

Talking About Prevention

Adopted by the ATSA Executive Board of Directors on September 22, 2014



Introduction

"Sexual violence is a major public health issue that affects everyone, directly or indirectly, and results in long-term social and economic costs" (Minnesota Department of Public Health, 2002). The Association for the Treatment of Sexual Abusers (ATSA) recognizes the harm caused by sexual violence and offers an informed approach to help prevent it. We are committed to being a part of the solution to protect those vulnerable in our communities.

ATSA is an international, multi-disciplinary organization dedicated to preventing sexual abuse. We believe proactive prevention strategies can address individuals at risk to sexually abuse before anyone is traumatized by sexual violence (ATSA Strategic Plan, 2009-2014).

ATSA offers expertise, information, resources, and insight into preventing the perpetration of sexual violence. This document details how we define prevention and specific contributions ATSA and its members make towards a safer and healthier society.

Definitions of Prevention

As we explored the concept of preventing sexual violence, we found no widely accepted definition of prevention. Organizations and individuals define prevention approaches and strategies in different ways. For example, prevention is sometimes described as before or after abuse has been perpetrated, and sometimes by the types of people at risk of perpetration or victimization. Organizations approach prevention from different perspectives such as health, treatment, law enforcement, victim advocacy, child welfare, and/or education. Policy makers tend to address prevention from a range of concerns about individual and community safety.

Definitions of prevention reflect the range of perspectives mentioned above - all of which are valuable and important. Different terms and language indicate differing frameworks, philosophical and political perspectives, cultural variations, and professional ideologies. Some are global in scope, whereas others are much more specific. To advance the prevention of sexual violence, we believe is necessary to clarify the terms we use so we can **promote a common language that increases our understanding of and ability to address this important issue.** A growing number of ATSA members are involved in programs, campaigns, and interventions that address problematic sexual behaviors (whether

or not the behavior is criminal) and that promote sexual health and prevent sexual harm before it happens.

Within a public health framework, the word prevention is typically categorized as primary, secondary, and tertiary. The ATSA Prevention Committee recommends using the Centers for Disease Control and Prevention's (CDC) public health definition for primary prevention:

- *Primary Prevention:* Approaches that **take place before sexual violence has occurred** to prevent initial perpetration or victimization (CDC, 2004).

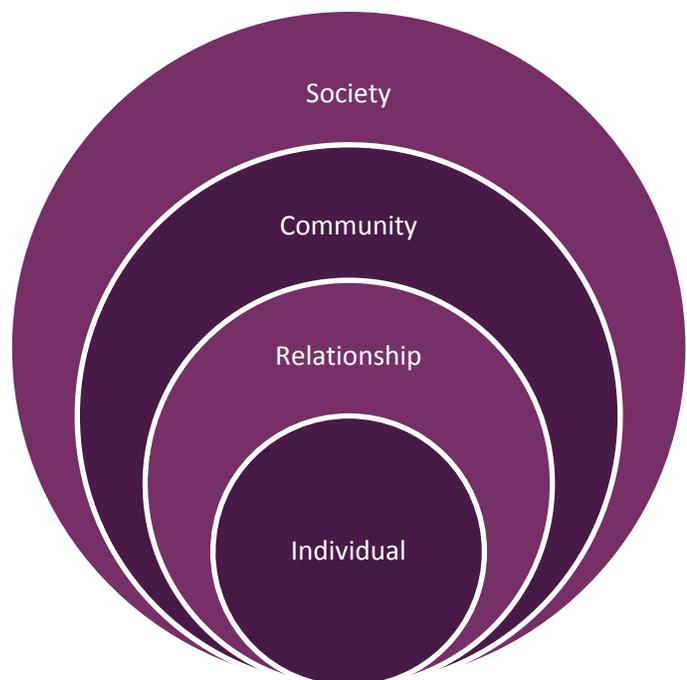
Clearly defining secondary and tertiary is more difficult as there are discrepancies in definitions. For example, the Institute for Medicine defines secondary prevention efforts as those focusing on populations known to be vulnerable, before sexual violence has been perpetrated, whereas the CDC definition addresses the immediate response to sexual violence after it has been perpetrated. Such differences can be both confusing and create barriers in the development of a common language for prevention.

ATSA follows an alternative two category solution offered by the CDC: prevention strategies can be grouped into those that are implemented **BEFORE** or **AFTER** sexual violence has been perpetrated

Model of Prevention

It is clear that sexual violence is a complex issue and results from multiple influences on human behavior; such as how an individual relates to those around him or her, their biology, and environmental influences. The [Social-Ecological Model \(SEM\)](#) allows us to examine influences on an individual, as well as the influences of relationships, organizations/community, and society on sexual decision making. The chart below illustrates the SEM.

Social- Ecological Model



Comprehensive Prevention

Prevention before sexual abuse is perpetrated (and anyone is harmed) is the ultimate goal. To that end it is essential to frame all prevention strategies within a comprehensive approach that includes a full continuum of effective practices to stop sexual violence both before and after it has been perpetrated.

According to ATSA's strategic plan:

A public health model that promotes the prevention of sexual abuse requires the active participation of multiple disciplines and of individuals from all sectors of the community. To maximize the impact of our sexual abuse prevention, we will continue to build strategic alliances with key stakeholders in all sectors of the field of sexual abuse. ATSA strengthens our commitment to collaboration by bringing together the different perspectives of our internal and external stakeholders: members, chapters, private and public agencies, community members, government officials, researchers, legislators, and public policy advocates.

Getting Involved in Prevention

ATSA members are involved in a variety of prevention strategies, such as training for state coalitions of sexual assault programs and providing a trauma informed approach for adolescent sexual health. Our Prevention Committee focuses a great deal of effort highlighting primary prevention strategies. To ensure all prevention efforts are recognized for their importance in stopping sexual violence, we are committed to using a comprehensive framework that promotes prevention before and after sexually abusive behavior. Understanding the full range of opportunities for such important work by ATSA members and others can influence the trajectories of our careers and enhance the safety of our communities.

Comprehensive prevention occurs across the full lifespan of individuals, in a range of ways through their relationships, in their communities and workplaces, and throughout society at large. A comprehensive multidisciplinary approach for prevention ensures all efforts are viewed as part of this larger framework. The following chart, grounded in the social ecological model, can help identify different skills and roles that ATSA members can and do bring to preventing sexual violence before and after someone is harmed.

ATSA Members Involvement in Prevention

	Individual	Relationship	Community	Society
Before	Integrate sexual health, healthy relationship information, and consent into all health and relationship programs	Assist existing bystander campaigns to include information on preventing the perpetration of sexual violence.	Establish new standards for youth serving organizations that focus on preventing perpetration of sexual abuse.	Promote public policies directed towards healthy sexual relationships. Promote laws requiring youth serving organizations that receive public funding, to establish safety policies.
After	Provide effective treatment services for adults and adolescents who have sexually abused, including discussions on health sexuality and self-regulation.	Establish support groups for the families of adults and adolescents who have sexually abused.	Collaborate with victim advocacy programs to ensure adequate services as well a voice in sex offender management. Develop community engagement programs about healthy sexual relationships and how to prevent sexual offending.	Promote empirically based public policies that have been shown to prevent further sexual abuse and to safely integrate sex offenders into the community.

ATSA members are in a unique position to participate in sexual violence prevention efforts because of the information members have about the men, women, boys and girls who cause the harm. Employing a common definition of prevention clarifies the goals we collaboratively work towards, enhances community understanding, and increases acceptance of the important services ATSA members add to the mix of effective services.

Preventing the perpetration of sexual violence before anyone is harmed is the key to reducing the deeply personal and extensive health costs of sexual violence.

Appendix A: Definitions of Prevention

While ATSA addresses prevention before and after harm has occurred, other entities continue to use other terms and definitions in differing ways. Some of those definitions are included here for reference or comparison.

General Prevention Definitions

[The Centers for Disease Control and Prevention](#) (2004, Pages 3-5)

Prevention Strategies: WHEN do we intervene?

Public health interventions are often grouped into three prevention categories based on when the intervention occurs. Sexual violence interventions can be grouped into the following three categories:

- *Primary:* Approaches that **take place before sexual violence has occurred** to prevent initial perpetration or victimization
- *Secondary:* **Immediate responses after sexual violence has occurred** to deal with the short-term consequences of violence
- *Tertiary:* **A long-term response after sexual violence has occurred** to deal with the lasting consequences of violence and sex offender treatment interventions.

Prevention Strategies: WHO is it for?

Public health interventions are often developed based upon the group for whom the intervention is intended. Using this type of differentiation, sexual violence interventions can again be divided into three categories:

- Approaches that are aimed at groups or the general population regardless of individual risk for sexual violence perpetration or victimization are called universal interventions. Groups can be defined geographically (e.g., entire school or school district) or by characteristics (e.g., ethnicity, age, gender).
- Approaches that are aimed at those who are thought to have a heightened risk for sexual violence perpetration or victimization are referred to as selected interventions.
- Approaches that are aimed at those who have already perpetrated sexual violence or have been victimized are called indicated interventions.

Prevention Strategies: WHAT is the focus?

To prevent sexual violence, we have to understand what circumstances and factors influence its occurrence. Using the social ecological model, these include:

- Individual level influences
- Interpersonal/Relationship level influences
- Community level influences
- Societal level influences

[The Institute of Medicine](#) (Mrazek & Haggarty, 1994)

- *Universal* prevention attempts to **stop harm from ever happening in the general population.**
- *Selective* prevention **focuses on groups believed to be at risk of harm.**
- *Indicated* prevention provides **interventions when harm has already occurred.**

[British Columbia Justice and Public Safety Council](#)

In its purest form, crime prevention looks at people (usually babies, children and young teens) who are not involved in criminal activity and asks, "What can we do to make sure they never come into conflict with the law?" Crime prevention also looks at places and situations which are not yet troubled by much criminal activity and asks, "How can we make sure crime never becomes a significant problem here?"

The CDC and Institute of Medicine definitions are widely used in the public health community to explain a variety of prevention strategies. They are often used to help define a target audience for a proposed prevention program or initiative. The CDC definition distinguishes between before and after sexual abuse has been perpetrated and focuses on the timing of prevention efforts. The Institute of Medicine focuses on who should be the target of specific efforts.

The following definitions focus on public health definitions of primary prevention.

Primary Prevention Definitions

[World Health Organization](#) (2007, Page 5)

In a public health framework, **primary prevention means reducing the number of new instances of intimate-partner violence or sexual violence by intervening before any violence occurs.** The impact of primary prevention is measured at population level by comparing the frequency with which either victimization or perpetration occurs. This approach contrasts with other prevention efforts that seek to reduce the harmful consequences of an act of violence after it has occurred, or to prevent further acts of violence from occurring once violence has been identified. Primary prevention relies on identification of the underlying, or "upstream", risk and protective factors for intimate-partner violence and/or sexual violence, and action to address those factors. Its aim is to reduce rates of intimate partner violence and sexual violence. www.who.int/en/

[The Prevention Institute](#) (2014)

Primary prevention: a systematic process that promotes healthy environments and behaviors and reduces the likelihood of an incident, condition, or injury before it occurs in the first place. www.preventioninstitute.org/

[The National Network Ending Sexual Violence Together in New Zealand](#) (2014)

Primary prevention [involves] activities that seek to prevent sexual violence before it occurs by educating people about the issue of sexual violence and by promoting safe and respectful environments, behaviors and social norms. Primary prevention is about changing the soil conditions our communities are growing in - not just point out harmful attitudes and behaviors, or pulling out sexual violence. Primary prevention is about working out what our communities need to build healthy sexual encounters and relationships by fostering social

norms of respect and equity in terms of gender, race, class, sexuality and disability – respect between people, respect between peoples.

www.toah-nnest.org.nz/

California Coalition Against Sexual Assault (CALCASA's) national project
[PreventConnect](#)

Primary prevention involves developing comprehensive strategies that stop violence before initial perpetration or victimization (Lee, Guy, Perry, Sniffen & Mixson, 2007).

Ending sexual and domestic violence requires social change. Primary prevention is the work to create that social change. Primary prevention is: creating a future free of abuse; promoting the behaviors and norms we want (Lee, 2014).

www.preventconnect.org

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