

## APPENDIX E: Glossary

**Best practice:** The elements and activities of learning design, planning and implementation that are recommended on the basis of the best knowledge and research currently available.

**Child Advocacy Center:** Missouri Child Advocacy Centers (CACs) provide a safe, child-friendly location in which members of multi-disciplinary child abuse investigation teams (e.g., law enforcement, Children’s Division case workers, prosecutors, medical and mental health providers and CAC staff) conduct and observe forensic interviews with children who are alleged victims of crimes, and where the child and non-offending family members receive support, crisis intervention and medical and mental health services (or referrals for services).

**Community partners:** Community-based organizations, agencies, providers and other professionals who may collaborate with a local education agency to provide sexual abuse prevention resources or education or services for survivors of sexual abuse.

**Curriculum:** Materials and resources selected to support the implementation of state learning standards.

**Department of Elementary and Secondary Education (DESE):** State agency responsible for administering primary and secondary public education in the state of Missouri.

**Evidence-based practices:** Approaches to prevention or treatment that are validated by some form of documented scientific evidence. This includes findings established through controlled clinical studies, but other methods of establishing evidence are valid as well ([Children's Bureau \(HHS\), Child Welfare Information Gateway](#)).

**Evidence-based programs:** Programs that use a defined curriculum or set of services that, when implemented with fidelity as a whole, have been validated by some form of scientific evidence ([Children's Bureau \(HHS\), Child Welfare Information Gateway](#)).

**Evidence-informed:** Evidence-informed practices use the best available research and practice knowledge to guide program design and implementation. An evidence-informed program replicates evidence-based programs or substantially incorporates elements of effective programs. This informed practice allows for innovation while incorporating the lessons learned from the existing research literature. Ideally, evidence-based and evidence-informed programs and practices should be responsive to families' cultural backgrounds, community values and individual preferences ([Children's Bureau \(HHS\), Child Welfare Information Gateway](#)).

**Grooming:** A deliberate process by which offenders gradually build relationships, trust and emotional connections with children in order to initiate and maintain sexual relationships with them in secrecy. Grooming allows offenders to slowly overcome natural boundaries long before sexual abuse occurs. On the surface, grooming a child can look like a close relationship between the offending adult, the targeted child and (potentially) the child’s caregivers. The grooming process is often misleading because the offender may be well known or highly regarded in the community. As a result, it’s easy to trust them ([Darkness to Light](#)).

**Health Education Curriculum Analysis Tool (HECAT):** The Health Education Curriculum Analysis Tool (HECAT) is an assessment tool to help school districts, schools and others conduct a clear, complete and

consistent analysis of health education curricula based on the National Health Education Standards and CDC's Characteristics of an Effective Health Education Curriculum. HECAT results can help schools select or develop appropriate and effective health education curricula, enhance existing curricula and improve the delivery of health education. The HECAT can be customized to meet local community needs and conform to the curriculum requirements of the state or school district ([Centers for Disease Control and Prevention](#)).

**Missouri Health Education Grade Level Expectations:** The Health Education Grade Level Expectations (GLEs) represent content that Missouri students are expected to know at each grade level. The GLEs are not a curriculum. They are, however, the learner outcomes that should be assessed at the local level to appraise student achievement ([DESE](#)).

**Missouri KidsFirst:** State chapter of Missouri's 15 accredited regional Child Advocacy Centers (CACs) and the seat of Prevent Child Abuse Missouri. Missouri KidsFirst works to empower adults to protect children from abuse by providing leadership, training, technical assistance and legislative and public policy advocacy.

**National Health Education Standards:** The National Health Education Standards (NHES) were developed to establish, promote and support health-enhancing behaviors for students in all grade levels—from pre-kindergarten through grade 12. The NHES provide a framework for teachers, administrators and policy makers in designing or selecting curricula, allocating instructional resources and assessing student achievement and progress. Importantly, the standards provide students, families and communities with concrete expectations for health education ([Centers for Disease Control and Prevention](#)).

**National Sex Education Standards:** The National Sex Education Standards (NSES) outline the foundational knowledge and skills students need to navigate sexual development and grow into sexually healthy adults ([Advocates for Youth](#)).

**Primary prevention:** A prevention approach that is directed at the general population and attempts to stop maltreatment before it occurs. All members of the community have access to and may benefit from these services. Primary prevention activities with a universal focus seek to raise the awareness of the general public, service providers and decision-makers about the scope and problems associated with child maltreatment ([Children's Bureau\(HHS\)-Child Welfare Information Gateway](#)). This prevention practice is often referred to as "moving upstream."

**Protective factor:** Protective factors may lessen the likelihood of children being abused or neglected. Protective factors are conditions or attributes in individuals, families, communities or the larger society that mitigate or eliminate risk in families and communities, thereby increasing the health and well-being of children and families ([Children's Bureau \(HHS\)-Child Welfare Information Gateway](#)).

**Risk factor for child abuse:** Those characteristics linked with child abuse and neglect, but they may or may not be direct causes. A combination of individual, relational, community and societal factors contribute to the risk of child abuse and neglect. Although children are not responsible for the harm inflicted upon them, certain factors have been found to increase their risk of being abused and or neglected ([Children's Bureau \(HHS\)-Child Welfare Information Gateway](#)).

**School climate:** The school's effects on students, including teaching practices, diversity and the relationships among administrators, teachers, parents and students ([ASCD](#)).

**School culture:** School culture refers to the way teachers and other staff members work together and the set of beliefs, values and assumptions they share. A positive school climate and school culture promote students' ability to learn ([ASCD](#)).

**Secondary prevention:** A prevention approach that focuses on populations that have one or more risk factors associated with child abuse. Programs may target services for communities or neighborhoods that have a high incidence of risk factors ([Children's Bureau\(HHS\)-Child Welfare Information Gateway](#)).

**Sexual abuse:** The involvement of a child (person less than 18 years old) and an adult (or another child) in sexual activity that violates the laws or social taboos of society, that he or she does not fully comprehend, is unable to give informed consent to or for which the child is not developmentally prepared and cannot give consent to ([Centers for Disease Control and Prevention](#)). Child sexual abuse is evidenced between a child and an adult or another child who by age or development is in a position of responsibility, trust or power. This may include but is not limited to the inducement or coercion of a child to engage in any unlawful sexual activity, the exploitative use of child in prostitution or other unlawful sexual practices, or the exploitative use of children in pornographic performances and materials (World Health Organization). Sexual abuse can include both contact (sexual touching or intercourse) and non-contact (voyeurism, exhibitionism, taking unwanted sexual images or exposing the child to pornography) behaviors. Force may be involved, but perpetrators also use deception, threats and other forms of coercion.

**Sexual violence:** Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic or otherwise directed against a person's sexuality using coercion by any person regardless of his or her relationship to the victim, in any setting, including but not limited to home and work ([World Health Organization](#)). Examples of sexual violence include child sexual abuse, incest, drug-facilitated sexual assault, rape, sexual assault, internet-based sexual crimes, commercial sexual exploitation of children, sexual harassment, sexual bullying, sexual violence by professionals, stalking, statutory rape and sex trafficking.

**Social-ecological model:** A public health approach developed by the Centers for Disease Control and Prevention that recognizes the complex interplay between individual, relationship, community and societal factors that influence issues like sexual abuse ([Centers for Disease Control and Prevention](#)).

**Task Force on the Prevention of Sexual Abuse of Children:** Statewide task force established by the Missouri General Assembly to study and identify strategies for reducing child sexual abuse and treating children who experience sexual abuse. Task force membership is comprised of individuals who are actively involved in the fields of the prevention and treatment of child abuse and neglect and child welfare ([RSMo. Section 210.120](#)).

**Tertiary prevention:** A prevention approach that focuses on families where abuse has already occurred and seeks to reduce the negative consequences and to prevent its recurrence ([Children's Bureau\(HHS\)-Child Welfare Information Gateway](#)).

**Trauma-informed approach:** An approach that involves understanding and responding to the symptoms of chronic interpersonal trauma and traumatic stress across the lifespan ([RSMo. Section 161.1050](#)). A trauma-informed approach to sexual abuse education recognizes that many students have already experienced some form of sexual abuse and the adults in the schools and communities are prepared to recognize and respond to abuse in a way that does not retraumatize the individual.

**Whole-school, whole-community, whole-child (WSCC) approach:** CDC's framework for addressing health in schools. The WSCC model is student centered and emphasizes the role of the community in supporting the school, the connections between health and academic achievement and the importance of evidence-based school policies and practices. The WSCC model has 10 components: physical education and physical activity, nutrition environment and services, health education, social and emotional school climate, physical environment, health services, counseling, psychological and social services, employee wellness, community involvement and family engagement. ([Centers for Disease Control and Prevention](#)). The whole-child approach to sexual abuse prevention assumes the involvement and interconnectedness of several systems, including families, community organizations, the health care system and state agencies.