

Sexuality, Sexual Assault and Adolescents

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Introduction

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Objectives

Understand normal adolescent sexual development.

Understand some of the legal challenges of caring for adolescent patients.

Understand the impact of sexual violence on adolescent patients.

Changes That Occur With Puberty or Onset of Adolescence

- Physiological
- Cognitive/ Emotional/Social
- Legal

Physiological

Males

- Age 9-14
- Increase levels of testosterone
- Enlargement of scrotum and testicles then the penis enlarges
- Growth of pubic hair
- Increase in body size
- Voice changes
- Sperm production
- Growth spurt

Females

- Age 10-14
- Increase levels of estrogen
- Breast development
- Body hair development
- Change in body fat distribution
- Menstruation
- Growth spurt

Adolescent Sexuality –Physiology

Males

Early maturing have good body image, more confident, secure and independent and increased aggression

More likely to be sexually active

Females

- Early maturing self-conscious, insecure, more likely to develop eating disorders , face advances by older boys and more unwanted pregnancy, drug and alcohol use

Kar, Choudhury and Singh 2015

Cognitive /Emotional/Social Development

- Begin to deal with abstractions
- Egocentric behaviors and attitudes
- Frontal cortex develops last (executive function)
- Risk taking behaviors/ mood swings
- Observe measure and manage emotions
- Aware of their feelings and the feelings of others
- Build self confidence and self-esteem
- Identity development sense of self and connection to others

• <https://my.clevelandclinic.org/health/articles/7060-adolescent-development>

Development of Sexuality

- Biological changes
- Personality and temperament
- Parenting styles and parental attitudes
- Peer relationships
- Influence of culture and community
- Children learn about sexuality through a gendered lens

• Hegde, A. ,Chandran, S., and Pattniak, J. 2022

Gender and Sexual Development

- Different standards for sexual behaviors for males and females
 - Boys proud after having sex
 - Girls feel shame after having sex
 - Virginity is a goal for girls and for males a stigma
- Objectification of females
 - Increased rates of body dissatisfaction and depression

• Hegde, A. ,Chandran, S., and Pattniak, J. 2022

Sexual Awareness

- Sexual cognition – cognitive markers of sex “thinking about sex”
 - 25% of young adults think a lot about sex
- Others as objects of desire
 - “Crushes”
 - 25% of parents report their 10-12 year olds in members of other sex
- Self as an object of desire
 - Body image – including genital appearance
- Sexual arousal
- Arousal awareness
 - Fortenberry 2013

Sexual Behaviors

- Abstinence
- Masturbation
 - Age 13 men
 - Age 15 women
 - High levels of sexual self-awareness, higher effectiveness in attaining sexual satisfaction and resistance to sexual double standard
- Partnered sexual behavior
 - Kissing , touching, partner assisted masturbation, vaginal, oral and anal intercourse and sexual exchange via social media

Fortenberry 2013

Type of Sexual Activity

- Non-penetrative sex: The intentional and consensual touching (either giving or receiving), either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or buttocks.
- Penetrative sex: Regardless of the other partner's gender, this is involving the consensual penetration of the vagina, anus, or oral contact by the penis or by other means (e.g., dildo, manual).

The 2022 Utah College Behavior Survey: Initial findings Report

Percentage Engaging in Sexual Activity- Utah

Non- penetrative

- 33.5 % first engaged middle or high school
- 41.8 % at age 17

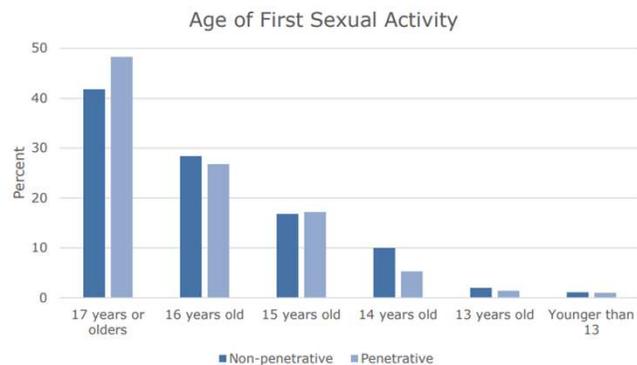
Penetrative

- 19.6 % first engaged in middle or high school
- 48% at age 17

The 2022 Utah College Behavior Survey: Initial findings Report

Age of Sexual Initiation

Figure 3. Participant age when they first had non-penetrative sex ($n = 366$) or penetrative sex ($n = 211$).



The 2022 Utah College Behavior Survey: Initial findings Report

Sexting and Online Activity

- Electronic exchange of sexually suggestive messages or images
- Prevalence ages 11-18 ranged from 0.9%-60% (sending and receiving)
- Sent a sext 14.8% 11-17 year olds
- Some studies indicate higher rate with gender minority
- Can be used for validation of appearance
 - Paquette, Dion, Bothe, Girouard, and Bergerson 2022

Body Appreciation and Sexting

- Positive body image
- Higher levels of sexting in heterosexual cisgender girls and sexually diverse boys was associated with lower levels of body appreciation.
- Heterosexual cisgender boys , gender and sexually diverse girls and non-binary adolescent did not show a correlation between levels of sexting and body appreciation
 - Paquette, Dion, Bothe, Girouard, and Bergerson 2022

Social Factors and Other Factors

- Parental attitudes
- Parenting style
- Peer relationships
- Cultural influences
- Politics
- Legal

What Does Adolescent Sexual Assault look Like

- Higher rate of DFSA 40-50% alcohol and drugs involved with assault
- Physical force is less common
- Physical injuries less common than adults
- Genital injuries more common
- Know their assailants, usually an acquaintance

Baily, Shaw, and Harris 2022

How Do Developmental Factors Increase risk of SA

- Desire for independence can alienate adolescents from adult support
- Decreases likelihood of reporting to adults

Sexual Minorities and Sexual Assault

- Increased rates of SA of individuals who are transgender
- Increased rate of SA of individual who have same-sex attraction or non-heterosexual identity
 - Heterosexual cisgender girls 9.0%
 - Heterosexual cisgender boys 2.5%
 - Sexual minority cisgender girls 22.3%
 - Sexual minority cisgender boys 10.3%
 - Transgender non-binary adolescents 21.9%
 - Murchison, Chen, Austin and Reisner 2023

(.83% or 2,100 13-17 year old identify as tran

Sexual Minorities- What Are the Numbers?

- 0.83% or 2,100 13-17s year old identify as transgender in Utah
 - Williams Institute <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Trans-Pop-Update-Jun-2022.pdf>
- **Overall non-heterosexual identification:** 11.8% of Utah high school students.
- **Gay or Lesbian:** 1.5%.
- **Bisexual:** 5.4%.
- **Unsure/Other:** 4.9%.
 - Utah LGBTQ+ Suicide Prevention Plan [https://sprc.org/wp-content/uploads/2022/11/Utah-LGBTQ-Suicide-Prevention-Plan-2020-2023-1.pdf#:~:text=The%20survey%20is%20administered%20every%20two%20years%2C,notsure/%20other%204.9%20\(Figures%203%20&%204\).](https://sprc.org/wp-content/uploads/2022/11/Utah-LGBTQ-Suicide-Prevention-Plan-2020-2023-1.pdf#:~:text=The%20survey%20is%20administered%20every%20two%20years%2C,notsure/%20other%204.9%20(Figures%203%20&%204).)

Adolescent Sexual Assault

Sexual Violence and Students

According to the 2015 Youth Risk Behavior Survey, 6.7% of high school students reported they were physically forced to have sexual intercourse. This includes:¹⁸



Serving Teen Survivors : A Manual for Advocates:

<https://www.nsvrc.org/sites/default/files/publications/2018-12/Serving%20Teen%20Survivors%20A%20Manual%20for%20Advocates.pdf>

What is the Problem in Utah?

- Approximately 1 in 13 Utah students have been physically forced to have sexual intercourse Grade 9-12.
- In 2021 Among youth in Utah, 11.4% of Hispanic youth and 7.5% of non-Hispanic White youth experienced being physically forced to have sexual intercourse.
- Among Utah high schools, 14.8% of students report experiencing sexual violence in the past 12 months during 2021. Additionally, 7.7% of students experienced forced sexual intercourse. National research estimates that eight out of ten rape victims report they were first raped before they turned 25, and four out of ten rape victims report they were first raped before their 18th birthday.

• "Retrieved Tue, 15 April 2025 from the Utah Department of Health and Human Services, Indicator-Based Information System for Public Health website: <https://ibis.utah.gov/ibisph-view/>"

What Does it Look Like in Utah – 2019 Survey of High Schoolers

- 1 in 13 Utah high schoolers (7.6%) forced to have intercourse
 - 1 in 9 girls (11%)
 - 1 in 24 boys (4.1%)
- 1 in 5 girls (21.2%) and 1 in 13 boys (7.6%) experienced sexual violence in the last 12 months (14.3%) total
- Only California and Idaho have higher rates (CA 19.0% and Idaho 14.9%)
 - Utah Women and Leadership Project <https://www.usu.edu/uwlp/files/child-sexual-abuse-statistics.pdf>

Utah Adolescent SANE Cases 2023

- Total of 110
- 14-year-olds - 14
- 15-year-olds - 24
- 16-year-olds - 38
- 17-year-olds - 33

- Total number of high school students enrolled $158,813 \times 7.6\%$
=12,000+

Why Don't The Numbers Add Up?

- 32% never disclose
- 40% disclose with a month
- 29% month or longer

Reasons for Not Disclosing

- Guilt
- Fear because of threats
- Fear of negative social responses
- Not wanting negative consequences for the suspect
- Legal concerns if drug or alcohol was involved

• Riggs and Rasmussen 2021

Increasing Reporting

- To encourage reporting and participation with the investigation, officers should exercise discretion when a victim's criminal activity or non-citizen/nonresident status is discovered during the sexual assault investigation.
- When evidence of a victim's criminal activity is only discovered as a result of the sexual assault investigation and through no other means, victims should not be arrested or cited for offenses that do not endanger public safety. Such offenses include, but may not be limited to: possession of controlled substances or possession or consumption of alcohol by a minor.
- Officers should be aware that the possibility of adverse immigration and naturalization consequences may discourage a victim from reporting or participation. When applicable state and federal statutes allow, victims should not face adverse consequences as a result of reporting and participation.
 - Utah Peace Officer Standards and Training Model Sexual Assault Investigations Policy

Why Teen Victims do Not Disclose

- Lack of understanding that what they experienced was a crime
- Fear that no one will believe them
- Fear of being blamed or punished
- Feelings of guilt, shame, and self-blame
- Fear of retaliation
- Mistrust of adults
- Belief that nothing will be done
- Lack of knowledge about available services
- Lack of access to services
- Perceived and real limits of confidentiality
 - Reaching and Serving Teen Victims
<https://ovc.ojp.gov/sites/g/files/xyckuh226/files/media/document/ncj211701.pdf>

How Do Adolescents Disclose

- Voluntary-Disclose to a peer who encourages them to report to an adult –more likely to cooperate with the criminal justice system
- Involuntary- Report to a peer who tells and adult without permission
- Situational – survivor unconscious at time of assault
 - Campbell, Greeson, Fehler-Cabral and Kennedy 2015

How do Utah Statutes Impact Adolescents?

- Age of consent laws
- Sexting laws
- Mandatory child abuse reporting
- Access to Emergency Contraception
- Minors are not entitled to restricted sexual assault kits
- Consent for medical forensic examinations

UTAH AGE OF CONSENT LAWS																					
Age	Sexual Intercourse						Oral/Anal Sexual Activity						Vaginal/Anal Penetration						Fondling/Sexual Touching		
16-17*	Cannot consent to person 10+ years older (7+ if knew victim's age) Penalty: 3 rd Degree Felony U.C.A. (§76-5-401 2)(2)(b)(ii))						Cannot consent to person 10+ years older (7+ if knew victim's age) Penalty: 3 rd Degree Felony U.C.A. (§76-5-401 2)(2)(b)(iii))						Cannot consent to person 10+ years older (7+ if knew victim's age) Penalty: 3 rd Degree Felony U.C.A. (§76-5-401 2)(2)(b)(iii))						Cannot consent to person 10+ years older (7+ if knew victim's age) Penalty: Class A Misdemeanor U.C.A. (§76-5-401 2)(2)(b)(iv))		
14-15*	Never can consent to adult Penalty: 3 rd Degree Felony (unless <4 yrs age difference, then Class B Misdemeanor) U.C.A. (§76-5-401(2)(a)(i))						Never can consent to adult Penalty: 3 rd Degree Felony (unless <4 yrs age difference, then Class B Misdemeanor) U.C.A. (§76-5-401(2)(a)(ii))						Never can consent to adult Penalty: 3 rd Degree Felony (unless <4 yrs age difference, then Class B Misdemeanor) U.C.A. (§76-5-401(2)(a)(iii))						Cannot consent to person 4+ years older Penalty: Class A Misdemeanor U.C.A. (§76-5-401.1)		
<14*	Never can consent to adult Penalty: 1 st Degree Felony if non-consensual AGE 12 13 14 15 16 17 12 MC MC MA MA F3 F1 13 MC MC MC MB MA F3 14 — — — — — MB 15 — — — — — 16 — — — — — 17 — — — — — U.C.A. (§76-5-402.1)						Never can consent to adult Penalty: 1 st Degree Felony if non-consensual AGE 12 13 14 15 16 17 12 MC MC MA MA F3 F1 13 MC MC MC MB MA F3 14 — — — — — MB 15 — — — — — 16 — — — — — 17 — — — — — U.C.A. (§76-5-403.1)						Never can consent to adult Penalty: 1 st Degree Felony if non-consensual AGE 12 13 14 15 16 17 12 MC MC MA MA F3 F1 13 MC MC MC MB MA F3 14 — — — — — MB 15 — — — — — 16 — — — — — 17 — — — — — U.C.A. (§76-5-402.3) U.C.A. (§76-5-404.1)						Never can consent to adult Penalty: 2 nd Degree Felony if non-consensual (1 st depending upon aggravating factors) AGE 12 13 14 15 16 17 12 MC MC MA MA F3 F1 13 MC MC MC MB MA F3 14 — — — — — MB 15 — — — — — 16 — — — — — 17 — — — — — U.C.A. (§76-5-404.1)		
* There is no lawful defense to that the person did not know or was mistaken about the victim being under the age of 16; partial defense under 16-17. See U.C.A. 76-2-304.5																					
WITHOUT CONSENT OF VICTIM**																					
Age	Sexual Intercourse						Oral/Anal Sexual Activity						Vaginal/Anal Penetration						Fondling/Sexual Touching		
14+	Rape Penalty: 1 st Degree Felony U.C.A. (§76-5-402)						Forcible Sodomy Penalty: 1 st Degree Felony U.C.A. (§76-5-403)						Object Rape Penalty: 1 st Degree Felony U.C.A. (§76-5-402.2)						Forcible Sexual Abuse Penalty: 2 nd Degree Felony U.C.A. (§76-5-404)		
* Regardless of the victim's age, sexual activity is without the consent of the victim under the circumstances listed in U. C. A. (§76-5-406)																					
* The victim need not resist any more than the victim's age and strength of body and mind make it reasonable for the victim to resist under the circumstances. It is not necessary that it be shown that the victim engaged in any heroics or that she otherwise risked the assailant's brutality or infliction of serious wounds or injuries. State v. Lovato, 702 P.2d 101, 109 (Utah 1985)																					
* It is not necessary to show that the victim physically resisted, attempted escape or suffered or risked serious wounds or injury. A verbal refusal to engage in intercourse, such as the victim saying "no" to the actor, is sufficient by itself to establish lack of consent. A person does not surrender the right to refuse sexual intimacy by accepting another's company, or by encouraging or accepting romantic overtures. State v. Herzog, 610 P.2d 1281, 1283 (Utah 1980)																					

Navajo Nation Victims Rights Act of 2023

- Signed into law September 7, 2023 defines “without consent”

"Without consent" means: The victim does not express, through words or actions, consent to engage in a sexual act or sexual contact, or the victim withdraws consent before or during a sexual act or sexual contact that the victim previously consented to;

Sexting U.C.A. 76-10-1206 Dealing in material harmful to a minor

A person is guilty of dealing in material harmful to minors when, knowing or believing that an individual is a minor, or having negligently failed to determine the proper age of a minor, the person intentionally:

distributes or offers to distribute, or exhibits or offers to exhibit, to a minor or an individual whom the person believes to be a minor, any material harmful to minors;

produces, performs, or directs any performance, before a minor or an individual whom the person believes to be a minor, that is harmful to minors; or

Each separate offense under this section committed by a person 16 or 17 years old is a class A misdemeanor

Consent for Medical Forensic Examination

26B-7-214. Sexually transmitted infections -- Consent of minor to treatment.

- (1) A consent to medical care or services by a hospital or public clinic or the performance of medical care or services by a licensed physician or physician assistant executed by a minor who is or professes to be afflicted with a sexually transmitted disease, shall have the same legal effect upon the minor and the same legal obligations with regard to the giving of consent as a consent given by a person of full legal age and capacity, the infancy of the minor and any contrary provision of law notwithstanding.
- (2) The consent of the minor is not subject to later disaffirmance by reason of minority at the time it was given and the consent of no other person or persons shall be necessary to authorize hospital or clinical care or services to be provided to the minor by a licensed physician or physician assistant.
- (3) The provisions of this section shall apply also to minors who profess to be in need of hospital or clinical care and services or medical care or services provided by a physician or physician assistant for suspected sexually transmitted disease, regardless of whether such professed suspicions are subsequently substantiated on a medical basis.

- Planned Parenthood Ass'n of Utah v. Matheson , 582 F. Supp. 1001 (D. Utah 1983).
- In summary, the decision whether to use contraceptives is as intimate and personal as, and involves risks to the individual which are comparable to those raised by the decision whether to have an abortion. The court, therefore, is persuaded that the statements in *Akron* and *H.L.* concerning the constitutionality of parental notification laws in the abortion context support the conclusion that the state may not impose a blanket parental notification requirement on minors seeking to exercise their constitutionally protected right to decide whether to bear or to beget a child by using contraceptives.
- H.B. 343 fails to provide a procedure whereby a mature minor or a minor who can demonstrate that his or her best interests are contrary to parental notification can obtain contraceptives confidentially. As such, H.B. 343 unconstitutionally infringes upon the right to decide whether to bear or to beget children.^[9]

Utah Options for Adolescent Care

- 23 SANE programs offer acute sexual assault medical forensic examinations to 14 and older (acute exam is up to 6 days after assault) Majority of programs have 24/7 coverage
- 14 Children's Justice Centers majority of programs do not have 24/7 coverage
- Primary Children's Hospital SLC and Lehi

Urgent Medical Considerations

- Emergency contraception 72-120 hours depending on medication
 - Plan B – levonorgestrel
 - Ella – ulipristal
- HIV prophylaxis 72 hours

Coordinating Care

- All SANE programs should have a warm handoff to CJC
- Adolescents should have access to community-based advocacy

Advocates Have Different Roles and Confidentiality

- Sexual Assault Counselors U.C.A. 77-38-203
- Criminal Justice Victim Advocates U.C. A. 77-38-403
- Institutional “Certified Advocate” U.C. A. 53B-28-201

Short Term Gynecological Health Care Risks

- Sexually transmitted infections 48.2%
- Unplanned/unwanted pregnancy 8.2%
- Genital laceration 16.5%
- Hematoma 3.5%

Hill et al 2025

Long Term Gynecological Health Care Risks

- Dyspareunia 8.2%
- Menstrual disturbance 2.4%
- Chronic pelvic pain 11.8%
- Vulvodynia 5.9%
- Vaginismus 2.4%
- Urinary symptoms 11.8%

Hill et al 2025

What is Comprehensive Sex Education and How Does it Impact Risk of Sexual Violence

Comprehensive Sex Education

- Abstinence and safe sex
- Contraception
- Sexually transmitted diseases
- Sexual consent
- Healthy Relationships
- Human development

Impact of Comprehensive Sex Education

- Greater understanding of sexual consent
- Reduced sexual victimization
- Increased satisfaction with sexual education
- Reduced acceptance of rape myths

Caulfield, Ferguson, Buerke and Capron 2025

How Do Utah Students Feel About Sex Education (Utah State University)

- Survey of 1,174 College Students
- Gender Identity
 - Male 26.8 %
 - Female 67.6 %
 - Other 5.6%
- Sexual Orientation
 - Heterosexual 69 %
 - LGBTQ+ 31%
- Religious Affiliation
 - Non-religious 31.8%
 - Mormon/LDS 54.5 %
 - Other religion 13.7%

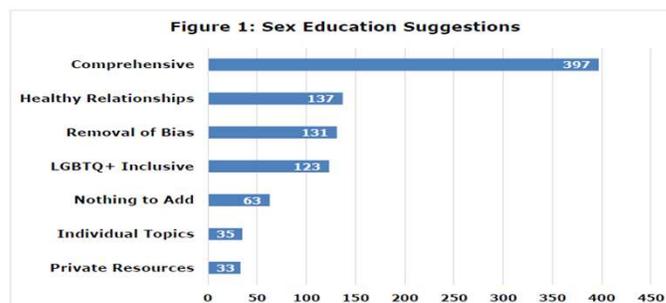
Weaver, Gast, Meir and Ward 2024

What Was Needed

A total of 620 participants answered the following open-ended question:

In your opinion, when you think back to high school, what types of sexual health education or programs would you have liked to have access to in your school or the local community?

Figure 1 below shows the main categories that emerged for this question and the number of participants whose response fell within the theme.



The 2022 Utah College Sexual Behavior Survey

Student Thoughts

I think sex education in Utah is just terrible. I feel like there needs to be a lot more attention given to different types of birth control, and the view needs to shift away from abstinence and towards safe sex. Also, the fact that consent is never discussed is extremely problematic.... There are several other areas I think that are lacking, too, but those are the main ones. Basically, I'd love to see an improvement in almost every aspect.

Consent should be a very bare minimum topic for health classes. When I began my first sexual relationship, I had a very hard time saying no when I was uncomfortable. I understand that many Utah policymakers believe that people need to wait until marriage to have sex, but consent should still always apply, even if a couple is married. It is incredibly harmful that we do not teach about this.

All students should be aware of the unique issues LGBTQIA+ individuals deal with, including how to be an ally and how to explore gender/sexual identities. Queer sexual health should also be treated with the same educational value as cis-heterosexual health.

(A)bstinence is the only thing teenagers should be practicing" and "this doesn't belong in schools but should be discussed at home with a family and in a church setting."

Weaver, Gast , Meir and Ward 2024

How Can You Make Difference

- Start by Believing
- Educate first responders
- Understand the Importance of a Trauma-Informed Approach
 - Being trauma-informed does not mean services are specifically designed to treat symptoms or syndromes related to sexual violence but rather are aware and sensitive to the needs of all trauma and consider all forms of trauma survivors may have experienced. A trauma-informed approach looks at a survivor's entire history and context of their experiences (Resource Sharing Project [RSP] & National Sexual Violence Resource Center) 2013
- Don't leave anyone behind

Hotlines

- UCASA English 801-736-4356
- UCASA Spanish 801-924-0860
- Trevor Project 1-866-488-7386

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- Riggs, R. and Rasmussen, E. (2021). The influence of video-modeled sexual assault disclosure and self-efficacy messages on sexual assault disclosure efficacy of adolescent girls. **Journal of Health Communication**. 26. 361-370.

Resources

- Child Sexual Abuse Statistics Utah women in Leadership Project - <https://le.utah.gov/interim/2022/pdf/00001784.pdf>
- Trevor Project https://www.thetrevorproject.org/?gad_source=1&gad_campaignid=20188209510&gbraid=0AAA_AADsmOdbHvb5CjyqAq8YWAFpM6-xpr&gclid=Cj0KCCQjwoNzABhDbARISALfY8VPB648Tk4M3HskjKS69VtRICggucohyZudExUoRJ2WJVYI4gZN5bKsaAsxqEALw_wcB
- Utah Coalition Against Sexual Assault <https://www.ucasa.org/>
- Bolder Way Forward <https://www.usu.edu/uwlp/a-bolder-way-forward/overview>
- Reaching and Serving Teen Victims <https://ovc.ojp.gov/sites/g/files/xyckuh226/files/media/document/ncj211701.pdf>
- Serving Teen Survivors : A Manual for Advocates: <https://www.nsvrc.org/sites/default/files/publications/2018-12/Serving%20Teen%20Survivors%20A%20Manual%20for%20Advocates.pdf>
- Forge <https://forge-forward.org/>