, 2022 may bring a cause of action before January 1, 2025.

SB21-017, Sexual Contact By An Educator, updates hiring practices and ongoing duties of both charter schools and public schools to support information sharing with the Department of Education regarding whether a potential hire or previous employee has been dismissed by or has resigned from a school as a result of an allegation of unlawful sexual behavior or an allegation of a sexual act involving a student who is 18 years of age or older. The bill additionally creates a class 1 misdemeanor, abuse of public trust by an educator, for limited and specific cases of educator sexual contact with students over the age of 18.

House Bill 21-1320, Sunset Sex Offender Management Board (SOMB), authorizes the SOMB to continue until September 1, 2023. A stakeholder process is anticipated in the coming year to create a bill for the next legislative session.

House Bill 21-1069, Enforcement of Sexual Exploitation of a Child, modernizes criminal statute regarding child sexual exploitation to reflect access and viewing due to evolving technology, including accounting for live streaming platforms.



**Ultimately, building awareness, knowledge, skills, and confidence with adults, who are supported by communities, systems, and policies to create safe environments, leverages the best of the evidence and expertise available in the prevention of child sexual abuse.**

# Child Sexual Abuse in Colorado

Child sexual abuse is vastly underreported in the United States. **Almost 73% of child victims don't disclose their abuse to anyone for at least a year, 45% don't tell anyone for almost five years** and, sadly, many never disclose the abuse at all.<sup>1</sup> Underreporting limits understanding of the true incidence and prevalence of child sexual abuse. However, a diverse set of strategies are applied both nationally and locally to help elucidate the scope of child sexual abuse. A meta-analysis of 16 studies estimates the child sexual abuse prevalence rate in the United States to be 7.5%-11.7%, whereby female children experience disproportionate rates at 10.7%-17.4% compared to males at 3.8%-4.6%.<sup>5</sup> Put into context, this study suggests that **approximately 1 in 10 children, and specifically 1 in 7 females and 1 in 25 males**, will be sexually abused before adulthood.<sup>5</sup> Additional coordinated research efforts are required to understand the prevalence and resulting impact of sexual abuse during childhood within the United States and the state of Colorado. Until that time, the primary source of data related to incidence of child sexual abuse in Colorado is the TRAILS system, the Statewide Automated Child Welfare Information System (SACWIS), which holds information related to child welfare and child protection services throughout the state.

## Community Context

Individuals and communities are not to blame for disparities highlighted in the data and trend analysis. The analysis should be held within a broad context to acknowledge that disparities across geography or gender, racial or ethnic identities may be caused by environmental, social and economic factors that have set the foundation of the social norms and systems that have left communities behind. It is also important to consider that seemingly negative disparities across rates of child sexual abuse may be the result of positive engagement, community outreach or encouraged reporting of concerns. Further research and community conversations are encouraged to gain a deeper understanding of the underlying drivers of the trends evidenced in community-level disparities highlighted throughout this brief.

## 2020 At A Glance

Incidents of child sexual abuse officially become known when a child, mandated reporter, professional, friend, relative, neighbor or community member makes a report to a law enforcement agency or county human services department. In 2020, 98,175 referrals were received by county child welfare agencies related to concerns for a child's well-being.<sup>9</sup> The 34,120 referrals or calls from concerned citizens screened into the child protection system for further consideration resulted in the assessment of the safety and well-being of 53,639 children, involving **4,026 allegations of child sexual abuse, 25.4% of those allegations were substantiated.**<sup>10 11</sup>

An Associated Press analysis of state data across the nation found that in 2020, as a result of the coronavirus pandemic, child abuse reports, investigations, substantiated allegations and interventions dropped at a staggering rate. "In the AP's analysis, it found more than 400,000 fewer child welfare concerns reported during the pandemic and 200,000 fewer child abuse and neglect investigations and assessments compared with the same time period of 2019. That represents a national total decrease of 18% in both total reports and investigations. As a result of the COVID-19 pandemic, reports of child abuse and neglect were down throughout the nation as children."<sup>12</sup> This anomaly is also reflected in the data related to child sexual abuse in Colorado.

Prior to 2020, for the previous three years, Colorado had received more than 100,000 referrals or concerns related to the safety and well-being of a child, dropping 15% in 2020.<sup>9</sup> That year was also the first time in more than five years that the number of children identified as having been sexually abused did not rise.<sup>13</sup> Given the deviation from previous trends, for the purposes of this brief, more in-depth analysis excludes 2020 data and instead focuses on Colorado data from 2014-2019.

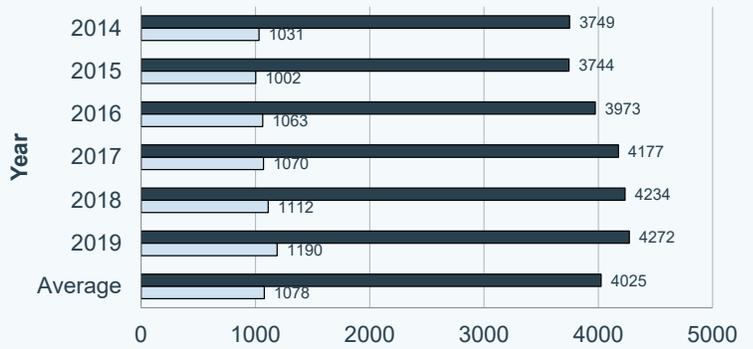
**Six-Year Trend Analysis:** From 2014-2019, child sexual abuse rose (Figure 1).<sup>13</sup> During this period, Colorado saw an average of 4,025 child sexual abuse allegations per year, of which an average of 1,078 (26.8%) were substantiated.<sup>14</sup> These numbers translate to an annual average of 3.24 children experiencing sexual abuse allegations and 1.03 children experiencing substantiated allegations per 1,000 children within the state.<sup>15</sup>

**Gender identity:** Statewide statistics mirror national estimates regarding gender identity of child sexual abuse victims. Females comprised 83% of substantiated sexual abuse allegations across the six-year time period with an annual average of 2,884 allegations and 897 substantiated allegations involving female children compared to 1,139 allegations and 181 substantiated allegations involving male children.<sup>14</sup> In examining total allegations compared to substantiated allegations, 31% of sexual abuse allegations involving female children were substantiated during this time, while only 16% involving male children were substantiated.<sup>13</sup> Available data obscures statewide understanding of child sexual abuse among children of other gender identities. Further study is needed to comprehend the scope of this issue and potential disproportionate impacts among individuals of different genders.

**Figure 1: Number of Child Sexual Abuse Allegations (Total and Substantiated) Increased from 2014-2019 within Colorado**

- Number of child sexual abuse allegations
- Number of substantiated child sexual abuse allegations

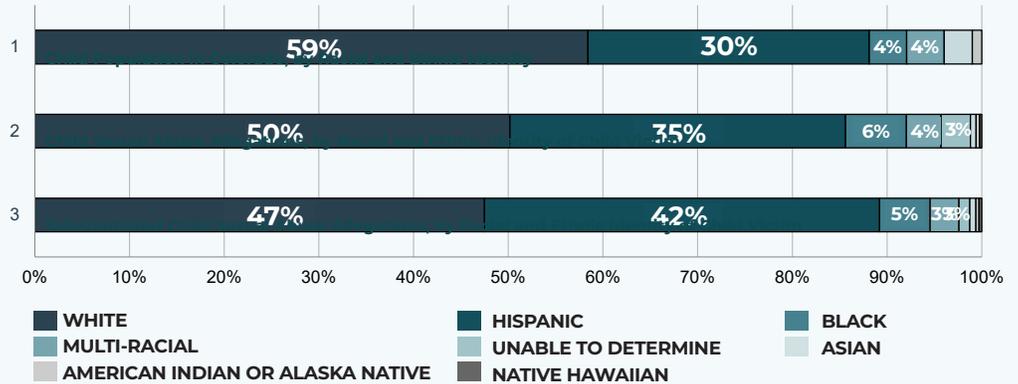
Source: CDHS Community Performance Center, Colorado Department of Human Services



**Racial and ethnic identity:** From 2014-2019, the majority of substantiated sexual abuse allegations involved white and Hispanic child victims, representing 47% and 42% of all substantiated reports respectively during this time (Figure 2).<sup>14</sup> With only 30% of Colorado's child population identifying as Hispanic or Latino, these statistics suggest disproportionate rates of substantiation among this population.<sup>16</sup> In respect to substantiation specifically, 32% of child sexual abuse allegations involving Hispanic children were substantiated. This percentage was lower for reports involving white (26% of reports substantiated), Black (22%), and Multi-Racial (23%) children in the six-year time period.<sup>14</sup>

**Figure 2. White and Hispanic Children Comprise the Majority of Child Sexual Abuse Cases in Colorado (2014-2019)**

Source: CDHS Community Performance Center, Colorado Department of Human Services; U.S. Census Bureau, Retrieved from the Annie E. Casey Foundation KIDS COUNT Data Center.

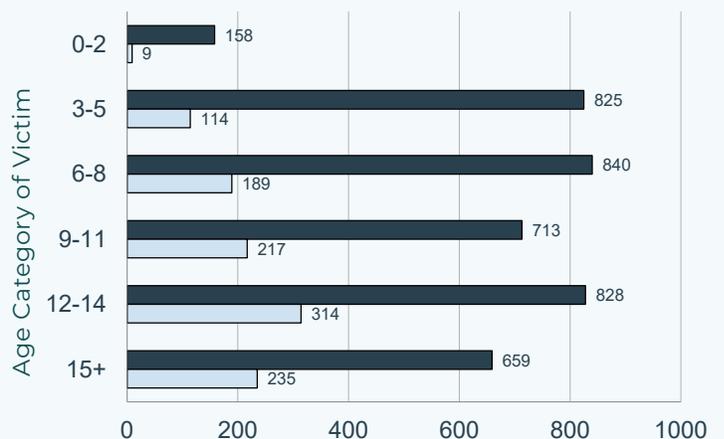


**Age groups:** From 2014-2019, the number of substantiated allegations of child sexual abuse appeared to increase with the age of the child victim, peaking at ages 12-14. However, reports were mainly concentrated among children of younger ages (Figure 3).<sup>13</sup> More specifically, children ages 12-14 represented the highest number of substantiated allegations, while children in the 3-5, 6-8, and 12-14 age groups represented the highest number of allegations.<sup>14</sup> These figures are reflected in substantiation rates. Whereas 6% and 14% of child sexual abuse allegations were substantiated among children ages 0-2 and 3-5, 38% and 36% of allegations were substantiated among children ages 12-14 and 15-17 respectively.<sup>14</sup>

**Figure 3: Substantiated Cases of Child Sexual Abuse In Colorado were Highest Among Victims 12-14 Years of Age (2014-2019)**

- Average number of child sexual abuse allegations per year, by age category of child victim
- Average number of substantiated child sexual abuse allegations per year, by age category of child victim

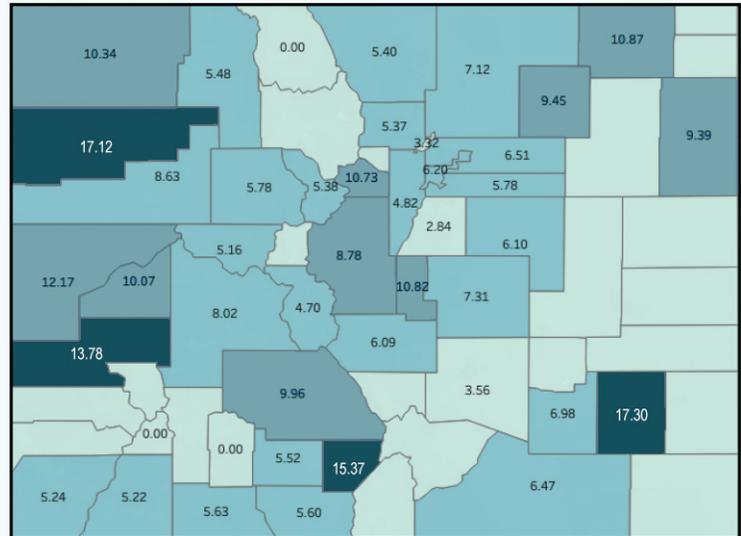
Source: CDHS Community Performance Center, Colorado Department of Human Services



**Geographic region:** From 2014-2019, 6.18 per 1,000 children in Colorado were victims of substantiated sexual abuse allegations.<sup>17</sup> Examining rates of child sexual abuse at the county-level may identify increased need for support systems and resources in certain counties and regions of the state (Figure 4). While six-year rates help to obtain a more comprehensive understanding of county need, counties with smaller populations, particularly those in rural and frontier regions, are subject to greater fluctuation in rates. Additional county and sub-county research is needed to further examine prevalence of child sexual abuse in Colorado and where increased support systems and resources may be most impactful.

**Figure 4. Number of Child Victims of Substantiated Sexual Abuse Allegations per 1,000 Children from 2014-2019, by County**

**Source:** Colorado Department of Human Services (requested by Illuminate Colorado, 2021).



0.00 17.30

Rate calculated as (count of children with a substantiated sexual abuse allegation from 2014-2019 / child county population) \* 1000. Blank counties indicate low counts (<11) for the 2014-2019 period and are suppressed for confidentiality. Counties with a rate of 0 indicate zero child victims of substantiated sexual abuse allegations from 2014-2019.

## Financial Impact of Child Sexual Abuse

The impact of trauma at a young age can last a lifetime, particularly without support and community programs to aid the process of healing. This critical support comes with a significant price tag. It is estimated that the average lifetime cost of sexual abuse per survivor is over \$210,000.<sup>7</sup> Imagine a disease that affected 1 in 10 U.S. citizens, a disease associated with not only immediate trauma, but a wide array of long-term consequences, including:

- Substance misuse, depression, and suicide;
- Hypertension, heart problems, stroke, and cancer; and
- Behavioral, psychological, and chronic physical problems.<sup>6</sup>

From January of 2014 through December 2020, Coloradans reported concerns through the Colorado Child Abuse and Neglect Hotline System 1-844-CO-4-KIDS, resulting in more than 7,400 children in Colorado identified as having been sexually abused.<sup>13</sup> The estimated financial costs to support these children on their journey toward healing is more than \$1.5 billion.

## Public Opinion

In the spring of 2020, Illuminate Colorado commissioned a statewide survey of Coloradans to begin to identify quantitative baseline measurements of attitudes, knowledge and behaviors related to the prevention of child sexual abuse. The survey results both confirm and dispel assumptions about the public's beliefs and motivations for behaviors related to child sexual abuse prevention and provide a baseline to measure the impact of future public awareness efforts.

## Research Methodology

The research tool selected to measure attitudes, beliefs and behaviors related to the prevention of childhood sexual abuse was a statewide quantitative survey using an online panel of adults and parents in Colorado. The sample for this survey was stratified based on geography, age, ethnicity, and gender. This scientific methodology ensures results that are representative of the state's adult population-at-large. In addition, to enhance our quantitative findings, the independent researcher interviewed 24 respondents from a list of CO adults who had previously had child sexual abuse training. This study had a sample size of 500 adults, with an oversample sufficient to reach 300 parents who have children at home 18 years old or younger. The margin of error for the base sample survey is ±4.4% in 95 out of 100 cases and ±5.7% for parents. Unless otherwise noted, all the findings in this report are derived from this scientifically representative quantitative study.



## Understanding of the Facts, Prevalence and Experiences Related to Child Sexual Abuse

Researchers began with an effort to gauge how prevalent child sexual abuse is perceived to be in the state and in one's own community. Adults estimated, on average, approximately 32% of children in Colorado are sexually abused before they are 18 years old, decreasing to an average of 27% when asked to estimate the number of children in their local community who are sexually abused before they turn 18.

Although this is slightly less than the mean statewide assessment, we see that in both cases, **there is common acceptance that child sexual abuse is a problem and prevalent in Colorado with results showing that parents are even more likely** than non-parents to believe that child sexual abuse is prevalent in Colorado and their community. **One in four adults (25%) say they have encountered a child they suspected may have been a victim of sexual abuse.**

Researchers shared a set of true statements with respondents and asked if they believed the statements to be true or false. Positive results measuring trust and beliefs show that **94% of adults believed 90% of child sexual abuse victims and their families know and trust their abuser**, with those questioning this statistic believing the rate to be even higher. Additionally, a majority of adults and parents (85%) believe that 1 in 10 children are abused by their 18th birthday. Less positive, but still a majority of adults (69%) believe the fact that 40% of child sexual abuse victims are abused by another youth. Women (35%) and non-parents (33%) were most likely to believe this statement to be false.

## Identification of Situations that Place Children At-Risk

Nearly 1 in 3 adults (29%) expressed a lack of confidence in their ability to identify vulnerable situations or environments where any child could be vulnerable to sexual abuse. A majority of adults (57%) say they are confident in their ability to identify situations when a child is at-risk for being sexually abused. Hispanics (66%) are more confident than adults overall, whereas whites (54%) are slightly less confident. Comparatively, when asked the same question, **over two-thirds of parents (69%) say they are confident in their ability to identify these situations in which a child could be vulnerable to sexual abuse.** Men over 55 years old are consistently the least confident in their ability to recognize these unsafe situations.

One's ability to identify a situation in which a child is at-risk for sexual abuse is dependent on more than confidence levels. Therefore, researchers conducted split sample surveys to measure respondents' ability to identify situations when a child is at-risk for being sexually abused and learn more about what role gender and relationship between the potential perpetrator or potential victim may play in protecting children. Scenarios presented to respondents, and included in the Appendix, allowed researchers to measure the perceived risk in given situations, and those variations based upon respondent demography.

The scenario in which respondents feel children are at the highest risk is when a male family member visits and tries to hug a child in the family repeatedly, even when the child is expressing discomfort. Despite the fact that a high percentage of victims know their perpetrators and/or the abusers are themselves teens, some of the most "familiar" situations (i.e. teen coaches) tend to be viewed as the least risky. Teen coaches are deemed less threatening than even a random adult.



## Identification of Children Experiencing Sexual Abuse and Grooming

Less than half of adults (43%) are confident in their ability to identify a child who is being sexually abused and one in three adults (32%) reported a lack of confidence in their ability to identify grooming behaviors. A majority of adults (52%) say they are confident in their ability to identify a child being groomed for sexual abuse. The level of confidence increases among parents, with almost two-thirds of parents (65%) stating they are confident in their ability to identify grooming behavior and more than half of parents (58%) reporting that they are confident in their ability to identify a child who is being sexually abused.

## Behavioral Norms Related to Prevention

It was important to gain a level of understanding of the current norms and behaviors known to be associated with preventing child sexual abuse. These results indicate that what parents are doing today differ from what they experienced growing up. Nearly half of parents (49%) did not have “the talk” with their parents when they were growing up, only 21% of parents reported having had ongoing conversations with their parents when they were growing up and 66% of parents plan to have ongoing conversations with their children about sex or puberty. However, 51% of parents are not very confident or only somewhat confident in their ability to talk to their child about sex.

One in four parents (25%) believe parents should begin speaking with their children about sex by the age of 10 years old. This is a year younger (mean score) than the age parents believe their kids start talking with their peers about these subjects. Just over 3 in 5 parents (62%) say they have already started having conversations about sex with their children.

Communication is an important component of child sexual abuse prevention. A majority of adults and parents (72%) believe girls and boys should be communicated to the same way about sexual abuse, which is a positive indication that the public understands that children in all genders are at-risk of abuse. When asked about the terms used when talking about these subjects with their kids, just **under half of parents (47%) say they typically use anatomically correct terms** and women (56%) are more likely than men (42%) to use proper terms. Interestingly, those who have encountered suspected abuse (63%) are much more likely to use proper terms when speaking to their children. And, **when informed that using anatomically correct terms is a way of preventing child sexual abuse, 71% of parents (+24%) said they would consider using correct terms rather than slang.**

## Training

A majority of adults (85%) have not taken any training on child sexual abuse prevention. Of the adults who have taken a training on child sexual abuse prevention (n=74), 92% believe it was helpful. In fact, respondents who received training reported a 40-point increase in ability to identify grooming behavior. When asked if they would be interested in taking a free online training course on child sexual abuse prevention, 42% of adults and a majority of parents (63%) say they would be interested. While nearly two-thirds of parents say they would be interested in training, only one-third of non-parents say the same, stating time constraints and not regularly being around children as the main reasons they would not be interested. Also, men (38% interested) are less interested than women (47%) overall.

## Conclusion & Recommendations

The Centers for Disease Control and Prevention (CDC) has developed several technical packages to support states and communities in leveraging the best available evidence to prevent adverse childhood experiences, including child maltreatment and sexual violence. Strategies outlined include: strengthening economic support for families; promoting social norms that protect against violence and adversity; ensuring a strong start for children and paving the way for them to reach their full potential; teaching skills to help parents and youth handle stress, manage emotions, and tackle everyday challenges; connecting youth to caring adults and activities; and intervening to lessen immediate and long-term harms.<sup>18</sup>



Building off of these proven strategies, data and trends, and existing efforts related to child sexual abuse prevention in Colorado, the following recommendations have been developed to advance prevention efforts statewide. Across all categories of recommendations the themes of strengthening conversations and relationships, increasing knowledge, building confidence, and gaining an understanding of collective responsibility to prevent child sexual abuse emerge.

### Awareness & Social Norms Recommendations

#### RECOMMENDATION 1: Fund strategic multi-year public awareness campaigns reaching all Coloradans to shift the norms related to child sexual abuse prevention by:

- **Raising awareness among all adults of the need to model consent, healthy touch and safe, respectful ways to interact with children.** Only half of adults (52%) reported being confident in their ability to identify a child being groomed for sexual abuse. Healthy affection and touch is protective from child sexual abuse especially with parents, caregivers and family members.<sup>19, 20, 21, 22</sup> By raising awareness of what is healthy and modeling positive normative behaviors, including identifying askable or safe adults, protective capacities can be increased and boundary infringements can be more easily identified.
- **Raising awareness among parents of the need to use anatomically correct terms with children.** Under half of parents (47%) say they typically use anatomically correct terms, and, when informed that using anatomically correct terms is a way of preventing child sexual abuse, 71% of parents (+24%) said they would consider using anatomical terms. It is particularly important to reach men aged 18-54 given that less than half of men (42%) use proper terms. Use of anatomically correct terms promotes positive body image, self-confidence, and parent-child communication; discourages abusers; and, in the event of abuse, helps children and adults navigate the disclosure and forensic interview process.<sup>19, 20, 21, 22</sup>
- **Raising awareness among parents and caregivers of the positive norm of having ongoing conversations about healthy development.** Given results indicating that what parents are doing today differs from what they experienced growing up, positive norms should be leveraged to increase the preventative behavior of having ongoing conversations. While nearly half of parents (49%) did not have “the talk” with their parents when they were growing up, 66% of parents plan to have ongoing conversations with their children about sex or puberty. Continuous age-appropriate conversations over time, with evolving language and messaging as children get older, lay an important foundation for children in regards to consent, development and safety.

### Training & Practice Recommendations

#### RECOMMENDATION 2: Train adults on their collective responsibility to promote healthy child development and prevent, recognize and respond to child sexual abuse by:

- **Promoting training to parents, caregivers, professionals and community members to become better equipped to promote healthy development and prevent, recognize, and respond to child sexual abuse.** A majority of adults (85%) report having not taken any training on child sexual abuse prevention, yet nearly two-thirds of parents say they would be interested in training. Continued efforts to reach Coloradans is essential, such as through expanding the Tip Colorado Initiative efforts to reach more adults and be inclusive of a greater breadth and depth of prevention opportunities.



**Institutionalizing training with Early Childhood Professionals to deepen understanding of healthy childhood development to be inclusive of sexual development.** Early Childhood professionals provide critical support in whole child healthy development including social, emotional, sexual, and physical domains. By normalizing sexual development as a part of whole child development, providing accurate information and skill building opportunities, and establishing protective policies & practices, early childhood professionals can promote healthy behaviors, respond effectively to children's questions, and decrease the likelihood of child sexual abuse.

- **Collaborating with various communities impacted by disproportionate rates of child sexual abuse and counties with higher combined six-year rates of child sexual abuse.** Combined six-year rates (2014-2019) of child sexual abuse in Colorado counties range from 0.0 to 17.30 per 1,000 children. Data and trends from this six-year period reveal disproportionalities among age, gender and race/ethnicity:
  - **Age:** Children ages 9-11, 12-14 and 15-17 were involved with the highest number of substantiated child sexual abuse allegations, with a statewide average of 217, 314 and 235 substantiated allegations per year, respectively.<sup>14</sup> However, the highest number of reports involved children in the 3-5, 6-8 and 12-14 age groups.<sup>13</sup>
  - **Gender:** Females comprised 83% of substantiated child sexual abuse allegations with a statewide average of 897 substantiated allegations per year. A smaller proportion of child victims were male-identifying and the substantiation rate of allegations was much lower among male-identifying children with only 16% having substantiated allegations.<sup>14</sup> Lack of data on gender nonconforming children may also mask additional disproportionate impacts among other gender subpopulations.
  - **Race/Ethnicity:** From 2014-2019, 42% of substantiated child sexual abuse allegations involved Hispanic victims.<sup>14</sup> With only 30% of Colorado's child population identifying as Hispanic or Latino, these statistics represent disproportionate rates of child sexual abuse substantiation among this population.<sup>16</sup>

Given these findings, building relationships, trust, and partnerships with communities and historically underrepresented populations to identify, lead, and implement tailored prevention efforts to best meet the needs of their communities, including support in expanding representative messengers, is critical in expanding collaboration efforts to prevent, recognize, and respond to child sexual abuse.

- **Increasing knowledge of parents, caregivers, professionals and community members to identify and address vulnerable situations and environments involving older youth or youth in a position of power.** Statistically, 40% of child sexual abuse victims are abused by another youth<sup>23</sup>, however 1 in 3 (31%) of all the participants did not believe this to be true. In addition, despite the fact that a high percentage of victims know their perpetrators and/or the offenders are older youth, situations involving one-on-one environments with older youth tend to be viewed as the least risky, suggesting that both parents and non-parents alike do not have the knowledge necessary to identify vulnerable situations that would need increased supervision and intervention.

### **RECOMMENDATION 3: Expand learning opportunities to support adults in building skills and confidence in approaching conversations about child sexual abuse prevention by:**



- **Integrating the formation of language, scripting, and practice into training courses when appropriate to include terms, phrases and scripts that adults can use when having discussions with family, friends, neighbors, and community members on creating safe environments.** Parents, caregivers, community members and professionals need the skills necessary to talk to other adults who come in contact with children and youth about preventing child sexual abuse and creating safe environments. One in 3 adults (29%) expressed a lack of confidence in their ability to identify vulnerable situations or environments and 32% of adults reported a lack of confidence in their ability to identify grooming behaviors. But, when people had received training, respondents reported a **40-percentage point increase** in ability to identify grooming behavior. Both parents and non-parents would benefit from increased knowledge, language, and resources on the spectrum of behaviors associated with vulnerable situations and grooming behaviors and how to prevent, identify, and intervene in those situations.
- **Expanding access to training opportunities and resources for families on how to have conversations with children on healthy development and sexuality.** While only 21% of parents reported having had ongoing conversations with their parents when they were growing up, 66% of parents plan to have ongoing conversations with their children about sex or puberty. However, 51% of parents are not very confident or only somewhat confident in their ability to talk to their child about sex. Parents need support in developing the language, skills, and confidence necessary to talk directly to their children about healthy sexual development and safety. When adults provide continuous age-appropriate conversations over time with evolving language and messaging, they lay an important foundation for children in regards to consent, development and safety.

## Policy & Systemic Recommendations

### RECOMMENDATION 4: Continue to identify, engage in, and support policies and system improvements to prevent initial occurrence or reoccurrence of child sexual abuse by:

- **Supporting organizations that serve children and youth in identifying needed policy changes to prevent child sexual abuse.** According to the Centers for Disease Control and Prevention, organizations should consider: standards for screening and selecting employees and volunteers; guidelines on interactions between individuals; monitoring behavior; ensuring safe environments; responding to inappropriate behavior, breaches in policy, and allegations and suspicions of child sexual abuse; and training about child sexual abuse prevention.<sup>24</sup> When organizations have the tools and support needed to address the identification of gaps in policies that can prevent boundary infringements and child sexual abuse, organizations are better equipped to create, implement and maintain policies that can positively impact the safety of children.
- **Building the five Protective Factors in and around all families.** Protective factors help buffer from the negative consequences of exposure to risks by either reducing the impact of the risk or changing the way a person responds to the risk. Consequently, enhancing protective factors can reduce the likelihood of problem behaviors arising. Developed by the Center for the Study of Social Policy, Strengthening Families™ is a research-informed approach to:
  - Increase family strengths,
  - Enhance child development, and
  - Reduce the likelihood of child abuse and neglect.

Research has shown the five Protective Factors have the power to prevent and reduce the likelihood of child abuse and neglect, including sexual abuse. However, risk and protective factors for child maltreatment are not randomly distributed among families and communities. Family well-being and child maltreatment are closely linked to the uneven distribution of wealth, opportunities and privileges in our communities. By building meaningful access to protective factors for all families and communities, we can advance equity in family well-being.

- **Expanding comprehensive sexual education in Colorado as an additional means to prevent child sexual abuse.** By addressing communication, respect, and consent, as well as improving communication between parents and youth, comprehensive sexual education programs have been shown to reduce high risk sexual behavior, a clear risk factor for sexual violence victimization and perpetration.<sup>8</sup>
- **Promoting coordinated and innovative research efforts to better understand the incidence and prevalence of child sexual abuse in Colorado.** Child sexual abuse is vastly underreported, and data on impacts to underrepresented subpopulations is limited. Creative and coordinated strategies are critical for understanding the true scope of child sexual abuse in Colorado, and data collection efforts including underrepresented child identities are needed to identify and, thus, address other potential disproportionalities among child sexual abuse victims.
- **Continuing the Colorado Child Sexual Abuse Prevention Coalition.** The coalition is comprised of dedicated partners from across the state committed to promoting effective and comprehensive education, advocacy, and communication to prevent child sexual abuse and protect children. Specific topics include the exploration of gaps in hiring practices both in schools and in youth-serving organizations to better understand what policies or procedures could be enforced, updated, or created to help prevent potentially abusive adults from leaving one organization and being hired at another when there is a concern or suspicion of problematic sexual behavior, but not a charge or conviction.

We all play a role in preventing child abuse. This is especially true when thinking of the prevention of child sexual abuse. It is an adult's responsibility to:

- Have conversations that may feel difficult, but ultimately establish boundaries that protect children and youth,
- Talk to their children and other adults about healthy sexual development, and
- Ensure policies and practices are in place to protect children.

Each one of us has a collective responsibility to work together to shift social norms, promote training and encourage practice transformation to prevent child sexual abuse in Colorado. By implementing the recommendations outlined in this brief, Colorado can ensure parents, caregivers, professionals and community members have the tools necessary to create and sustain safe, stable, nurturing relationships and environments where children can grow up healthy and reach their full potential, free from being sexually abused.



# Endnotes

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## **Appendix**



**4.WPA INTELLIGENCE**  
 214 Fourth Street, SE  
 Washington, DC 20003  
 202.470.6300  
[www.wpaintel.com](http://www.wpaintel.com)



WPA ID: 20-145-14M

**CO\_CDHS\_CHILD SEX ABUSE AWARENESS\_MQ\_200526**  
**COLORADO STATEWIDE**  
**ADULTS/PARENTS**  
**MAY 2020**

**SAMPLE:**

N=500 Colorado Adults with oversample sufficient to reach n=300 parents of children up to 18 years old.  
 MoE=±4.4%

**INTRODUCTION:** Hello. Today you'll be taking a survey from a national public opinion firm conducting research in Colorado on child sexual abuse awareness. All of your responses will remain anonymous, and they will help us shape prevention, education and outreach programs in Colorado. We understand this is an extremely sensitive topic, especially if you have personally been impacted by sex abuse. Although we would appreciate your participation, given the sensitive nature of this topic, if you would rather not participate, please exit the survey now.

**SCREENER**

1. First, are you or any member of your immediate family a member of the news media, a public relations company, or an active participant with any political campaign?
  1. Yes.....**TERMINATE**
  2. No/All other ..... 100%
  
2. Are you eighteen years of age or older?
  1. Yes ..... 100%
  2. No.....**TERMINATE**
  
3. Are you a parent of a child or children under the age of eighteen who lives with you at least some of the time?
  1. Yes .....**CONTINUE-CODE AS PARENT**
  2. No.....**CONTINUE-CODE AS ADULT**

**IF Q3:1 ASK Q4**

4. And, what are the ages of the child or children in your home?

**SHOW DROP-DOWNS, SELECTING FOR NUMBER OF CHILDREN, AND GENDER, AGES (<1 year-17) IN ONE YEAR INCRIMENTS-RECODE INTO AGES 0-5, 6-12, 13-17**



5. Are you currently employed, a student, or are you retired?

**IF EMPLOYED, SHOW:**

And, are you employed in any of the professions shown below?

- |                                                                                 |                                                             |
|---------------------------------------------------------------------------------|-------------------------------------------------------------|
| 1. Physician or surgeon (including physician in training)                       | 22. Commercial film and photographic print processor        |
| 2. Child health associate                                                       | 23. Firefighter                                             |
| 3. Medical examiner or Coroner                                                  | 24. Victim's advocate                                       |
| 4. Dentist                                                                      | 25. Counselor (licensed)                                    |
| 5. Osteopath                                                                    | 26. Marriage and family therapist (licensed)                |
| 6. Optometrist                                                                  | 27. Psychotherapist (unlicensed)                            |
| 7. Chiropractor                                                                 | 28. Clergy member                                           |
| 8. Chiropodist or Podiatrist                                                    | 29. Registered dietitian                                    |
| 9. Nurse – Registered or Licensed practical nurses                              | 30. State Department of Human Services employee             |
| 10. Hospital personnel engaged in the admission, care, or treatment of patients | 31. Juvenile parole and probation officer                   |
| 11. Christian science practitioner                                              | 32. Child and family investigator                           |
| 12. Public or private school official or employee                               | 33. State bureau of animal protection (officers and agents) |
| 13. Social worker                                                               | 34. Animal control officer                                  |
| 14. Mental health professional                                                  | 35. Child care facility or agency worker (licensed)         |
| 15. Dental hygienist                                                            | 36. Family therapist/therapist candidate                    |
| 16. Paid non-school athletic sports coach                                       | 37. Student                                                 |
| 17. Psychologist/psychologist candidate                                         | 38. Unemployed                                              |
| 18. Physical therapist                                                          | 39. Retired                                                 |
| 19. Veterinarian                                                                | 40. Other non-employment status (specify)                   |
| 20. Peace officer                                                               | 41. Other employment status (specify)                       |
| 21. Pharmacist                                                                  | 42. DK/Refused                                              |

**SPLIT-SAMPLE Q6A-B**

N=245

6.A Thinking about the topic of child sexual abuse in Colorado, about what percent of Colorado children would you guess have been abused before they are 18 years old?

	<u>Core</u>	<u>Parent</u>
0-9%	13%	7%
10-19%	21%	19%
20-29%	18%	23%
30-39%	19%	20%
40-49%	5%	6%
50-59%	6%	7%
60-69%	8%	8%
70-79%	5%	6%
80-89%	4%	3%
90-100%	<1%	1%
<b>Mean</b>	<b>32%</b>	<b>34%</b>

N=255

6.B Thinking about the topic of child sexual abuse in your local community, about what percent of children in your local community would you guess have been abused before they are 18 years old?

**SHOW SLIDER FROM 0-100**

	<u>Core</u>	<u>Parent</u>
0-9%	20%	15%
10-19%	21%	22%
20-29%	24%	23%
30-39%	9%	7%
40-49%	7%	7%
50-59%	10%	9%
60-69%	3%	9%
70-79%	4%	6%
80-89%	1%	1%
90-100%	2%	2%
<b>Mean</b>	<b>27%</b>	<b>32%</b>

7. Thinking first about prevention of child sex abuse....thinking specifically about situations or environments where any child could be vulnerable to sexual abuse,...how confident are you in your ability to identify these situations and environments? Would you say that you are ROTATE TOP TO BOTTOM; BOTTOM TO TOP very confident, somewhat confident, not very confident, or not confident at all END ROTATION in your ability to identify situations or environments where any child could be vulnerable to sexual abuse?

	<u>Core</u>	<u>Parent</u>
<b>TOTAL VERY/SOMEWHAT CONFIDENT</b>	<b>57%</b>	<b>69%</b>
<b>TOTAL NOT VERY/NOT CONFIDENT AT ALL</b>	<b>28%</b>	<b>20%</b>
1. Very Confident	9%	16%
2. Somewhat Confident	48%	53%
3. DK/Refused	15%	10%
4. Not Very Confident	25%	19%
5. Not Confident At All	4%	1%

8. Next...thinking specifically about a child being groomed for sexual abuse. Grooming is a process by which offenders gradually draw victims into a sexual relationship and maintain that relationship in secrecy. This behavior includes subtle, gradual, and escalating process of building trust with a child and it may take place over weeks, months, or even years before any abuse occurs. Those who offend often start by grooming adults to make sure their time with the child is welcomed and encouraged. How confident are you in your ability to identify this type behavior? Would you say that you are ROTATE TOP TO BOTTOM; BOTTOM TO TOP very confident, somewhat confident, not very confident, or not confident at all END ROTATION in your ability to identify "grooming" behavior?

	<u>Core</u>	<u>Parent</u>
<b>TOTAL VERY/SOMEWHAT CONFIDENT</b>	<b>52%</b>	<b>65%</b>
<b>TOTAL NOT VERY/NOT CONFIDENT AT ALL</b>	<b>31%</b>	<b>22%</b>
1. Very Confident	13%	18%
2. Somewhat Confident	40%	47%
3. DK/Refused	16%	13%
4. Not Very Confident	26%	20%
5. Not Confident At All	6%	2%

9. Next, thinking specifically about a child who is being sexually abused... how confident are you in your ability to identify a child who is being sexually abused? Would you say that you are ROTATE TOP TO BOTTOM; BOTTOM TO TOP very confident, somewhat confident, not very confident, or not confident at all END ROTATION in your ability to identify a child that is being sexually abused?

	<u>Core</u>	<u>Parent</u>
<b>TOTAL VERY/SOMEWHAT CONFIDENT</b>	<b>43%</b>	<b>58%</b>
<b>TOTAL NOT VERY/NOT CONFIDENT AT ALL</b>	<b>37%</b>	<b>25%</b>
1. Very Confident	9%	15%
2. Somewhat Confident	34%	43%
3. DK/Refused	20%	16%
4. Not Very Confident	31%	24%
5. Not Confident At All	5%	1%

10. What signs and behaviors in others might you observe that could indicate a child is at risk of being sexually abused, or is being sexually abused?

SEE RESPONSE TYPED

11. How likely are you to take some action, in a case where you suspect child sexual abuse?

	<u>Core</u>	<u>Parent</u>
<b>TOTAL VERY/SOMEWHAT LIKELY</b>	<b>88%</b>	<b>91%</b>
<b>TOTAL NOT VERY/NOT LIKELY AT ALL</b>	<b>3%</b>	<b>2%</b>
1. Very Likely	58%	70%
2. Somewhat Likely	31%	22%
3. DK/Refused	9%	7%
4. Not Very Likely	2%	1%
5. Not Likely at All	<1%	1%

In the context of preventing child sexual abuse -

12. What would you do first, in cases where you detect that a child might be uncomfortable or entering a potentially vulnerable situation?

SEE RESPONSE AS TYPED

In cases where you suspected child sexual abuse is already taking place...

SPLIT-SAMPLE A/B

- 13.A What would you do first, in cases where you know the individuals directly involved?

SEE RESPONSE AS TYPED

- 13.B. What would you do first, in cases where you do NOT know the individuals directly involved?

SEE RESPONSE AS TYPED

Now, I'm going to show you a list of scenarios that may or may not indicate a child is at risk or vulnerable to sexual abuse, and for each one, please tell me if this particular scenario, in your opinion, represents a child **ROTATE** at higher risk or not at a higher risk **END ROTATE** of sexual abuse.

**IF AT RISK/NOT AT RISK ASK:**

And, would you say that you believe the child is VERY MUCH (at risk/not at risk) or only SOMEWHAT.

The (first/next) one is...**RANDOMIZE ORDER, SHOW ALL**

You become aware of....

**SPLIT-SAMPLE A/B QUESTIONS**

		Total At Risk	Very Much at Risk 1.	Smwt at Risk 2.	Unsure 3.	Smwt not at Risk 4.	Very Much not at Risk 5.	Total Not at Risk	
14.	A teenager volunteering to coach a youth soccer team offers a player one on one lessons to get ready for a tournament and then also offers to drive them home after the practice.	<b>Core</b>	<b>52%</b>	12%	40%	29%	17%	2%	<b>19%</b>
		<b>OS</b>	<b>61%</b>	19%	42%	23%	13%	3%	<b>16%</b>
15.A	A teenage girl volunteering to coach a youth soccer team offers a player one on one lessons to get ready for a tournament and then also offers to drive them home after the practice.	<b>Core</b>	<b>43%</b>	10%	33%	31%	24%	2%	<b>26%</b>
		<b>OS</b>	<b>54%</b>	15%	39%	23%	21%	2%	<b>23%</b>
15.B	A teenage boy volunteering to coach a youth soccer team offers a player one on one lessons to get ready for a tournament and then also offers to drive them home after the practice.	<b>Core</b>	<b>52%</b>	9%	43%	31%	13%	3%	<b>16%</b>
		<b>OS</b>	<b>62%</b>	15%	47%	27%	9%	2%	<b>11%</b>
16.A	A teenager volunteering to coach a girl soccer team offers a player one on one lessons to get ready for a tournament and then also offers to drive them home after the practice.	<b>Core</b>	<b>55%</b>	14%	40%	27%	18%	1%	<b>19%</b>
		<b>OS</b>	<b>65%</b>	23%	42%	20%	13%	2%	<b>15%</b>
16.B	A teenager volunteering to coach a boy soccer team offers a player one on one lessons to get ready for a tournament and then also offers to drive them home after the practice.	<b>Core</b>	<b>52%</b>	11%	41%	33%	12%	3%	<b>15%</b>
		<b>OS</b>	<b>61%</b>	16%	45%	27%	11%	1%	<b>12%</b>
17.	A child receives private music lessons from an adult. The lesson will be one on one in a room with a closed door.	<b>Core</b>	<b>57%</b>	18%	37%	28%	13%	2%	<b>15%</b>
		<b>OS</b>	<b>66%</b>	23%	43%	20%	12%	1%	<b>13%</b>
18.A	A girl receives private music lessons from an adult. The lesson will be one on one in a room with a closed door.	<b>Core</b>	<b>61%</b>	23%	38%	29%	9%	1%	<b>10%</b>
		<b>OS</b>	<b>72%</b>	26%	46%	21%	6%	1%	<b>7%</b>
18.B	A boy receives private music lessons from an adult. The lesson will be one on one in a room with a closed door.	<b>Core</b>	<b>55%</b>	15%	39%	28%	14%	4%	<b>17%</b>
		<b>OS</b>	<b>64%</b>	19%	45%	18%	15%	3%	<b>18%</b>
19.A	A child receives private music lessons from a man. The lesson will be one on one in a room with a closed door.	<b>Core</b>	<b>65%</b>	25%	40%	26%	8%	1%	<b>9%</b>
		<b>OS</b>	<b>70%</b>	28%	42%	23%	7%	1%	<b>7%</b>

You become aware of....

**SPLIT-SAMPLE A/B QUESTIONS**

		Total At Risk	Very Much at Risk 1.	Smwt at Risk 2.	Unsure 3.	Smwt not at Risk 4.	Very Much not at Risk 5.	Total Not at Risk	
19.B	A child receives private music lessons from a woman. The lesson will be one on one in a room with a closed door.	<b>Core</b>	<b>46%</b>	10%	36%	29%	21%	4%	<b>25%</b>
		<b>OS</b>	<b>58%</b>	13%	45%	20%	19%	3%	<b>22%</b>
20.	A family member visits and tries to hug a child in the family repeatedly, even when the child is expressing discomfort.	<b>Core</b>	<b>68%</b>	25%	43%	26%	5%	1%	<b>6%</b>
		<b>OS</b>	<b>75%</b>	28%	47%	18%	6%	1%	<b>7%</b>
21.A	A male family member visits and tries to hug a child in the family repeatedly, even when the child is expressing discomfort.	<b>Core</b>	<b>77%</b>	36%	41%	20%	3%	1%	<b>3%</b>
		<b>OS</b>	<b>81%</b>	31%	49%	17%	2%	0%	<b>2%</b>
21.B	A female family member visits and tries to hug a child in the family repeatedly, even when the child is expressing discomfort.	<b>Core</b>	<b>56%</b>	16%	39%	34%	9%	1%	<b>10%</b>
		<b>OS</b>	<b>64%</b>	21%	43%	25%	9%	1%	<b>11%</b>
22.A	A family friend visits and tries to hug a girl in the family repeatedly, even when the child is expressing discomfort.	<b>Core</b>	<b>76%</b>	38%	38%	22%	1%	<1%	<b>2%</b>
		<b>OS</b>	<b>81%</b>	35%	45%	17%	2%	0%	<b>2%</b>
22.B	A family friend visits and tries to hug a boy in the family repeatedly, even when the child is expressing discomfort.	<b>Core</b>	<b>69%</b>	24%	45%	25%	3%	2%	<b>5%</b>
		<b>OS</b>	<b>75%</b>	27%	48%	17%	7%	2%	<b>9%</b>

Now I am going to give you a list of some statistics about this subject, and, based on what you know today, do you believe each item on the list is true or false? If you are unsure, that's fine – please just give us your best guess.

The (first/next) one is...**RANDOMIZE ORDER, ASK TWO OF THREE Q23-25:**

**Core**

Is it true or false that...			TRUE 1	FALSE 2
23.	One-in-ten children are sexually abused by their 18 <sup>th</sup> birthday.	<b>Core</b>	85%	15%
		<b>OS</b>	86%	14%
24.	90% of child sexual abuse victims and their families know and trust their abuser	<b>Core</b>	94%	6%
		<b>OS</b>	95%	5%
25.	Approximately 40% of child sexual abuse victims are abused by another youth.	<b>Core</b>	69%	31%
		<b>OS</b>	75%	25%

26. The previous two questions were in fact both true. Now that you know these true statistics, how likely are you to take some action, in a case where you suspect a child is being sexually abused?

	Initial	Informed	Initial Parent	Informed Parent
<b>TOTAL VERY/SOMEWHAT LIKELY</b>	<b>88%</b>	<b>88%</b>	<b>91%</b>	<b>91%</b>
<b>TOTAL NOT VERY/NOT LIKELY AT ALL</b>	<b>3%</b>	<b>2%</b>	<b>2%</b>	<b>1%</b>
1. Very Likely	58%	58%	70%	68%
2. Somewhat Likely	31%	31%	22%	24%
3. DK/Refused	9%	9%	7%	7%
4. Not Very Likely	2%	2%	1%	1%
5. Not Likely at All	<1%	1%	1%	<1%

**IF Q26:4-5:**

27. What would be the main cause of your hesitation?

**SEE RESPONSE AS TYPED**

28. Are there behaviors you believe adults should engage in to protect children from child sexual abuse? (PROMPT: Do you have specific things, that you make a point of doing or not doing around kids?)

**SEE RESPONSE AS TYPED**

29. Do you think boys and girls should be communicated to **ROTATE** the same or differently **END ROTATE** about child sexual abuse?

	<b>Core</b>	<b>Parent</b>
1. Communicated to the same	72%	72%
2. Communicated to differently	28%	28%

30. Have you ever encountered a child you suspected may have been a victim of child sexual abuse?

	<b>Core</b>	<b>Parent</b>
1. Yes	25%	27%
2. No	75%	73%

**IF Q30:1 ASK:**

31. And, what actions did you take, if any?

**SEE RESPONSE AS TYPED**

32. Have you ever taken any training on child sexual abuse prevention?

	<u>Core</u>	<u>Parent</u>
1. Yes (SPECIFY): Do you recall where you received (ie, what organization) provided your training?	15%	16%
2. No	85%	84%

**IF Q32:1 ASK:**

N=74

33. Was that training helpful to you in advancing your knowledge of child sexual abuse prevention?

	<u>Core</u>	<u>Parent</u>
1. Yes	92%	92%
2. No	8%	8%

34. Would you be interested in taking a free two-hour online training course on child sexual abuse prevention?

**IF YES RECORD INFO:**

	<u>Core</u>	<u>Parent</u>
1. Yes	42%	63%
2. No	58%	37%

**IF Q34:2 ASK:**

35. Understanding this is a sensitive topic for everyone, what would you say is the main reason you would hesitate to take such a course? Your response is very important in helping us understand how people make decisions.

**SEE RESPONSE AS TYPED**

**IF Q3:1 (PARENT) ASK Q36-46:**

36. (First/Next)...thinking specifically about your children, when or if they are old enough for these conversations, how confident are you in your ability talk to your child or children about sex, puberty, and other similar subjects? Would you say that you are **ROTATE TOP TO BOTTOM; BOTTOM TO TOP** very confident, somewhat confident, not very confident, or not confident at all **END ROTATION** in your ability to talk to your child or children about these subjects?

<b>TOTAL VERY/SOMEWHAT CONFIDENT</b>	<b>87%</b>
<b>TOTAL NOT VERY/NOT CONFIDENT AT ALL</b>	<b>8%</b>

1.	Very Confident	43%
2.	Somewhat Confident	44%
3.	DK/Refused	5%
4.	Not Very Confident	7%
5.	Not Confident At All	1%

37. At what age do you think most kids start talking about sex with their peers?

1.	4	<1%
2.	5	2%
3.	6	2%
4.	7	3%
5.	8	9%
6.	9	6%
7.	10	23%
8.	11	10%
9.	12	25%
10.	13	10%
11.	14	5%
12.	15	2%
13.	16	<1%
14.	17	<1%
15.	18	1%
16.	Mean	11%

38. At what age do you think kids should be before their parents first approach them to talk about sex and related topics?

1.	1	1%
2.	2	1%
3.	3	2%
4.	4	1%
5.	5	6%
6.	6	3%
7.	7	4%
8.	8	11%
9.	9	4%
10.	10	25%
11.	11	8%
12.	12	17%
13.	13	5%
14.	14	5%
15.	15	3%
16.	16	1%
17.	17	<1%
18.	18	1%
19.	Mean	10%

39. Thinking about how you were raised, which of these approaches to first learning about sex from a parent(s) or other adult was most like your own experience?

1.	It was an ongoing discussion I had with my parent(s) or other adults in my life	21%
2.	There were one or two “big” conversations on the subject	23%
3.	I never really talked about it with my parent(s) or other adults	49%
4.	Don’t Remember/Refuse	6%

40. In raising your own child, which approach is, or will likely be, the approach you have to talking to your child, or children, about sex?

1.	It is/was an ongoing discussion I/we have with my child or children	66%
2.	There have been, or likely will be, one or two “big” conversations on the subject	26%
3.	I didn’t or don’t plan to have “the talk” with my child or children	4%
4.	Don’t Remember/Refuse	4%

41. Have you already started having conversations about these topics?

1.	Yes	62%
2.	No	38%

42. And what is the primary reason you (HAVE/HAVE NOT BASED ON CHOICE FROM Q41) had these conversations?

SEE RESPONSE AS TYPED

IF Q41:1 ASK Q43-44

43. From your perspective, was that conversation or conversation(s) with your kids effective, or not very effective?

1.	Very Effective	43%
2.	Somewhat effective	53%
3.	Not very effective	4%
4.	Not at all effective	0%

44. Could you please describe any takeaways you had from having the “the talk” with your child or children?

SEE RESPONSE AS TYPED

45. When talking to your children about their body parts, do you typically use anatomically-correct terms, biological terms (such as vagina or penis), or are you more likely to use slang terms to try and make the conversation less formal or awkward?

1.	Use anatomically-correct terms	47%
2.	Use slang or informal terms	13%
3.	Use both slang terms AND anatomically-correct terms	40%

IF Q45:2 ASK

46. Using anatomically-correct, biological terms (such as vagina or penis), is a way of preventing child sexual abuse. Knowing that fact, would you be ROTATE more or less likely to use these anatomically-correct terms when talking to your children in the future?

	<b>TOTAL VERY/SOMEWHAT LIKELY</b>	<b>70%</b>
	<b>TOTAL NOT VERY/NOT LIKELY AT ALL</b>	<b>8%</b>
1.	Very Likely	23%
2.	Somewhat Likely	48%
3.	DK/Refused	23%
4.	Not Very Likely	8%
5.	Not Likely at All	0%

Now, I have just a few more questions for demographic purposes only....

**PRECODE IF REGISTERED VOTER**

47. Party Registration

1.	Republican	NA
2.	Independent/Other	NA
3.	Democrat	NA
4.	Not registered to vote	NA

48. What is the highest level of formal education you have completed?

		<u>Core</u>	<u>Parent</u>
1.	High school graduate or less	14%	14%
2.	Some College /Associates Degree	27%	29%
3.	Bachelor's Degree	32%	34%
4.	Post graduate	25%	22%
5.	DK/Refused	1%	1%

49. And, which of the following categories best describes your annual household income? We use this information for demographic purposes only and do not keep any personal information about you or your family.

		<u>Core</u>	<u>Parent</u>
1.	Less than \$25,000	12%	8%
2.	\$25,000 to less than \$50,000	18%	17%
3.	\$50,000 to less than \$75,000	20%	18%
4.	\$75,000 to less than \$100,000	14%	18%
5.	\$100,000 to less than \$125,000	11%	12%
6.	\$125,000 to less than \$150,000	7%	7%
7.	More than \$150,000	11%	15%
8.	DK/Refused	6%	3%

50. Which of the following best describes your race or ethnicity?

		<u>Core</u>	<u>Parent</u>
1.	White	75%	74%
2.	Hispanic, Mexican, Latino, Spanish	13%	14%
3.	African-American	5%	4%
4.	Asian	3%	5%
5.	Other (specify) _____	3%	2%
6.	Refused	1%	<1%

51. What is your current marital status?

	<u>Core</u>	<u>Parent</u>
1. Single, never married	34%	13%
2. Married	51%	74%
3. Separated	1%	1%
4. Divorced	10%	7%
5. Widowed	2%	3%
6. DK/Refused	1%	2%

52. In what year were you born? RECORD EXACT FOUR DIGIT RESPONSE; RECODE INTO CATEGORIES

	<u>Core</u>	<u>Parent</u>
1. 18-24	8%	4%
2. 25-34	20%	26%
3. 35-44	22%	43%
4. 45-54	20%	19%
5. 55-64	14%	5%
6. 65-74	10%	2%
7. 75 or over	6%	<1%
8. Refused	0%	-

53. What is your gender?

	<u>Core</u>	<u>Parent</u>
1. Male	50%	37%
2. Female	50%	62%
3. Binary/Other	<1%	<1%
4. Refused	0%	<1%

54. Approximately how long have you lived in Colorado?

	<u>Core</u>	<u>Parent</u>
1. Less than 1 year	2%	3%
2. 1-5 Years	15%	11%
3. 6-10 Years	9%	10%
4. 10-20 Years	21%	23%
5. 20+ Years	52%	51%
6. DK/Refused	1%	1%

55. County: PRE-CODE

		<u>Core</u>	<u>Parent</u>			<u>Core</u>	<u>Parent</u>
1.	Adams	9%	10%	33.	Kit Carson	0%	<1%
2.	Alamosa	<1%	<1%	34.	La Plata	<1%	<1%
3.	Arapahoe	13%	12%	35.	Lake	0%	0%
4.	Archuleta	0%	0%	36.	Larimer	6%	6%
5.	Baca	0%	1%	37.	Las Animas	<1%	0%
6.	Bent	<1%	0%	38.	Lincoln	0%	1%
7.	Boulder	6%	3%	39.	Logan	1%	<1%
8.	Broomfield	1%	1%	40.	Mesa	2%	1%
9.	Chaffee	<1%	<1%	41.	Mineral	0%	0%
10.	Cheyenne	<1%	0%	42.	Moffat	0%	0%
		<1%	0%	43.	Montezum	1%	0%
11.	Clear Creek			a			
12.	Conejos	0%	0%	44.	Montrose	<1%	0%
13.	Costilla	0%	<1%	45.	Morgan	1%	1%
14.	Crowley	0%	0%	46.	Otero	1%	1%
15.	Custer	<1%	1%	47.	Ouray	1%	0%
16.	Delta	1%	<1%	48.	Park	0%	0%
17.	Denver	13%	15%	49.	Phillips	<1%	1%
18.	Dolores	<1%	0%	50.	Pitkin	1%	0%
19.	Douglas	5%	6%	51.	Prowers	0%	0%
20.	Eagle	1%	0%	52.	Pueblo	2%	1%
21.	El Paso	12%	18%	53.	Rio Blanco	0%	0%
22.	Elbert	<1%	<1%	54.	Rio Grande	<1%	<1%
23.	Fremont	<1%	<1%	55.	Routt	1%	0%
24.	Garfield	1%	1%	56.	Saguache	<1%	0%
25.	Gilpin	0%	0%	57.	San Juan	0%	0%
26.	Grand	<1%	0%	58.	San Miguel	0%	0%
27.	Gunnison	<1%	0%	59.	Sedgwick	0%	0%
28.	Hinsdale	0%	0%	60.	Summit	2%	0%
29.	Huerfano	0%	0%	61.	Teller	<1%	0%
		0%	<1%	62.	Washingto	1%	<1%
30.	Jackson			n			
31.	Jefferson	10%	11%	63.	Weld	6%	8%
32.	Kiowa	0%	0%	64.	Yuma	0%	0%

56. Media Market: PRE-CODE

		<u>Core</u>	<u>Parent</u>
1.	Colorado Springs	5%	4%
2.	Denver	92%	95%
3.	Grand Junction	3%	1%
4.	Albuquerque	1%	0%



**COLORADO**  
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