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# CHILD ABUSE PREVENTION TRAINING: INTRODUCING A TRAIN-THE-TEACHER MANUAL FOR CHILD SAFETY AWARENESS

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CHILD ABUSE PREVENTION TRAINING: INTRODUCING A TRAIN-THE-TEACHER  
MANUAL FOR CHILD SAFETY AWARENESS

By

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A Capstone Project submitted in partial fulfillment of the requirement for the degree of Masters  
of Science in Behavioral Health

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## Abstract

**Introduction.** In order for the San Francisco Child Abuse Prevention Center community education department to extend the outreach of the Child Safety Awareness (CSA) curriculum, a training manual was created for San Francisco Unified School District (SFUSD) K- 5th grade teachers. This paper evaluates the effectiveness of a train the teacher manual for the child safety lessons.

**Methods.** A five question tool was developed to survey Kindergarten through 5th grade teachers working at elementary schools in the San Francisco Unified School District. The questions were designed to better understand the needs of the population before creating a resource for them to utilize.

**Results.** The survey results showed that teachers in SFUSD preferred a digital, easy to access, comprehensive training manual on each CSA lesson in order to prepare to deliver the lessons to their students.

**Discussion.** The survey results confirm that teachers are willing to participate in efforts to educate children with preventative child abuse knowledge. The results also led to suggestions for the agency on how to implement and distribute the training manual for San Francisco Unified School District.

**Recommendations.** As San Francisco Child Abuse Prevention Center continues their partnership with the SFUSD, the two will need to identify elementary schools that will not be visited by community educators and ensure that the manual is accessible for those schools as a testing pilot. The agency should continue to keep the manual online and introduce one point of contact for teachers to reach out with questions.

Keywords: Child abuse, prevention, training, manual, child safety awareness

## **Executive Summary**

The San Francisco Child Abuse Prevention Center (SFCAPC) in partnership with the school health department of San Francisco Unified School District (SFUSD), wants to empower Kindergarten through 5th grade students with the appropriate language, knowledge and resources to use to recognize and help protect themselves from unsafe situations. SFCAPC, through its community education department, provides Child Safety Awareness (CSA) lessons for all Kindergarten through 5th grade classrooms in SFUSD.

Due to the outreach limitations of the community educators, SFCAPC wants to implement a Train the Trainer manual for elementary teachers in order to ensure the CSA lessons are available, effective for students and eventually more integrated within the school curricula. A short survey was added to the SFCAPC teacher evaluation form in order to learn more about potential concerns, barriers, perceptions and use of a trainer manual for the lesson plans. The teachers' responses showed that an online training manual that was easy to read and comprehend and access would be better suited for SFUSD teachers to use.

Using the results of the survey, observations and literature, a train- the-teacher manual was derived from a larger manual used by the agency's community educators. The version created for the San Francisco Unified School District Kindergarten through 5th grade teachers is succinct and focuses on two specific lessons: safe and unsafe touch and support systems. The manual is accessible online and provides teachers with the language necessary to educate children about ways to keep themselves safe and what to do if they are ever in an unsafe situation.

## Introduction

Children are one of our most vulnerable populations and one of the most deserving of our protection. Childhood adversity can have lasting impacts on the overall life trajectory of an individual. We as a society are better when children have a healthy and stable environment to grow and develop. However, children all over the world are in danger of being emotionally, physically or sexually abused and neglected. Child abuse is difficult to discuss because it can trigger emotions for many different reasons. The prevalence of these types of adverse childhood experiences affect all types of people, meaning many are at risk for child abuse, know someone who was abused or were abused themselves.

When a child is mistreated or abused, it not only affects that child's life, but it affects his or her family's life as well. There are medical, mental and emotional damages associated with being victimized. In some cases, families are separated and children are at risk for more trauma. Preventative programs are in place working to educate children, families and adults about child abuse and neglect to help keep our most vulnerable safe. Educating communities provides them with the appropriate language, knowledge and resources for children and adults. These programs teach children how to keep themselves safe and look out for the safety of their peers. Additionally, children and adults learn what to do if they are faced with an unsafe situation or a child discloses about an incident.

There are many organizations that work to prevent child maltreatment. The question is, how can these child abuse prevention programs have a successful and substantial impact in their efforts to prevent child abuse? This paper provides an in-depth overview of child maltreatment, the effects of child abuse, the prevalence of child abuse and current practices of prevention programs. It also explains the efforts of the San Francisco Child Abuse Prevention Center to

increase the outreach of their Child Safety Awareness lessons by creating a training resource for elementary teachers in the San Francisco Unified School District.

## Literature Review

According to the World Health Organization, child maltreatment is a global issue that has lasting effects on children and their families. International studies have revealed that a quarter of all adults report having been physically abused as children, while 1 in 5 women and 1 in 13 men report having been sexually abused as a child (WHO, 2016). Child abuse and neglect is complex and difficult to study due to the varying definitions of abuse and neglect. The term child maltreatment covers abuse or neglect of children under the age of 18 years old; this includes physical abuse, emotional/psychological abuse, sexual abuse, neglect/negligence and exploitation.

The U.S Department of Health and Human Services uses data collected through the National Child Abuse and Neglect Data System (NCANDS) to analyze annual data submitted by all 50 states, the District of Columbia and Puerto Rico (2016). According to the data analysis, there has been a 3.8 percent increase in child maltreatment cases from 2011 to 2015. Of the 683,000 victims reported, 75 percent were victims of neglect, 17.2 percent were physically abused, and 8.4 percent were sexually abused (Dept. of Health & Human Services, 2016). In 2015 alone, there were an estimated 1,670 children who died from abuse and/or neglect in the United States (Dept. of Health and Human Services, 2016). However, this number may be low depending on how the cases were reported, i.e. drowning, injury, etc. It is important to note that the data collected is voluntarily given by each state and each state has their own guidelines and definitions to deal with child maltreatment.

It is the responsibility of adults to protect children. When that protection is not there, children are left vulnerable. According to the 2015 Child Maltreatment report data, professionals made 63.4 percent of reports alleging child abuse and neglect (Dept. of Health & Human

Services, 2016). The term professional means that the person had contact with the child as part of their job. This includes teachers, police officers, lawyers, and social services staff. Education professionals made 18.4 percent of the reports, which was the highest percentage. Legal and law enforcement personnel and social services personnel had the second and third highest percentages.

### **Types of child abuse**

The operational definition of maltreatment has been left to each state's Child Protective Services and criminal justice providers to decide (Slep, Heyman and Foran, 2015). However, the U.S Department of Health and Human Services defines child abuse and neglect as "any recent act or failure to act on the part of a parent or caretaker which results in death, serious physical or emotional harm, sexual abuse or exploitation; or an act or failure to act, which presents imminent risk or serious harm" (2016).

Mikaeili, Barahmand, and Abdi (2013) used the following definitions of the five types of child abuse developed from the Childhood Trauma Questionnaire. 1. Physical abuse: a single or repeated infliction of physical injury on a child. This can include hitting, punching, shaking, kicking, burning, etc. 2. Emotional abuse: failure to provide developmentally appropriate, supportive environment. This includes the availability or lack of a primary attachment figure. Acts of emotional abuse include belittling, threatening, ridiculing and other forms of rejection. An emotionally abused child may have trouble developing a stable range of emotional and social competencies. 3. Sexual abuse: the involvement of a child in a sexual activity that they may not comprehend, give informed consent (for which the child is not developmentally capable of consenting to), or violate the laws or social taboos of society. 4. Neglect: failure to provide the child with: healthcare, education, emotional development, nutrition, shelter, and safe living



conditions-all of which must be a resource that is reasonably available to the family or caretaker. Without these resources the child's well-being is at a higher risk for harm.

Shi (2013) surveyed over 300 patients ages 17 and older in an outpatient clinical setting and found that around 74 percent of the patients met the screening criteria for one or more forms of childhood abuse and neglect. The study focused on five types of child abuse: 1. Emotional Neglect, 2. Emotional Abuse, 3. Physical Neglect, 4. Physical Abuse, 5. Sexual Abuse. Emotional neglect and abuse were the most common, followed by physical neglect and abuse. Sexual abuse was the least common, but still 20 percent of the participants reported having been sexually abused during childhood. Shi suggests that clinicians and healthcare providers need better tools to assess whether or not their patients were victims of child maltreatment because close to three out of four clients had experienced some level of childhood abuse and neglect.

### **Impact of Child Maltreatment**

For many, the thought of child abuse sparks an emotional response. It is hard to fathom the idea of harming children. However, children around the world are abused or neglected, leaving their psychological and physical well-being endangered. Due to the prevalence and incidence rates of child maltreatment, it is clear that more needs to be done to protect some of our most vulnerable and innocent populations.

Child maltreatment has been found to be a significant predictor of mental health childhood disorders. Slep, Heyman and Foran (2015) discussed that children who have been abused are more likely to have conduct disorders, attention hyperactivity disorders, depression, and issues with delinquency. The impact of child abuse does not stop when a child turns 18, in fact childhood maltreatment has been associated with substance use disorders, depression, post-traumatic stress disorder, antisocial personality disorder and suicidal behaviors in adulthood

(Slep, Heyman and Foran, 2015). Individuals who were victimized as children are also at a higher risk of re-victimization as an adult (Slep, Heyman and Foran, 2015). It also increases the risk that children who were abused will abuse other children, either as an adult or during childhood. Mikaeili, Barahmand, and Abdi (2013) found that the common characteristics of child abusers are individuals with low self-esteem, history of depression and anxiety, poor impulse control and mental health problems. In other words, childhood trauma can have a cyclical effect on the lives of the victimized children.

The effect of child abuse goes beyond the physical, mental and emotional trauma that victim and their family must work through. Child maltreatment has a social economic effect on our communities as well. The SFCAPC (2016) released an economic report on costs of abuse in San Francisco in 2015. The analysis included the medical, educational and judicial costs associated with child abuse. The report found that in one year, one out of every 25 children were involved in a case of alleged or suspected abuse. In fact, out of the 5,545 reports of child abuse to Child Protective Services, there were 753 substantiated cases in San Francisco (San Francisco Child Abuse Prevention Center, 2016). According to the report, the estimated lifetime cost for each of the 753 victims is \$400,533 each. This would equate to a potential annual economic burden of \$301.6 million just from the victims in 2015 (San Francisco Child Abuse Prevention Center, 2016).

### **Child Abuse Prevention Efforts**

According to Kraizer, Witte, and Fryer (1989), a child safety program should teach behaviors that empower children to be able to act in an appropriate manner by saying no and telling a responsible adult. The focus of the prevention program should be about what to do when an adult makes a sexual advance toward a child. According to the researchers there are a few key

questions that must be considered in order to evaluate the effectiveness of a child safety program:

- Are communities confident in addressing child abuse?
- What elements of the program will produce the appropriate prevention skills?
- Does the program have any negative side effects or potential risks?
- At what age can children effectively understand prevention skills?

Kraizer, Witte and Fryer (1989) also suggested that following concepts should be present in a prevention program:

- Role play indicates communication, assertiveness and self-assurance
- Understanding that children are not protected just from learning concepts
- Prevention skills in behavior based curriculum throughout the school year

Sanderson (2004) examined research on the effectiveness of sexual abuse prevention programs and found that there were conceptual weaknesses and strengths in the designs of the programs. For example, self-esteem of the children plays a role in both the retention of information and the application of the knowledge; however, programs do not put enough emphasis on self-esteem building or social problem solving skills. Children with higher self-esteem are more likely to resist a perpetrator and utilize the info from the prevention programs. Sanderson (2004) also notes the overall characteristics of effective programs, including one which states that programs are more effective if they are integrated into the school curriculum. The following are characteristics of effective prevention programs: active participation of all parties, explicit training for staff and educators, group training, standardized materials, longer program lessons rather than shorter, parental involvement and teacher education.

One effective program that is used by many child abuse prevention programs, including the San Francisco Child Abuse Prevention Center, is the Second Step Child Protection Unit (2014). The Child Protection Unit developed a module for teachers to understand the importance of their role as a mandated reporter. The module was divided into 4 parts: policies and procedures, staff training, student lessons and family education. Teachers have more access to children than any other provider, therefore they carry extra responsibility in protecting children as seen in the NCANDS report on professional reporting. The Child Protection Unit found that many teachers are unsure of the signs of abuse, unaware of reporting procedures, worried that their report will be inaccurate or they are not sure of who to report to. While the effort to prevent child sexual abuse has been a major focus, the current prevention programs may not effectively address all types of child maltreatment. Many families with a history of child maltreatment cases are dealing with multiple types of abuse and neglect.

### **Agency Profile**

The San Francisco Child Abuse Prevention Center (SFCAPC) is a 501(c) (3) non-profit that was founded in 1998 after the TALK Line Family Support Center and the San Francisco Child Abuse Council merged their programs. SFCAPC provides supportive services to children and parents/families, along with abuse/neglect education for children, caregivers and service providers; and advocacy for systems improvement and coordination. The SFCAPC target audience includes children and families; providers who work with children such as teachers and caregivers; and government departments. SFCAPC works with both adults and children as a part of the two generational model in order to provide more effective, preventative work. The mission of the San Francisco Child Abuse Prevention Center is to prevent child abuse and reduce its devastating impact.

Prior to the consolidation, the TALK Line Family Support Center and the San Francisco Child Abuse Council were two organizations that were founded by Dr. Moses Grossman in the 1970s. The San Francisco Child Abuse Council focused on developing and implementing policies and practices on how to handle physical and sexual child abuse cases for Bay Area hospitals. The TALK Line, which stands for Telephone Aid in Living with Kids was a 24 hour parental stress crisis line. TALK Line changed its name to the TALK Line Family Support Center to address the unmet needs of parents who called the crisis line. The Family Support Center provided additional services such as advocacy, short and long term follow-ups, home visits and community resource referrals for parents.

In 2007, the previously formed San Francisco Child Abuse Prevention Center (SFCAPC) absorbed the Child Abuse Prevention Society (CAPS), an organization that was created to raise resources for both the TALK Line Family Support Center and Child Abuse Council. The focus

for CAPS was to help unify San Francisco's child abuse prevention services by allocating a space for the two programs to work side by side.

Understanding the importance and effectiveness of a multidisciplinary program, SFCAPC created the Children's Advocacy Center (CAC) in 2014. The CAC brings together San Francisco Police Department, District Attorney's office, Child Protective Services and San Francisco General Hospital's mental and medical health professionals to investigate, evaluate and follow suspected cases of abuse, and it handles treatment for victims and their families.

The SFCAPC's has two locations in San Francisco. The Waller Street site is where the majority of the organization's direct services are delivered. These services include the TALK Line Family Support Center, child care services, and parenting support services. The 3rd Street site is where the strategic partnerships and community education departments are located. The community education department works to provide mandated reporting training for child care professionals, including teachers and child abuse prevention education for children in Kindergarten through 5th grade San Francisco Unified School District. The department's outreach coincides with the organization mission to prevent child abuse and reduce its impact on children and families.

### **Gap Analysis**

To advance the agency's mission, San Francisco Child Abuse Prevention Center's Community Education department conducts Child Safety Awareness lessons for Kindergarten through 5<sup>th</sup> grade students within San Francisco Unified School District. Child Safety Awareness is a program that educates children on ways to keep themselves and their peers safe. The community educators deliver four 30 minute lessons that cover topics from personal safety, parental permission, understanding one's support systems, safe versus unsafe touches, internet safety and gun safety. Doing so, educates children about behaviors and situations that could be harmful to them. For example, the safe and unsafe touch lesson explains that the vagina, penis, butt and chest areas are private body parts that only a trusted adult or doctor should touch for hygienic or health reasons. The lessons are designed to ensure that children know what a healthy safe interaction with an adult or peer should be like. If a child has experienced or thinks they have experienced an unsafe touch, they will then know the language to explain what happened and who to disclose this information to.

Due to program and capacity limitations of community educators, SFCAPC wants to adapt a Train the Trainer resource from the Child Safety Awareness program for teachers and other child-serving professionals in order to increase the accessibility of the CSA lessons. The Train the Trainer manual will ultimately allow for SFCAPC to reach more child-serving organizations and integrate more effective school practices for students and teachers. SFCAPC's

is partnering with the school districts School Health department to increase the visibility of their Child Safety Awareness program and wants elementary teachers to begin delivering these lessons to their students yearly, especially if a community educator cannot work with the class directly.



### Methods

In order to assess the essential elements necessary for an effective teacher training manual adapted for the SFCAPC Child Safety Awareness lessons, a three part needs assessment was conducted: review of the current training manual, classroom observations and an evaluation survey (appendix A).

Method	Sample Size	Location	Purpose/Aim
Needs Assessment: Review Community Educators manual	165 page document	N/A	To understand the CSA program material
Needs Assessment: Classroom Observations	2 classes, 2nd and 4th graders.  Both classes were lesson 3-Safe and Unsafe touch	Leonard Flynn Elementary	To observe how students respond to lessons, challenges community educators face in the classroom, the way the lessons are delivered
Needs Assessment- Teacher Survey	Convenience sample. 17 survey responses from K-5th grade teachers at elementary school in San Francisco Unified School District	San Francisco Unified School District elementary school	Gather information from teachers about their needs, concerns and barriers to using a training manual to make sure that I create a manual that is appealing, accessible and compatible for child care professionals.

This following section explains the participants, data collection and procedure used for the reviews, classroom observations and the needs assessment survey.

## **1. Resource Review**

Before creating a training manual for teachers, it was important to read the community educators training manual on Child Safety Awareness lessons. The manual for the community educators is longer in order to provide in depth explanations of what to expect when delivering the lessons in classrooms. The manual is very straight-forward and provides a guided conversation or script for a variety of safe or unsafe scenarios that students may face. The manual's content is geared towards the issues that children living in San Francisco may face; however, the content could be used in other metropolitan cities with similar demographics. It is available in English, but also Spanish and Mandarin to accommodate for the different immigrant communities in San Francisco.

## **2. Classroom Observations**

The observations of adults and children working with community educators were conducted in two different settings. One setting was a mandated reporter training and presentation for child care professionals and the other was in an elementary school during the community educators' visits. The mandated reporter training and presentation was led by the Community Education department's director. The presentation covered the responsibilities of a mandated reporter, how to identify child abuse and potential child abusers. It was important to observe the language and information served as a part of the agency's adult education to better understand the language and level of detail necessary to create a resource for teachers.

In order to better assess the need for a training manual, The next step towards better understanding the Child Safety Awareness lessons was to observe a classroom during the community educators' visit. I observed two different community educators deliver lessons in a 2nd grade and a 4th grade classroom, respectively. The curriculum for Kindergarteners through

3<sup>rd</sup> graders is different from the 4<sup>th</sup> and 5<sup>th</sup> graders' curriculum. The observations took place at one elementary school in the SFUSD. The 2nd and 4th grade classrooms were observed that day to get an overview of the lesson plans since the CSA lessons are divided in to two categories.

### **3. Teacher Survey**

**Participants.** To ensure that the Train the Trainer manual was adapted for teachers, the survey questions were created to learn more about teachers' preferences for a manual. The participants were recruited using a convenience sample because the needs assessment was distributed to the elementary schools that SFCAPC's community educators visited within a 1 month period. The only eligibility requirement was that the participant had to be an elementary school teacher within the San Francisco Unified School District.

**Survey.** After the Child Abuse Prevention Center's community educators complete the Child Safety Awareness lessons in K-5th grade classrooms, an anonymous evaluation survey is distributed to each teacher. In order to conduct a needs assessment with a key stakeholder about a self-taught training manual for the CSA curriculum, 5 additional questions were added to SFCAPC's evaluation survey. The purpose of the 5 additional questions were to gather information from teachers' about their needs, concerns and any perceived barriers to using a Child Safety Awareness training manual. The extended evaluation, like the San Francisco Child Abuse Prevention Center's evaluation form, was optional and anonymous. The normal evaluation form is used as a quality management tool for SFCAPC, but to gage the potential customer usability of a teacher training manual, the questions were added to the form. 17 teachers completed and returned the extended evaluation form. The form was handed out, like normal, after the community educators have delivered all four lessons to the students. The evaluations were collected by the community education department.

## Results

### Classroom Observations

During the observations, it became evident that the teachers rely on the community educators to lead the class and deliver the material, only stepping in as a helper for the educator. The students were very receptive to the community educators and a majority of the students were eager to participate in role plays and answering/asking questions.

When reviewing the previous days' lessons, students in the 2nd grade classroom were able to repeat the three steps to take when in an unsafe situation: 1. Say No, 2. Get Away, 3. Tell Someone. Students in the 4th grade classroom volunteered to give examples of what they understood as safe and unsafe touch. Students agreed that "safe touches don't hurt."

The challenges that I observed seemed to stem from time constraints. Each lesson is 30 minutes long and the community educators had to stay within the allotted time due to the busy school schedule. This time constraint became evident every time a community educator or teacher had to take time to focus the students on the current lesson or move along to the next concept before questions could be answered.

### Needs Assessment Survey

To assess teacher preparedness, I asked each teacher: *how prepared do you feel to deliver these lessons to your students?* 1 being not prepared at all and 10 being very prepared. The average score was 8.2. The responses from question 1 revealed that the majority of teachers feel prepared to teach the child safety awareness lessons after a community educator presented in their classroom.

Question 2: *Do you have any concerns about delivering Safe Touch lessons to your students,* was an open ended response. Half of the participants did not answer the question. Of

those who did respond, 5 had no concerns, 2 were concerned with “parental pushback,” and one felt students should be “more attentive to a guest speaker.”

Question 3: *If we made a teacher training manual for delivering Safe Touch lessons, how likely are you to use it*, was a Likert-style question in which the respondents answered with either “definitely won’t, probably won’t, probably will, definitely will.” 11 teachers responded with “probably will,” 2 teachers responded with definitely will and 4 teachers did not answer.

Question 4: *What barriers, if any, would prevent you from using a CSA training manual* was another open ended response question. The most common response was “time” as the greatest perceived barrier. Out of the 15 responses received, 7 teachers were concerned time would be a barrier to using the manual. One respondent continued with, “keep adding to our plate, but don’t take anything off. “One respondent felt a text-heavy manual would prevent use and one respondent preferred that a “trained individual” teach the lessons. Another respondent was concerned that the material would be outdated or irrelevant for their students.

Question 5: *What qualities of a CSA teacher training manual are most important to you?* The respondents could choose any of the following 6 choices: online (1), instructions for in-class activities and handouts (2), information on appropriate reporting procedures (3), instructions for each lesson (4), easy to read and comprehend (5) and other (6). 14 teachers chose instructions for in-class activities and handouts and easy to read and comprehend which made these two choices the most commonly selected. 12 teachers selected instructions for each lesson as an important quality. Online was the third most selected response with 6 respondents. Information on appropriate reporting procedures followed with 5 respondents. 2 teachers chose other and both suggested that instructional videos would be a beneficial quality.

### **Implications for Practice**

As mentioned, the San Francisco Child Abuse Prevention Center (SFCAPC) has partnered with School Health Department of the San Francisco Unified School District (SFUSD). This partnership provides SFCAPC with additional access to teachers and children who are in Kindergarten through 5th grade. To help alleviate the need for community educators, the Child Safety Awareness lessons training manual can be used as both a supplemental resource and an additional resource. The schools who will not have a SFCAPC community educator visit their classrooms, can still help protect their students. In order to ensure that the training manual will be implemented and used within the San Francisco Unified School District, SFCAPC will need to establish a clear dissemination plan for SFUSD teachers and eventually other child serving professionals.

Almost half of the participants preferred that the training manual should be accessible online, in a digital format. The SFCAPC should consider providing access to the training manual through their website. At the very least the website should have instructions for how to request access to the training manual i.e. emailed to teachers, Google doc access. An online training manual will also be easier to distribute and cost effective because the agency will save on printing costs.

Teachers who deliver the lessons to their students can devote more time to the lessons, allowing for students to ask questions and demonstrate that they understand the information. Most importantly, the teachers can revisit the lessons throughout the year. As mentioned, the research suggests that abuse prevention behavior skills that are taught throughout the school year are more effective. A few of the needs assessment respondents mentioned their concern around not having a trained individual from SFCAPC teach the lessons. The SFCAPC community

educators can refer the training manual to teachers, but to further support the teachers who will use the manual, a SFCAPC staff member or student intern should be a point of contact for the teachers as an additional resource. Though many of the survey respondents reported feeling generally prepared to deliver the lessons after observing the community educators, other teachers who will not have a community educator in their classroom would benefit from a SFCAPC contact that can fill any concerns respond to questions and concerns that the teachers may have while reading the manual.

SFCAPC should consider embedding training videos along with the written manual. While the manual itself explains how to deliver the lessons to students, a video can better illustrate the guided conversations, especially for role plays. The role plays were highly anticipated by the students and are one of the most effective ways to ensure that the knowledge is understood and retained. Several respondents mentioned that training videos would be an effective way to learn how to deliver the lessons. The videos can also work as a supplement for the teachers who have not seen a community educator deliver the lessons to students.

### **Recommendations for program monitoring and evaluation**

In preparation for the upcoming school year, SFCAPC schedules classroom visits for the entire school year. It is recommended that SFCAPC, in partnership with SFUSD's School Health program contact school psychologist or social worker, at one elementary school that does not have a scheduled community educator visit in the upcoming year and inform them that the manual is available for use. Teachers are not required to use the manual, because teachers are not required to deliver the lessons as a part of their curricula. Therefore the teachers who are interested in teaching the child safety lessons can request access to the manual from either SFCAPC or School Health.

For the pilot testing, SFCAPC can send an informed consent form that explains the intent of the manual and a short confidential survey for participant demographics, such as grade taught and email contact. After the manual has been requested, SFCAPC should email a survey link to those teachers who opted in to receive feedback on the usability of the manual. To give teachers a chance to deliver the lesson, the evaluation survey should be sent 1 month after the initial request. The survey can be used to better understand the teacher's experience with the self taught lesson as well as a process evaluation to ensure that the manual itself is user friendly.

Similar to their current program evaluation practices, SFCAPC should continue to send an evaluation form, electronically to teachers who access the training manual. An evaluation process will help the organization to monitor the use of the manual and its effectiveness. The specified lessons may need to be updated or additional scenarios added to accommodate the needs of the students. For example, as children become familiar with technology and using the internet at younger ages, SFCAPC may need to put more emphasis on the internet safety lessons beginning in kindergarten. It is important for SFCAPC to know if the material is becoming out of



touch. A larger study may be necessary, if SFCAPC would like to measure the effectiveness of a teacher led CSA program. One way would be to survey the students being taught by the community educators and teachers to assess how well students are retaining the information. The students in both groups should be surveyed for baseline knowledge of the safety lessons and surveyed two more times after, once directly after the completion of the program and then again two to four months later to compare how much information had been retained in both groups. The results of the surveys will have to cross examined to compare effectiveness of the lessons for both groups.

### **Development of the Teacher Training Manual**

After conducting the literature review, reviewing the community educator's training manual, conducting classroom observations, and administering a needs assessment survey and analyzing the results, a teacher training manual was developed. To address the concerns of the teachers surveyed the manual was designed to be easy to access, to read and, and utilized in a classroom setting.

The version of the community educators' manual that the teacher's manual was derived from was 165 pages long. As a part of the partnership with the department of School Health, the SFCAPC's training manual for teachers needs to cover lessons one and two of the Child Safety Awareness Program. Lesson one covers safe and unsafe touch, internet safety and bullying for Kindergarten through 5th graders, and lesson two covers support systems. The existing version would be too time consuming to introduce into a teacher's already busy schedule. The longer the document, the less likely it would be used. To increase the likelihood of use and sustainability of the manual, the Train the Trainer manual for teacher's (appendix B) was condensed to 34 pages, including appendices and cover page. The manual is only available online to ensure easy access and increase customer satisfaction.

As a part of making the online manual more user friendly, the table of contents is hyperlinked. This provides the teacher with the option to be directed to the exact lesson they need. A fourth grade teacher can simply click the lesson on safe and unsafe touch, internet safety and bullying for 4th and 5th graders and be taken to that exact section. Each lesson begins with a short introduction to the topic, key concepts page, student learning objectives, and relevant glossary terms. After the introduction, each lesson has the teacher's script or guided conversation

for the topic and role plays and any relevant student worksheets. This way if a teacher wanted to print a specific lesson, all the materials are together.

To increase usability, the lessons are color coded by age group and purpose. For example, the Kindergarten through third grade lessons are purple and green. Green boxes indicate key concepts, tips or reminders for the teachers, while purple boxes are the teacher's script. The language of the script depends on the age group. 4th and 5th graders are at a higher developmental stage than the Kindergarten through 3rd graders, so the lessons cover more topics and more unsafe scenarios.

Talking about abuse can be emotionally triggering, especially when it comes to the role play sections. The tips and reminders instruct teachers to create a safe space not only for the students, but for themselves as well. The manual provides language to help teachers explain what a role play is to their class and also encourages time for discussion and questions. The manual also suggests creating classroom safety rules with the class to ensure that everyone is respectful of others. Another important tip for teachers is to get comfortable using anatomically correct words to talk about private parts with their students. This normalizes the discussion around our private body parts and also provides the students with the appropriate language to describe their experiences, especially if they are attempting to disclose about abuse.

The appendices are additional role plays that were not selected to be at the forefront of the manual, but cover relevant information that may come up in the classrooms. For example, there is a role play that explains the type of secrets that are okay to keep and what to do if a trusted adult or peer asks a child to keep an "unsafe secret."

## Discussion

Using the results of the survey, observations and literature, a train- the-teacher manual was derived from a larger manual used by the agency's community educators. The version created for the San Francisco Unified School District Kindergarten through 5th grade teachers is succinct and focuses on two specific lessons. The manual is accessible online and provides teachers with the language necessary to educate children about ways to keep themselves safe and what to do if they are ever in an unsafe situation.

The methods used to develop the training manual for teachers, were intended to gain insight from the initial stakeholders and customers about the need, concerns and barriers associated with a training manual for SFCAPC's child safety awareness manual. The results showed that teachers felt relatively prepared to deliver the lessons on their own, however there were concerns around the format, material and access to the manual. One barrier that could potentially prevent teachers from reading the manual was time constraints. The respondents did not want a manual that was too long or dense. Teachers, who often have a busy schedule and large workload prefer a manual that is easy to read and comprehend, not very long in length and easily accessed online to alleviate any potential additional burdens. The fact that teachers respond positively to an online manual, also benefits the agency because it lowers the costs of distribution substantially.

The research around child abuse prevention focused on the importance of providing children with the knowledge and language to recognize and protect themselves from potential unsafe situations. While the purpose of this project was to provide an additional resource for San Francisco Child Abuse Prevention Center to use to increase the outreach of their Child Safety Awareness lessons, the introduction of a trainer's manual would be beneficial for child abuse

prevention centers all over the country. SFCAPC is attempting to help a large population with finite resources. In order to increase the outreach of their Child Safety Awareness lessons, SFCAPC is incorporating the role of teachers in their efforts. This prevention approach is similar for many organizations; however, many organizations are constricted by staffing limitations similar to the SFCAPC and have not had the opportunity to explore this new additional method. San Francisco Child Abuse Prevention Center has an exciting opportunity with their partnership with the school district. By creating a training manual for teachers more children will be able to protect themselves and if necessary, report behavior that is threatening their well being. Therefore, encouraging teachers to be active in the efforts to protect children would benefit many non-profits in the field.

### **Limitations**

There were limitations to the needs assessment that must be noted. First, only one school was observed, which means the student behaviors and responses may not be representative of each school in the San Francisco Unified School District. The students in another classroom could have been less receptive to a community educator visit.

Second, only the teachers were surveyed. This needs assessment results does not offer an explanation of how students would respond to the teacher led lessons. It can't be ruled out that the students may prefer or be more receptive to the lessons with a community educator rather than having their teacher nor does it support the idea that students want the teacher to deliver the lessons at all.

Third, the teacher evaluations were collected from a different elementary school than the one that was observed. The observations of the teachers and the community educators in the classroom showed that the teachers are not heavily involved with the lessons, unless to help settle the students. The findings from the observation may not be representative of the teachers in other elementary school. It does not explain how all teachers act when a community educator visits a classroom. Some teachers may be more or less engaged. Others may be substitutes for the day, so the behavior dynamic is different than normal.

Fourth, the teachers that responded to the survey were able to watch a community educator teach the class first, so their initial confidence about delivering the child safety lessons may have been influenced by the demonstration. Teachers who use the manual might have not observed a community educator before and will not have the same insight. If the SFCAPC decides to implement video tutorials with the manual in the future, then the videos can be considered a demonstration.

Fifth, this paper is only a needs assessment. SFCAPC will be responsible for implementing and distributing this manual to teachers and child care professionals alike. Though there are recommendations on how to do so, the agency will have the final decision on how to implement the teachers' manual and any potential monitoring of its use. Therefore, further research is needed to fully understand the effectiveness of SFUSD teacher led Child Safety Awareness lessons for Kindergarten through 5<sup>th</sup> grade students.

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## Appendix A: Needs Assessment Survey

10. After observing the CSA lessons, how prepared do you feel to deliver these lessons to your students?

Circle one:

not at all prepared 1 2 3 4 5 6 7 8 9 10 very prepared

11. Do you have any concerns about delivering Safe Touch lessons to your students? \_\_\_\_\_

12. If we made a teacher training manual for delivering Safe Touch lessons, how likely are you to use it?

Circle one:

Definitely won't

Probably won't

Probably will

Definitely will

13. What barriers, if any, would prevent you from using a CSA training manual? \_\_\_\_\_

Too Text heavy. S/B simple-accurate

14. What qualities of a CSA teacher training manual are most important to you? Please circle all that apply.

Online access

Instructions for in-class activities and handouts

Information on appropriate reporting procedures

Instructions for each lesson

Easy to read and comprehend

Other (please explain): \_\_\_\_\_

## Appendix B- Train the Trainer Manual

### Lesson 1: Safe and Unsafe Role Play

Role-plays provide students with the opportunity to succeed and master safety skills. It can be challenging to put yourself into some of the role plays, especially those dealing with sensitive or uncomfortable topics. One way to make role play more comfortable is to make sure the children know you are pretending.

Here are a few reminders and tips for a successful role play.

- Keep role-plays short and simple with a focus on the new safety skills;
- Use language appropriate for the part and model appropriate body language;
- It's okay to be silly as long as the students are able to stay focused;
- Provide students participating in role-plays with immediate feedback and positive reinforcement through specific questions and/or comments about the student's performance. For instance, you might say something like, "Julia, did a great job saying, 'No' loudly;"
- Give all students a round of applause after they've participated in a role-play;
- If a lesson includes more than one role-play for a particular safety skill, you do not need to complete all the role-plays
- Try to adapt role-plays to the interests and developmental level of the class.

### Private Body Parts Role-Play

The following role example is to be completed with a student volunteer. The following script is only for teachers, student responses will vary. Make sure students understand that you are acting/pretending.

The child in role play should be practicing saying "no."

"X, let's pretend that I'm a friend of your grown-up, and your parent asked me to come to your house to take care of you one night when he had to go somewhere."

"X, it's so nice to see you. We're going to have a lot of fun tonight. Your parent said we could do anything we like. What would you like for dinner?"

"Great. Then after dinner, we'll have a huge bowl of ice cream with chocolate sauce. You like ice cream, don't you?"

"Let's play your favorite game after we eat dessert. Do you like checkers or cards or do you want to play video games?"

"So, X, we had a delicious dinner and a lot of ice cream; we played \_\_\_\_; now, let's play a new game. I want to play a special game that only we know about. We're going to play a game where you take off your clothes, and I take pictures of you. Are you ready to play that game?"

"X, come on. I made you a yummy dinner, gave you a big bowl of ice cream and played \_\_\_\_ with you? This will be really fun, and no one will ever have to know. What do you think?"

Take a moment to break character.

Because the child in role play should be practicing saying "no," take time to acknowledge how well the child did in saying "no." For example, you can say something like:

"X, I like how you told me, 'No' even though I did so many nice things for you, and I'm your parent's friend."

Switch Roles. You are now the child's parent. Here the child can demonstrate his/her confidence to tell a trusted adult.

"Now, X, let's pretend that I'm your parent; I come home, and I ask you, 'Did you have fun with my friend?'"

"You didn't? Do you want her to come back again to babysit you?"

\*wait for child response, then engage the entire class\*

To the ENTIRE class:

"You have to tell your parent, 'No!' that you didn't have fun with that friend and don't want her to come back again. You also need to tell your parent that his friend tried to get you to take