Keep Safe
Assessments and Measures

Stephen Barry, Principal Clinician/Service Manager, Be Safe, Bristol
Jack Kennedy, Clinical/Forensic Psychologist, Northumberland Tyne & Wear NHS
Emma Marks, Forensic Psychologist, St Andrews, Northampton
Aida Malovic, Development/research Assistant, Keep Safe; PhD student, University of Kent
Glyn Murphy, Professor of Clinical Psychology & Disability, Tizard Centre, University of Kent
Rowena Rossiter, Clinical Psychologist/Research Fellow, Tizard Centre, University of Kent
Summary of measures

- **Clinical research information** - completed with/out presence of carer/YP.

- **Initial demographic measures** – some of which can be done after groups start (eg of IQ & adaptive behaviour).

- **Process measures** – completed both before and after group finish; dates are crucial.

- **Interviews YP and carers/parents** - completed after groups finish.
Clinical Research Information

Screening for suitability

- Prior to groups start.

Logging of young person’s harmful sexual behaviours

- Prior to and after group finish. Completed with/out a carer

Clinical staff filming consent

- Information and consent forms × 3 (YP, carers/parents where YP is non-Gillick/Fraser competent AND facilitators)
Initial demographic and cognitive measures
Young Persons

- **IQ**
  - Wechsler Intelligence Scale for Children for assessing the degree of intellectual disability (60min)

- **Language skills**
  - British Picture Vocabulary Scale (BPVS-II) assessing receptive language - (10-15min)
  - Test for Reception of Grammar (TROG, Bishop, 1983;1989)(10-20min)

- **Demographic info sheet**
  - ySOTSEC-ID demographic information sheet. Completed with/out parent using clinical notes (10-20min)

- **Attachment**
  - Kerns Security Scale. Adapted version (PhD). Completed by the young person with help of a member of staff (30min)
Screening & initial measures

Carers

- **Adaptive Behaviours**
  - Social Communication Questionnaire- SCQ (10min)
  - Adaptive Behaviour Assessment System- ABAS (15min)

- **Demographic and historic information (re YP), logging of HSB ySOTSEC-ID assessments.** Completed with carers and aided by clinical notes. (10-20min)
Process measures

Completed pre-group and post-group

**YP**
- **ASKAM*** – sexual knowledge & attitudes scale (30-45min)
- **Adapted QACSO*** – questionnaire on attitudes consistent with sexual offending (45-60min)
- **Adapted UCLA-R** – emotional loneliness scale (5-10min)
- **Resiliency Scales for Children and Adolescents** – Profile child and adolescent personal strengths as well as vulnerability (20-25min)

**Carer**
- **SDQ Strengths & Difficulties Questionnaires**– brief behavioural screening questionnaire for carers to complete (5-10min)

*a LDWG development*
*Learning Disability Working Group (LDWG)*

LDWG was set up by Stephen Barry, Be Safe, Bristol, in 2008. The group focuses on reviewing, adapting and researching tools for assessment and outcome evaluation with children and young people with learning disabilities and harmful sexual behaviours.

**Contributors:** Rachel Edwards*, Ness Miller (SWAAY); Marilyn Sher, Anne McLean, Emma Marks *(St Andrews), Stephen Barry, Mel Turpin *(Be Safe); Bobbie Print, Helen Griffin* (G-map); Rowena Rossiter*, Aida Malovic* (Tizard Centre, University of Kent), Lucy Cygan, Sam Richards* (Nottingham University), Richard Beckett.

(* = current contributor)
Adapted QACSO- questionnaire on attitudes consistent with sexual offending

Authors: LDWG. Pilot study undertaken by Lucy Cygnan (Forensic Psychologist Doctoral Research (Nottingham University)

Original QACSO (Lindsay) measure of cognitive distortions.

2 subscales adapted for YP with visuals and simplified wording. Pilot study 2013/2014

- There are 3 sections, each with a series of questions to which the YP has to answer either
  - Yes / don’t know / no (sections 1 and 2)
  - Assess how a person might feel in a given situation (sections 1 and 2)
  - Likert type scale from ‘Yes very much’ to ‘No not at all’

- Section 1: Attitudes Towards Sexual Behaviour with Children Questionnaire
- Section 2: Attitudes Towards Indecent Exposure Questionnaire
- Section 3: 10 year old Peer Assault Questionnaire (ie adapted Victim Empathy Scale (Beckett & Fisher, 1994)
Adapted QACSO
some examples

Section 1
• Aims to explore the attitudes of a YP towards sexual behaviour with younger children, the impact of sexual behaviour on the victim, potential consequences for sexual behaviour with children, and attitudes regarding children and their sexuality.
  • Is it okay for someone your age to do sexual things with a younger child?
  • Is it wrong for an adult to do sexual things with another adult?

Section 2
• The questionnaire aims to explore the attitudes of a YP towards indecent exposure, the impact of indecent exposure on the victim, and potential consequences for indecent exposure.
  • Is it okay for the teenager to do this?
  • Is this a good way for the teenager to show this person that he wants to do sexual things with them?

Section 3
• YP is asked questions about a situation involving 2 YP and their sexual behaviour (Jamal (O) and Tom (V)).
  • Did Tom try to get Jamal to touch his penis?
  • Did Tom secretly want Jamal to touch his penis?
Assessment of Sexual Knowledge in Adolescent Males* (ASKAM)
Author: Sam Richards and LDWG

Adapted and basic test of sexual attitudes and knowledge.

10 sections as below, some question are accompanied by a picture(s)

Includes:
- Assesses knowledge of body parts
- Public and private parts and places
- Puberty and masturbation.
- Relationships and social-sexual boundaries
- Sexuality and safe-sex practices
- Sex and the law
- Additional info

*The measure has since been renamed as ASKA (Assessment of Sexual Knowledge in Adolescent). This was to reflect the fact that the assessment can be used across genders.
ASKAM

some examples

Public and private parts and places
- Point to the private parts of a man’s body

Puberty and masturbation
- What happens to a boy’s body when he changes to a young man?

Relationships and social-sexual boundaries
- What sort of things can people do with friends?
- Who can you tell if someone touches the private parts of your body and you don’t want them too?

Sexuality and safe-sex practices
- What happens to a man’s body when he feels sexually aroused/turned on?

Sex and the law
- If a person shows their private parts in a public place, could they get into trouble with the police?
UCLA-R  
(Russell et al, 1990)

Emotional loneliness measure

- Aida’s PhD- adaptation and pilot study

- 20 questions; each rated on 3 point scale

Do you agree?

1. I am good at telling my friends and family’s feelings

2. I don’t have many friends

3. I don’t have people to talk to when I feel sad or lonely

4. I don’t feel lonely

5. I have a group of friends who are nice to me

6. My interests and hobbies are same as other people I know

7. I have a friend who I can tell all my worries and secrets to

8. Other people don’t have the same interests and ideas like me
Kern’s Security Scale (Kerns, Klepac, Cole, 1996)

Measure of Secure Attachment to a care giver

- Aida’s PhD-adaptation of measure. Pilot study
- 15 questions; each rated on 2 aspects
Resiliency Scales for Children and Adolescents (Prince-Embry, 2006)

Theoretically based and psychometrically sound.

Three stand-alone scales of 19 - 24 questions each. Each scale contains subscales that are theoretically grounded.

- **Sense of Mastery Scale**
  Optimism, Self-Efficacy, Adaptivity

- **Sense of Relatedness Scale**
  Trust, Support, Comfort, Tolerance

- **Emotional Reactivity Scale**
  Sensitivity, Recovery, Impairment
Strengths & Difficulties Questionnaires (Goodman, Meltzer, Bailey, 1998)

Supporting carers to complete.

Ask about 25 attributes, some positive and others negative. Scored on a 3 point scale

1) Emotional symptoms (5 items)
2) Conduct problems (5 items)
3) Hyperactivity/ in attention (5 items)
4) Peer relationship problems (5 items)
5) Prosocial behaviour (5 items)
Logging of HSB, Filming, & End of Group Interviews

Logging of HSB
- Completed before and after group treatment. By staff with/out carer.

Filming
- For rating of fidelity
- 1 session in each of the five modules of the treatment.
- The film to focus on the therapists ONLY.

Interviews both YP and Carer/Parent (c/p)
- What were you hoping for by taking part in Keep Safe group? (YP)
- What did you think of the Keep Safe group? (YP)
- What would you change about the Keep Safe parents/ carers group? (c/p)
- What did your son learn at the Keep Safe group? (c/p)