

Department of Research Abstracts

PEDIATRICIAN'S COUNSELING BEHAVIORS ON SEXUAL VIOLENCE PREVENTION TOPICS: A NATIONAL SURVEY Tammy P. Hurley, Nancy D. Kellogg, Karen G. O'Connor, Alison E. Baker.. American Academy of Pediatrics, Elk Grove Village, IL; Center for Miracles, San Antonio, TX. **Presented at the 2008 Pediatric Academic Societies Annual Meeting.**

Background: Sexual abuse is a common but underreported problem of childhood. Very little research exists on the role of the pediatrician in counseling on sexual violence prevention (SVP) topics.

Objective: To measure pediatricians' reported practices and attitudes regarding SVP counseling with children and families during health supervision (HS) visits.

Design/Methods: National random sample, mailed AAP Periodic Survey in 2007 (N=1605; response=54%). Questions addressed SVP counseling practices and attitudes; sexual violence was defined as sex acts against a person's will or ability to consent, voyeurism, pornography, sexual harassment, and online solicitation for sex. Bivariate analysis was limited to 542 pediatricians who provide HS.

Results: Few pediatricians report they routinely (“most” to “all” well visits) discuss the following SVP topics during HS:

	Inappropriate Sexual Touching	Internet Safety	Media Issues (sexual stereotypes, violence)	Sexual Harassment	Effects of Domestic Violence
Patient age:					
<11 yrs	41%	19%	13%	6%	10%
≥11 yrs	39%	32%	27%	22%	16%

Pediatricians in hospital/clinic practices and those with a majority of patients in Medicaid/SCHIP are more likely to discuss effects of domestic violence and are less likely to discuss Internet safety with adolescent patients than are their counterparts ($p < .05$ for all comparisons). Pediatricians report being very or moderately comfortable discussing SVP topics with adolescents ≥ 11 and parents (85% and 80% respectively); only 43% report the same level of comfort with younger children. Most think they are effective discussing the role of drugs/alcohol in sexual violence (77%), inappropriate sexual touching (72%), Internet safety (63%) and rape (52%); 40% say they are effective discussing media issues or sexual harassment. Only one-fourth of pediatricians think they have adequate training in the area of SV detection (25%) or counseling (27%). While 69% of pediatricians believe in the efficacy of SVP anticipatory guidance, 77% say they do not have sufficient time to address these issues in HS visits.

Conclusions: While pediatricians believe in the importance of counseling on SVP, most report they are not confident identifying at risk children, lack training in counseling and are concerned there is inadequate time during visits to address these issues. If pediatricians are expected to play a greater role in this area, additional training and educational resources will be needed.

