Adolescent Clinical Sexual Behavior Inventory-Self Report

Basic Description

Author(s): Friedrich, W.N., Ph.D.
Author Contact: Department of Psychiatry and Psychology
Mayo Clinic
200 First Street, S.W.
Rochester, MN 55905
Author Email: Friedrich.William@mayo.edu

To Obtain: Contact the author.
E-mail: Friedrich.William@mayo.edu
Website: None
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Copyright: No

Description: The ACSBI is a screening measure designed for clinical populations to assess sex-related behaviors that might suggest a need for intervention. It assesses sexual risk taking, nonconforming sexual behaviors, sexual interest, and sexual avoidance/discomfort.

The ACSBI is based on the Child Sexual Behavior Inventory (CSBI), a widely used measure of child sexual behavior for children aged 2-10, which is also reviewed in this database. Although the measure is psychometrically young and in need of some revision, it is an important measure in that risky and unsafe sexual behaviors are important to assess in adolescents, especially those with histories of sexual abuse.

There are two versions of the ACSBI, a parent-report version (ACSBI-P) and an adolescent self-report version (ACSBI-S). Both are reviewed in this database.

Theoretical Orientation

Summary:

Domains Assessed:

1. Sexual behaviors (child)
2.
3.
4.
5.
6.

Languages Available: English
**Adolescent Clinical Sexual Behavior Inventory-Self Report**

<table>
<thead>
<tr>
<th>Age Range:</th>
<th>12.0 - 18.0</th>
<th>Measure Type:</th>
<th>Screening</th>
</tr>
</thead>
<tbody>
<tr>
<td># of Items:</td>
<td>45</td>
<td>Measure Format:</td>
<td>Questionnaire</td>
</tr>
<tr>
<td>Time to Complete (min):</td>
<td></td>
<td>Reporter:</td>
<td>Self</td>
</tr>
<tr>
<td>Time to Score (min):</td>
<td></td>
<td>Education Level:</td>
<td></td>
</tr>
<tr>
<td>Periodicity:</td>
<td>Reports on behaviors over the past 12 months.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Response Format:</td>
<td>3-point scale (1=not true, 2=somewhat true, 3=very true)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Materials Needed:** (check all that apply)
- Yes Paper and pencil
- Testing stimuli
  - Computer
  - Physiological equipment
  - Video equipment
  - Other

**Sample Items:**

<table>
<thead>
<tr>
<th>Domains</th>
<th>Scale</th>
<th>Sample Items</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sexual knowledge/interest</td>
<td></td>
<td>Shows off their skin or body parts.</td>
</tr>
<tr>
<td>Sexual risk/misuse</td>
<td></td>
<td>You are worried about your sexual behavior.</td>
</tr>
<tr>
<td>Divergent sexual interests</td>
<td></td>
<td>Peeps into windows or tries to see others in the bathroom.</td>
</tr>
<tr>
<td>Concerns about appearance</td>
<td></td>
<td>Is unhappy with their looks.</td>
</tr>
<tr>
<td>Fear</td>
<td></td>
<td>Has no friends of the opposite sex.</td>
</tr>
</tbody>
</table>

**Information Provided:** (check all that apply)
- Diagnostic information DSM-III
- Diagnostic information DSM-IV
- Strengths
- Areas of concerns/risks
- Program evaluation information
- Continuous assessment
- Raw Scores
- Standard Scores
- Percentile
- Graph (e.g., of elevated scale)
- Dichotomous assessment
- Clinical friendly output
- Written feedback
- Other

**Training to Administer:** (check all that apply)
- None
- Via manual/video
  - Training by experienced clinician (<4 hours)
- Prior experience psych testing & interpretation
  - Training by experienced clinician (>24 hours)

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Adolescent Clinical Sexual Behavior Inventory-Self Report
NCTSN Measure Review Database
www.NCTSN.org
Parallel or Alternate Forms

<table>
<thead>
<tr>
<th>Parallel Forms?</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alternate Forms:</td>
<td>No</td>
</tr>
<tr>
<td>Forms for Different Ages:</td>
<td>Yes</td>
</tr>
<tr>
<td>If so, are forms comparable:</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Any Altered Versions of Measure:

Describe:

1. The ACSBI is based on the Child Sexual Behavior Inventory, which assesses sexual behaviors in children aged 2-10 and is also reviewed in this database.

2. The ACSBI-S is an adolescent self-report version for adolescents (also reviewed in this database).

Population Used to Develop Measure

The development sample (Friedrich et al., 2004) included 174 adolescents aged 12-18 (M=15, SD=1.4) and their primarily female caregivers (81.5%). The sample was predominantly White, educated (74% had 12+ years of education), and upper- to middle-class.

Adolescents included 46.6% males and 53.4% females. Adolescents were recruited from a partial hospitalization or inpatient program at the Mayo Clinic in Rochester, New York (n=120), or from an outpatient evaluation program in Denver, Colorado (n=54).

Psychometrics

Global Rating (scale based on Hudall Stamm, 1996):

Under construction, psychometric evaluation is underway

Norms:

For separate age groups: No
For clinical populations: No
Separate for men and women: No
For other demographic groups: No

Notes:

Friedrich et al. (2004) reported on the initial reliability and validity of the measure. Some scales showed questionable internal consistency.

Clinical Cutoffs:

Specify Cutoffs:
Used in Major Studies:
Specify Studies:
Reliability:

<table>
<thead>
<tr>
<th>Type:</th>
<th>Rating</th>
<th>Statistics</th>
<th>Min</th>
<th>Max</th>
<th>Avg</th>
</tr>
</thead>
<tbody>
<tr>
<td>Test-Retest-# days: 7</td>
<td>Acceptable</td>
<td>r</td>
<td>0.74</td>
<td>0.74</td>
<td>0.74</td>
</tr>
<tr>
<td>Internal Consistency:</td>
<td>Questionnable</td>
<td>alpha</td>
<td>0.45</td>
<td>0.84</td>
<td>0.68</td>
</tr>
<tr>
<td>Inter-Rater:</td>
<td>Acceptable</td>
<td>r</td>
<td></td>
<td></td>
<td>0.5</td>
</tr>
<tr>
<td>Parallel/Alternate Forms:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Statistics:

From Friedrich et al. (2004):
TEST-RETEST
Conducted with 23 inpatients was reported for the ASCBI-S total score.

INTERNAL CONSISTENCY
Reliability for scales varied and was reported as:
- Sexual Knowledge/Interest (alpha=.84)
- Sexual Risk/Misuse (alpha=.77)
- Concerns About Appearance (alpha=.68)
- Divergent Sexual Interest (alpha=.65)
- Fear/Discomfort (alpha=.45)

Reliability for the total scale was .86, with all items positively correlated with the total score.

INTER-RATER
Correlations between the parent and adolescent reports using the ACSBI-P and ACSBI-S showed that 28 of 41 items were correlated. Total scores were correlated (r=.50).

However, the authors note that the ACSBI-P and ACSBI-S share only 25% of their variance, suggesting that parents and adolescents have different perceptions regarding adolescents’ sexual behaviors.

Content Validity:

From Friedrich et al. (2004):
The ACSBI is based on the Child Sexual Behavior Inventory (CSBI), a widely used measure of child sexual behavior for children aged 2-10, which is also reviewed in this database. It is based on 2 domains of the CSBI, which are elevated for 10- to 12-year-olds.

The initial pool of 35 items assessed sexual knowledge and interest. Other items were added “to reflect salient behaviors described in the literature, for example, sexual concerns, promiscuity, body image, sexual risk taking, and running away.”

Items were tested with 23 inpatient adolescents. “Troublesome items were reworded, and 10 items were added.”
### Construct Validity: (check all that apply)

<table>
<thead>
<tr>
<th>Validity Type</th>
<th>Not known</th>
<th>Not found</th>
<th>Nonclinical Samples</th>
<th>Clinical Samples</th>
<th>Diverse Samples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Convergent/Concurrent</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discriminant</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensitive to Change</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Intervention Effects</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Longitudinal/Maturation Effects</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sensitive to Theoretically Distinct Groups</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td>Factorial Validity</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Notes:** From Friedrich et al. (2004):

ACSBI-S scores correlated with the three Sexual Concerns scales of the Trauma Symptom Checklist for Children (TSCC), the Adolescent Sexual Concerns Questionnaire Sexual Distress Scale (ASCQ), and the CBCL total and subscale scores.

Adolescents with a sexual abuse history had higher scores on the ASCBI-S total score and Sexual Knowledge/Interest, Sexual Risk/Misuse, and Fear/Discomfort scales compared to those without a history of abuse.

Friedrich et al. (2004) examined the factor structure of the ACSBI using a principal components analysis and an orthogonal varimax rotation. They identified 5 factors for both the parent and self-report version. For the ACSBI-S (self-report version), the factors accounted for 37.6% of the variance. Of the 45 items, 39 were included in the solution, as they had item loadings greater or equal to .30 on at least one scale.

Factors were labeled: 1) Sexual Knowledge/Interest, 2) Sexual Risk/Misuse, 3) Divergent Sexual Interest, 4) Concerns About Appearance, and 5) Fear/Discomfort. These are the same factors identified for the parent-report version (ACSBI-P).

### Criterion Validity: (check all that apply)

<table>
<thead>
<tr>
<th>Measures used as criterion:</th>
<th>Not known</th>
<th>Not found</th>
<th>Nonclinical Samples</th>
<th>Clinical Samples</th>
<th>Diverse Samples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Predictive Validity:</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Postdictive Validity:</td>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Notes:** No information available.
1. As noted by the authors, the Fear/Discomfort scale has questionable reliability.

2. Only 29 of 45 items loaded on scales in the factor analysis.

3. Psychometrics examined in a predominantly White, middle- to upper-class sample. More research is needed on psychometrics, but this is a promising measure.

4. The author reports that the measure is being used in two longitudinal studies at two different sites: 1) Medical University of South Carolina (Elizabeth Letourneau), and 2) University of North Carolina at Chapel Hill (LONGSCAN).

**Limitations of Psychometrics and Other Comments Regarding Psychometrics:**

- No information available.

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**Consumer Satisfaction**

No information available.

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**Languages Other than English**

<table>
<thead>
<tr>
<th>Language:</th>
<th>Translation Quality (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1 = Has been translated</td>
</tr>
<tr>
<td></td>
<td>2 = Has been translated and back translated - translation appears good and valid.</td>
</tr>
<tr>
<td></td>
<td>3 = Measure has been found to be reliable with this language group.</td>
</tr>
<tr>
<td></td>
<td>4 = Psychometric properties overall appear to be good for this language group.</td>
</tr>
<tr>
<td></td>
<td>5 = Factor structure is similar for this language group as it is for the development group.</td>
</tr>
<tr>
<td></td>
<td>6 = Norms are available for this language group.</td>
</tr>
<tr>
<td></td>
<td>7 = Measure was developed for this language group.</td>
</tr>
</tbody>
</table>

1. 2. 3. 4. 5. 6. 7.

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**Use with Trauma Populations**

Populations for which measure has demonstrated evidence of reliability and validity:

<table>
<thead>
<tr>
<th>Yes</th>
<th>Natural disaster</th>
<th>Terrorism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical abuse</td>
<td>Accidents</td>
<td>Immigration related trauma</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>Accidents</td>
<td>Kidnapping/hostage</td>
</tr>
<tr>
<td>Neglect</td>
<td>Imprisonment</td>
<td>Traumatic loss (death)</td>
</tr>
<tr>
<td>Domestic Violence</td>
<td>Witness death</td>
<td>Other</td>
</tr>
<tr>
<td>Community violence</td>
<td>Assault</td>
<td></td>
</tr>
<tr>
<td>Medical trauma</td>
<td>War/combat</td>
<td></td>
</tr>
</tbody>
</table>
Use with Diverse Populations

<table>
<thead>
<tr>
<th>Population Type:</th>
<th>Degree of Usage: (check all that apply)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
</tr>
<tr>
<td>1. Developmental disability</td>
<td></td>
</tr>
<tr>
<td>2. Disabilities</td>
<td></td>
</tr>
<tr>
<td>3. Lower socio-economic status</td>
<td></td>
</tr>
<tr>
<td>4. Rural populations</td>
<td></td>
</tr>
<tr>
<td>5.</td>
<td></td>
</tr>
<tr>
<td>6.</td>
<td></td>
</tr>
</tbody>
</table>

Use with Diverse Populations Rating Scale
1. Measure is known (personal communication, conference presentation) to have been used with members of this group.
2. Studies in peer-reviewed journals have included members of this group who have completed the measure.
3. Measures have been found to be reliable with this group.
4. Psychometric properties well established with this group.
5. Norms are available for this group (or norms include a significant proportion of individuals from this group).
6. Measure was developed specifically for this group.

Notes (including other diverse populations):

Pros and Cons/Qualitative Impression

Pros:
1. The measure taps the important domain of adolescent sexual behavior. This domain is essential when working with adolescents who have experienced trauma, in particular sexual abuse, and is important for any clinical population of adolescents.

2. The measure is based on a widely used and well-validated measure of child sexual behavior (CSBI).

3. The measure has comparable parent and adolescent versions.

4. As of 6/05, the measure is free.

Cons:
1. The measure is psychometrically immature, and some problems, such as the low reliability of the Fear/Discomfort scale and the fact that not all items load on scales, will need to be resolved.

2. More studies, including studies with diverse populations, are needed before the measure can be adapted.

3. Norms have not yet been developed, which will facilitate interpretation.
A PsychInfo search (6/05) of "Adolescent Clinical Sexual Behavior Inventory" or "ACSBI" anywhere revealed that the measure has been referenced in 1 peer reviewed journal article.


Unpublished References:
A PsychInfo search (6/05) of "Adolescent Clinical Sexual Behavior Inventory" or "ACSBI" anywhere revealed that the measure has not been referenced in any dissertations or conferences.

Number of Published References:
(based on author provided information and a PsychInfo search, not including dissertations) 1

Number of Unpublished References:
(based on a PsychInfo search of unpublished doctoral dissertations) 0

The author provided comments on the review, which were integrated.

Citation for Review: Chandra Ghosh Ippen, Ph.D.
Editor of Review: Chandra Ghosh Ippen, Ph.D.
Last Updated: 6/28/2005
PDF Available: yes

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