

Our Team

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- Funding:
 - Penn State Child Maltreatment Solutions Network



What is Problematic Sexual Behavior?

- Chaffin et al. (2008): Children ages 12 and younger who initiate behaviors involving sexual body parts that are:
 - (a) potentially harmful to themselves or others, and/or
 - (b) developmentally inappropriate
- The ASB-C was developed to identify both categories



Development Process

- · A long process:
 - Clinician surveys and caregiver pilots
 - Expert discussion and consensus
 - Early data collection, analysis, and revision
- · Standardization:
 - 1,400 caregivers from a nationally representative sample
 - 270+ caregivers from a Pennsylvania sample
 - 100+ caregivers of children receiving services for PSB



Psychometric Qualities

- · Internal Reliability:
 - Total Scale: α = .81 .85 (depending on sample)
- Test-retest (~8 days):
 - Total Scale: r = .87



Psychometric Qualities

- · Concurrent Validity:
 - ASB-C Total Scale & CSBI: r = .81, p < .001
 - ASB-C Total & Family Sexuality Index: r = .34, p < .001
 - ASB-C Total & SDQ Conduct Problems: r = .25, p < .001
 - ASB-C Total & SDQ Emotional Problems: r = .28, p < .001
- Discriminant Validity:
 - ASB-C Total & SDQ Prosocial Behavior: r = .02



The ASB-C

- · Content Areas:
 - Non-sexual boundary violations
 - Self-focused behaviors
 - Looking behaviors
 - Showing behaviors
 - Intrusive thoughts/excessive interest
 - Electronic and online behaviors
 - Interpersonally intrusive behaviors



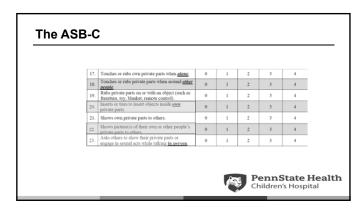
The ASB-C

- "How often has your child shown the following behaviors in the PAST MONTH?"
- · Response options
 - 0 = Never
 - 1 = 1 time (Once)
 - 2 = 2-4 times
 - 3 = 5-10 times
 - 4 = More than 10 times



The ASB-C No. 1992 And Section of the Control of t

<i></i>	С						
6.	Asks questions about private parts and/or sexual acts to people other than a trusted adult.	0	1	2	3	4	
7.	Views non-sexual things or topics in a sexual way.	0	1	2	3	4	
8.	Uses the internet to seek out information on sexual topics.	0	1	2	3	4	
9.	Talks about private parts, sexual topics, or toileting behaviors at inappropriate times.	0	1	2	3	-4	
10.	Uses sexual words in an insulting, disrespectful, and/or suggestive way.	0	1	2	3	4	
11.	Diana with torse in a cornel posts desire nicturae	0	1	2	3	4	
12.	Moves, dances, or makes hand gestures that are sexually suggestive.	0	1	2	3	4	
13.	Looks at or tries to look at others who are nude, undressing, and/or toileting.	0	1	2	3	4	
14.	Looks at or tries to look at people engaged in sexual acts.	0	1	2	3	4	
15.	Looks at pictures or videos that show mudity or sexual acts.	0	1	2	3	4	
16.	Looks at pictures or videos of violent, aggressive, and/or extreme sex acts.	0	1	2	3	4	
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		Never	1 time (Once)	2-4 times	5-10 times	More tha
24.	Sends sexual messages, pictures, and/or videos to others (such as through email, texts, social media).	0	1	2	3	4
25.	Asks others to send them pictures or videos showing mudity or sexual acts (such as through email, texts, social media)	0	1	2	3	4
26.	Coerces others to send sexual pictures or videos. (Note: 'coerces' means using force, threats, pressure, bribery, and/or trickery)	0	1	2	3	4
27.	Threatens to share sexual pictures or videos of others.	0	1	2	3	4

	Strokes, massages, or caresses the bodies of others.	0	1	2	3	4
	Rubs private parts on other people.	0	1	2	3	4
).	Slaps or pokes the buttocks of others.	0	1	2	3	4
31.	Touches or tries to touch the private parts of others.	0	1	2	3	4
32.	Puts mouth on the breasts or private parts of others.	0	1	2	3	4
33.	Inserts or tries to insert objects in another child's private parts.	0	1	2	3	4
34.	Tries to undress others against their will.	0	1	2	3	4
35.	Plans to get others to engage in sexual behavior.	0	1	2	3	4
36.	Coerces others to engage in sexual behavior. (Note: 'coerces' means using force, threats, pressure, bribery, and/or trickery)	0	1	2	3	4
37.	Performs sexual behaviors with an animal.	0	1	2	3	4
38.	Continues to engage in sexual behavior after being told to stop.	0	1	2	3	4

The questions below are to help to better understand the behaviors you described glerce. Note: If you conserved **O*** (Nevery to all the quantisms above, you do not need to complete the section below. A. With whom did your child engage has not the behaviors above (tecks that stapely): | Children who live in the same benne (such as soldings) | | Children who led your child engage has not the behaviors above (tecks as soldings) | | Children who led your child engage has out the behaviors above (tecks as soldings) | | Children who deep dig win the same home (such as soldings) | | Children who development delay or chaselihites | Children who nee younger | | Children who need the behaviors you reported above cent (tecks all that apply): | Home | Neighbor's home | Public setting (such as stores) | | Children describe): | | Children of the behaviors you reported above, did your child use coercion, such as force, threats, pressure, bethey, andow trickers? | No | Yes (please describe): | | Ofthe rhome/than tone Chieven'y of Okldoms. The University of Washingson. The University of Phobough. The University of Shildren's Hospital

Administering the ASB-C

- ASB-C is for use with children ages 3-12 (inclusive)
- Caregiver should have sufficient exposure and caregiving of the child to provide a report.
- · Ensure caregiver understands directions.



Scoring the ASB-C

- · Critical Items:
 - 17 items endorsed by 1.0% or less of the normative sample
 - Examples:
 - "Coerces others to send sexual pictures and/or videos in a digital format."
 - "Inserts or tries to insert objects into own private parts."
 - "Tries to undress others against their will."
 - "Performs sexual behaviors with an animal."
 - "Continues to engage in sexual behavior after being told to stop."



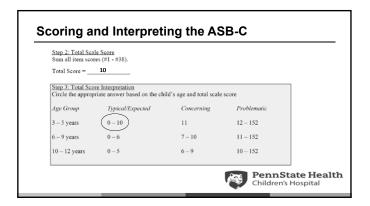
Scoring the ASB-C

- · Sum all 38 items to derive a Total scale score
- Can be used for children ages 3-12 years, separate norms for groups (ages 3-5, 6-9, 10-12)
- · A note on gender of the child



	ASB-C Soon	Term			
Stage I. Critical huma Check such iron below	white our tropme (i.e.	1, 2, 3, 4)			
16	24		м		
28	27		35		
	N		M 27		
24	и		25		
26	м				
Shee 2: Total Scale Sci					
Som all men corrects Total Score -	r) - #90).				
Stage 3: Total Score In	ASSESSION				
	server based on the chief's a		Problematic		
			Problematic 12 - 152		
			11 - 1/2		
	0-5	6-9	10-152		
Step 4. East Integrat	More				
and clinical on	iman are checked in Prop 1. di miner are kindy indicated. (In ant accorner to classic) belan	respectation of the Total	4 Scale score may be		
	or is the Concurring stage is record moving classed samples sent in advised.	edicates the child's part of children with profit	era of behavior in marks behavior.		
< la Step 3, a sor the normative;	or is t <i>e Problemate range is</i> population. Clinical services o	adicates the sourcis as we likely indicated.	seng the highest 5% in.	2008	PennState F

	ASB-C Score Form	
Step 1: Critical Items Check each item below	v with a non-0 response (i.e., 1, 2, 3, 4).
16	26	34
20	27	35. <u>X</u>
22. X	29	36
23	31. X	37
24	32	38. X
25. X	33	



Total Scale Score item scores (#1 - #38).		
core =10		
Total Score Interpretation he appropriate answer based on the child's age and total sca	ale score	
oup Typical/Expected Concerning	Problematic	
ears 0 – 10 11	12 – 152	
ears 0 - 6 (7 - 10)	11 – 152	
years 0-5 6-9	10 – 152	
	PennState Health Children's Hospital	
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ng and Interpreting the A	SB-C	
Total Scale Score		
Total Scale Score item scores (#1 - #38).		
ore =10		
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oup Typical/Expected Concerning	Problematic	
ears 0 – 10 11	12 – 152	
ears 0 - 6 7 - 10	11 – 152	
years $0-5$ $6-9$	(10 – 152)	
	PennState Health	
	Children's Hospital	
	SB-C	
ng and Interpreting the A	SB-C	
	SB-C	
nal Interpretation	ideted Problematic	
nal Interpretation nny critical items are checked in Step I, the child's behavior is cons d clinical services are likely indicated. (Interpretation of the Total S	ideted Problematic	
nal Interpretation my critical items are checked in Step 1, the child's behavior is cons de linical services are likely indicated, (Interpretation of the Total S- ipful, but is not necessary to classify behavior as 'problematic.') SEP 3, a score in the Concerning range indicates the chalf's pattern	idered Problematic cale score may be to of behavior is	
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nal Interpretation may critical items are checked in Step 1, the child's behavior is cons de clinical services are likely indicated. (Interpretation of the Total S (pfull, but is not necessary to classify behavior as "problematic.") Step 3, a score in the Concerning range indicates the chall's pattern we likely to occur among clinical samples of children with problems there assessment is advised. Step 3, a score in the Problematic range indicates the score is amon	sidered Problematic cale score may be s of behavior is atic behavior.	
nal Interpretation may critical items are checked in Step 1, the child's behavior is come de chinical services are likely indicated. (Interpretation of the Total S- hpful, but is not necessary to classify behavior as "problemntie.") Step 3, a score in the Concerning range indicates the child's pattern we likely to occur among clinical samples of children with problem	sidered Problematic cale score may be s of behavior is atic behavior.	
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Interpreting the ASB-C

- · Clinical Judgment:
 - Use in collaboration with other assessment techniques
 - The structure of the ASB-C lends itself to individual item examination and discussion



The ASB-C Extended (ASB-CE)

- ASB-C Extended (ASB-CE):
 - Also includes the past 6 months in a Yes/No format
 - May be helpful for intake assessment, history, epidemiological research
 - Psychometric evaluations shows very good qualities
 - Internal consistency: α = .86
 - Test-retest: r = .83, p < .001
 - Correlation with CSBI: r = .81, p < .001



The ASB-C Cross-Culturally

- Psychometric data collected to this point do not show any clear ethnic/racial or socioeconomic differences within the U.S. Further work is needed.
- Cross-cultural comparisons with other European countries are in progress.
- Several translations are available and others are being developed.



The Best Part...

· All ASB-C materials, versions, and translations are...

COMPLETELY FREE



THANK YOU!!!

