CHILD SEXUAL ABUSE PREVENTION: EVALUATION OF A TEACHER TRAINING PROGRAM

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Abstract: The present study evaluated a teacher training program on child sexual abuse prevention developed by Hazzard, Kleemeier, Pohl, and Webb (1988b) entitled Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum. Minor modifications were made from the original program. A total of 42 teachers participated in the research project: 21 teachers were included in the training condition; 21 were control subjects. Teachers in the inservice group received 6 hours of training in three 2-hour sessions. The training sessions were conducted by individuals considered experts in the area of child sexual abuse. Responses of 21 teachers who participated in the training program were compared to those of 21 control teachers on pretest, posttest, and follow-up measures. Relative to control subjects, trained teachers demonstrated significant increases in knowledge about child sexual abuse, attitudes regarding prevention, identifying behavioral indicators of abuse, and appropriate intervention in potential abuse cases. A 3-month follow-up survey indicated that trained teachers were more likely to have engaged in certain behaviors related to the training (e.g., talking with children and reporting suspected cases of abuse). Suggestions are included regarding future research in this area and use of the current training program with school personnel, particularly for the school psychologist.

Of reported child abuse cases, 60-75% include a sexual component (Jones, 1982; Tower, 1987). Although the incidence of sexual abuse is difficult to determine (Russell, 1986), most researchers agree that at least 10% of all female children and 2-3% of male children will be sexually victimized before the age of 18 (Finkelhor, 1984b). Regardless of the prevalence of the problem most evidence indicates that the incidence and severity of child sexual abuse is rising (Finkelhor, 1984b). Sexually abused children are at increased risk for a variety of disorders including psychological, physical, psychosocial, behavioral, and academic problems. Some of the more specific problems associated with children who have been sexually abused include depression, guilt, fear, anger, inappropriate sexual behavior, aggressiveness, sleeping and eating disturbances, low self-esteem, school problems, somatic complaints, and interpersonal problems (Benward & Densen-Gerber, 1988; Brownc & Finkelhor, 1986; Burgess, Groth, & McCarlin, 1981; Conte & Schuerman, 1988; DeYoung, 1982; Hibbard & Hartman, 1992; Kendall-Tackett, Williams, & Finkelhor, 1993; Ratican, 1992; Tufts New England Medical Center, 1984). The incidence of sexual abuse and accompanying problems have prompted many professionals to implement prevention and intervention programs to address this form of child abuse. Prevention programs available today number in the hundreds.

Prevention Efforts

Professionals and practitioners have responded to the problem of child sexual abuse with a variety of different strategies. Caplan (1964) proposed a model of intervening involving primary, secondary, and tertiary prevention/intervention programs. Primary prevention programs have both direct and indirect approaches. Direct primary prevention programs focus on teaching children skills in resisting abuse, indirect prevention focuses on teaching others (e.g., parents and teachers) how to help children prevent abuse (Danish, Smyer, & Novak, 1980).
Secondary intervention programs incorporate similar information but direct the training to parents or other adults working with children (Conte, Rosen, & Saperstcin, 1986; Wurtele, 1987). Their goal is to target children who are at high risk for abuse or identify children as soon as possible following the onset of abuse so that steps can be taken to intervene, stop the abuse, and provide intervention efforts for the child. Tertiary intervention efforts attempt to intervene with psychotherapy or rehabilitative efforts in order to minimize the consequences of the abuse (Roberts & Peterson, 1984).

The widespread proliferation of prevention programs has led to recent attempts to document the effectiveness of sexual abuse prevention and intervention programs. The reviews for primary prevention programs have produced mixed results. Some researchers (Finkelhor & Strapko, 1992; Tutty, 1990) reported mostly positive results, while others (Melton, 1992) suggested that preventing child sexual abuse is impossible. Reppucci and Haugaard (1989) concluded that neither position may be totally accurate, and that researchers and practitioners should proceed with caution, as child sexual abuse is a topic that may require more complex skills than children possess.

Fewer efforts have been made to address the prevention of sexual abuse from a secondary intervention perspective. The few secondary prevention programs directed at parents have succeeded in increasing the numbers of parents who talked with their children about sexual abuse, but may not have improved the type of information parents give their children (i.e., parents rarely warn their children that family members or friends can be abusers; Finkelhor, 1984b). Programs for educators and other school personnel (Hazzard, Kleemeier, Pohl, & Webb, 1988a) report success in increasing knowledge about sexual abuse, but not in changing reporting behaviors, while other school programs (Swift, 1983) indicated a positive change in willingness to report suspected cases of abuse.

Tertiary intervention evaluations have focused almost exclusively on the large, well-known treatment centers (e.g., programs by Giarretto and Sgroi) and have indicated that most evaluation efforts have been subjective or self-report in nature and therefore difficult to systematically evaluate (Collins & Collins, 1990).

Primary prevention and secondary preventive intervention programs have much appeal as an approach to child sexual abuse. According to Finkelhor (1986) these programs hold a great potential for reaching a large number of individuals, stopping some abuse before it occurs, increasing the early intervention of children who may be victimized and having more children receive help. He also noted that these goals may be accomplished in a cost and time efficient manner. Reppucci and Haugaard (1989) warned that although positive goals and cost efficiency are frequently considered when choosing a program, the consumer should focus more on the systematic evaluation of program effectiveness rather than its positive goal statements.

Prevention Programs in the Public Schools

There is growing awareness that school systems and teachers, by virtue of their accessibility to children and expertise in child development, are in a unique position to identify possible sexual abuse cases and intervene on behalf of the children (Brassard, Tyle, & Kehle, 1983; Durfee, 1989; Riggs, 1982). Additionally, the passage of the Child Abuse Prevention and Treatment Act of 1974 and PL 933-247 requires that school systems address the issue of child abuse in terms of policy and action (Erickson, McEvoy, & Colluci, 1984). Unfortunately, educators often lack basic information about the dynamics of child sexual abuse and appropriate responses (Tutty, 1990). The majority of teachers, counselors, and psychologists have limited training in the area of sexual abuse. Hazzard and Rupp (1983) reported that 68% of the teachers in their study had 8 or fewer hours of training in sexual abuse. Teachers rate themselves as lacking in knowledge about the behavioral symp-
toms of sexual abuse, which may explain the fact that only 13% of all cases of suspected child abuse are made by teachers (American Humane Association, 1981; Levin, 1983; Volpe, 1981). Tharinger, Russian, and Robinson (1989) found that school psychologists do not fare much better in their knowledge of child sexual abuse. Their study revealed that while school psychologists generally know the behavioral and emotional indicators of sexual abuse, they are less comfortable determining when sexual abuse has occurred. They also discovered that although school psychologists indicated that disseminating information in the form of inservices for teachers and parents was one of the roles they should play in the school, they felt uncomfortable providing this information.

Because of the need for information and the apparent lack of skill in delivering it, packaged programs have been developed to help teachers and school psychologists deliver information about child sexual abuse. Part of the rationale of secondary preventive intervention is that early identification of individuals can potentially reduce the overall negative effect of the abuse. They also focus on educating others about the offender characteristics model described by Finkelhor (1984b) wherein the offender must overcome external impediments to committing abuse. Some authors have noted that the offender can be thwarted in part by alerting the community to the signals and symptoms of child sexual abuse (Tutty, 1990). Proponents of the secondary intervention model argue that individuals working with children and those individuals in high risk situations (e.g., single-parent homes, homes with step-fathers) should have access to information concerning child sexual abuse (Finkelhor, 1984b; Tutty, 1990). Unfortunately, as previously indicated, many of these programs undergo insufficient testing and research to warrant their widespread use in the schools (Reppucci & Haugaard, 1989; Roberts, Alexander, & Fanurik, 1990).

Miller-Perrin and Wurtelle (1988) suggested that any secondary preventive intervention efforts in the schools include general knowledge and awareness of the problem of sexual abuse, an opportunity for teachers to explore their own sexual issues, knowledge of symptoms of abuse, and legal and ethical responsibilities. One program which has incorporated these suggestions and has attempted to document its effectiveness though the use of experimental methodology is the Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum (CSAP: TTWC; Hazzard et al., 1988a). The present study sought to evaluate the effectiveness of this packaged program.

**Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum**

The Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum (CSAP: TTWC) is a 6-hour secondary preventive intervention training program designed to improve teacher skills in the area of child sexual abuse (Hazzard et al., 1988a). The curriculum includes training in how to recognize behavioral and physical symptoms of sexual abuse, respond appropriately to disclosures, and report sexual abuse cases. The program was originally used by a group of teachers from an Atlanta area suburban school district in 1988. These teachers were found to have significant increases, relative to controls, in knowledge and prevention opinions (i.e., opinions regarding prevention/early intervention efforts) and on pretest to posttest measures (i.e., the Teacher Knowledge Scale, Teacher Opinion Scale). The participants also were significantly more able to respond appropriately to hypothetical situations involving child sexual abuse as demonstrated by their responses on the Teacher's Vignettes Measure. They did not, however, demonstrate an increase in actual efforts to prevent or intervene in child sexual abuse (e.g., implementing prevention activities in the classroom, discussing suspected abuse with individual children, or reporting suspected sexual abuse cases to local authorities) as assessed by the Teacher Prevention Behavior Measure during the 6-week follow-up.
A positive feature of the CSAP-TTWC is that it covers a variety of topics and activities. The focus is not only on increasing a general awareness of the problem and recognizing the common signals often associated with the abused child, but also on a more thorough understanding of the dynamics and emotions that are often involved in child sexual abuse. Exercises are designed to help participants, including teachers, overcome their discomfort. For example, one exercise has participants listen to different scenarios and identify the emotion that mirrors their feelings in each situation. The program also addresses emotions (e.g., doubt, fear of reprisal) associated with making a report to the authorities. Finally, in order to develop more empathetic understanding for the child victim, participants are asked to imagine having to describe their last sexual encounter to someone so that they can feel what it is like to have to disclose intimate details.

The program uses a variety of media to encourage processing of the information, including didactic presentations, video tapes, role-playing, paper and pencil activities, question and answer sessions, and group discussion. Topics, such as how to handle disclosures, are covered thoroughly and practiced through role-playing, because teachers who are well-trained will be able to address abuse in a calm professional way, making the disclosure less traumatic for the child. In addition, community experts (e.g., therapists, pediatricians, social workers, detectives, and attorneys) are brought in to discuss their involvement with child sexual abuse.

**METHOD**

**Subjects**

A total of 42 teachers volunteered for the research. They were recruited from one school district (with four schools grades Kindergarten to twelfth grade). Assignment to condition was made between schools. One-half (21) were randomly assigned, by sex and grade level of instruction (in order to have an equal number of males versus females and elementary versus middle grades teachers per group), to an experimental group. They attended the child sexual abuse prevention workshop. The remaining 21 formed the control group. They were offered the workshop the following year.

There were 4 male and 17 female workshop participants with a mean age of 42.7 years and a mean of 12.8 years of teaching experience; 16 taught at the elementary level and 5 were middle level teachers. The control group included 4 male and 17 females with a mean age of 41.7 and a mean of 12.05 years of teaching experience. There also were 16 elementary teachers and 5 middle level teachers, as in the experimental group.

**Instruments**

As part of the teacher training research and in conjunction with the Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum, authors Hazard and colleagues (1988b) developed and validated measures of knowledge, attitudes, victim identification and communication skills, and teacher prevention behaviors. The instruments and scoring criteria developed for the original study were administered in the present study.

**Teacher Knowledge Scale.** A 30-item true-false scale was constructed to assess teacher knowledge about child sexual abuse. The scale has been shown to adequately differentiate between trained and untrained teachers. The scale includes items concerning the definition and prevalence of sexual abuse, interpersonal dynamics in abusive situations, identification of victims, reporting, treatment, and prevention. Sample items are “Children who are truly sexually abused rarely retract their stories” and “Most cases of child sexual abuse involve physical force.” Each item had three response alternatives: true, false, and I don’t know. Only accurate responses were scored as correct, with inaccurate and I don’t know responses being scored as incorrect. All but three item-total correlations were above .25 and the overall internal consistency of the scale as assessed by coefficient
alpha was .84. The 2-week test-retest reliability of the scale based on control teachers' 28 scores was .90 (Hazzard et al., 1988b).

**Teacher Opinion Scale.** This 23-item Likert scale measures teacher attitudes and opinions about child sexual abuse. The scale assesses a teacher's opinions about child sexual abuse and has been shown to successfully differentiate between trained and untrained teachers. The scale assesses attitudes toward the victim, perpetrator, and nonoffending parent; attitudes toward prevention; and confidence about dealing with child sexual abuse as a teacher. Teachers responded to each item on a 4-point continuum ranging from strongly disagree to strongly agree. Sample items are “Reporting a case of suspected child sexual abuse to the Department of Social Services usually does more harm than good” and “I would be comfortable having a child sexual abuse program in my class.” Items were scored from 0 to 3, with 3 points given to preventive responses. All but 4 item-total correlations were above .25, and coefficient alpha for the scale was .78. Test-retest reliability for control subjects was .78 (Hazzard et al., 1988b).

**Teacher Vignettes Measure.** An 8-item written vignettes measure was developed to assess teachers' skills in victim identification and teacher-child communication related to abuse. After four vignettes portraying possible sexual abuse situations, teachers were asked to identify, with written narratives, behavioral indicators of potential sexual abuse, to decide on an appropriate course of action, and to suggest how to initiate a conversation with the hypothetical child. Narratives were scored (by two raters), using Hazzard et al.'s (1988b) system, according to the number of behavioral indicators correctly identified, the likelihood that the recommended course of action would provide useful information or help for the child, and the degree or warmth and openness conveyed in the teacher's opening statement to the child. Teachers received negative scores for responses judged likely to have negative effects on the hypothetical child.

Four other vignettes presented situations in which children disclosed sexual abuse. The teachers were asked how they would verbally respond to each disclosure. A sample disclosure follows:

Karen comes to you after class one day and says, “I don't want to go to music anymore. Mr. Smith has been bothering me when no one else is around. He keeps putting his hands up my shirt.” Teachers responded in written narrative, and responses were scored according to whether they (a) included helpful components taught in the workshop (e.g., belief, nonblame, offer to help); and (b) demonstrated awareness of how to handle difficult disclosure items (e.g., disguised disclosures, requests to keep disclosure secret). Based on the scoring criteria (Hazzard et al., 1988b), total scores on the measure could range from -4 to 64. Coefficient alpha for this scale was .78, and interrater reliability (a staff member from the Child Sexual Abuse Center who was not involved in the program was the second rater) was .99.

**Teacher Prevention Behavior Measure.** This follow-up measure was designed to assess teachers' self-reported behaviors related to abuse prevention. The teachers were asked to indicate the amount of time, in hours, that they had spent on the following activities since the workshop: (a) reading about abuse, (b) discussing abuse with colleagues or others, and (c) conducting teaching or discussion activities about sexual abuse in their classrooms. The teachers also were asked the number of times they responded to suspected child sexual abuse victims in the following ways: (a) talked with the child and (b) made a report to the Department of Social Services. The item scores were those amounts that were reported by the teacher. No reliability data was reported for this specific measure, other than the teachers own self reports and the confirmation from the director of a local sexual abuse center, working in conjunction with the Department of Social Services, that the
numbers of teacher reports from the schools had increased.

**Workshop Evaluation.** Treatment teachers completed a workshop evaluation which assessed their subjective reactions to training, utilizing several Likert scale and free response items. They rated the overall quality of the workshop, the presenters, their comfort dealing with child sexual abuse issues, and their likelihood of reporting suspected abuse cases. Information was also gathered about the most and least helpful portions of the workshop. The instrument was assessed by recording the subjects' responses to each of the items and then determining the percentages of same responses to each of the items. This allowed for determining what the majority of participants felt about each area in question. The major purpose of the evaluation was to give the workshop developers/presenters information concerning the value of the training as perceived by the participants, and possibly target areas that needed to be changed.

**Procedure**

The CSAP:TTWC was originally developed to be implemented in a 1-day, 6-hour format (Hazzard et al., 1988a). However, in order to meet the present school system's needs the study's presentations would be presented in 2-hour sessions, on 3 consecutive days, after school hours at one of the district's schools. An additional change involved the subject pool. Due to the small size of the rural school district the workshop training was made available to any interested teacher from Grades K-12. Finally, the follow-up in the present study was conducted at 3 months instead of 6 weeks in order to address one of the concerns of Hazzard et al. (1988a) that the follow up period in their study was too short in duration to reveal behavioral changes.

During individual school presentations, teachers were told that they could volunteer to participate in a research project involving the prevention of child sexual abuse. It was explained that some of them would be receiving the training while other volunteers would have to wait until the following year for the training to help evaluate the effectiveness of the training program. Interested persons were instructed where to attend the first meeting. At the initial meeting, the teachers who had volunteered were told which group (experimental or control) they had been assigned. Both the control subjects and the treatment subjects were asked to complete a demographics questionnaire, the Teacher Knowledge Scale, and the Teacher Opinion Scale. As part of their participation, all volunteers were asked not to discuss the information presented in the training session with teachers in the other group as it could affect the outcome of the study.

The Child Sexual Abuse Prevention: Teacher Training Workshop Curriculum sessions for the experimental group were conducted by five speakers (i.e., the system's school psychologist and representatives from a Regional Child Abuse Center and the Department of Social Services) at a school in the district after school hours. The speaker at any one session would be an expert (e.g., psychologists, police officer, lawyer, social worker) in the subject being covered (i.e., victim symptomology, statistics, short- and long-term effects of sexual abuse, reporting procedures, emotions felt when reporting, and handling disclosures). At the close of the last training session, the workshop participants were asked to complete the workshop evaluation. The following day, both groups (experimental and control) were gathered again to complete the posttest instruments, which included the Knowledge Scale, the Opinion Scale, and the Vignettes Measure. Three months after the training, all treatment and control subjects completed the Prevention Behavior Measure. The school psychologist was the major presenter as well as the primary rater of the assessment measures; the second rater was not involved in the program presentation. All assessment devices were scored according to the specific criteria set forth by the program developers.
TABLE 1
Means and Standard Deviations of Individual Scale Differences

<table>
<thead>
<tr>
<th>Scale</th>
<th>Pretest M</th>
<th>Pretest SD</th>
<th>Posttest M</th>
<th>Posttest SD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge Scale</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Untrained</td>
<td>19.62</td>
<td>3.56</td>
<td>19.57</td>
<td>3.89</td>
</tr>
<tr>
<td>Trained</td>
<td>18.29</td>
<td>5.11</td>
<td>25.43</td>
<td>2.29</td>
</tr>
<tr>
<td>Opinion Scale</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Untrained</td>
<td>50.24</td>
<td>4.35</td>
<td>50.10</td>
<td>4.10</td>
</tr>
<tr>
<td>Trained</td>
<td>50.52</td>
<td>7.60</td>
<td>57.00</td>
<td>6.74</td>
</tr>
<tr>
<td>Vignettes Measure</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Untrained</td>
<td>—</td>
<td>—</td>
<td>25.14</td>
<td>7.79</td>
</tr>
<tr>
<td>Trained</td>
<td>—</td>
<td>—</td>
<td>44.24</td>
<td>9.81</td>
</tr>
</tbody>
</table>

RESULTS

The MANCOVA revealed no significant differences between the treatment and the control subjects in terms of sex, age, years teaching, marital status, race, degree held or previous experience in the area of child sexual abuse. The data were analyzed using a multivariate analysis of covariance with the knowledge posttest, Opinion posttest, and Vignettes Measure as dependent variables, and the Knowledge pretest and Opinion pretest as covariates. The result of the MANCOVA was significant, Wilk = .2204, p < .001, indicating that there was a significant difference between the performance of the trained teachers and untrained teachers on the measures. This overall significance finding allowed for the examination of the individual scales to determine where the performance differences were located. (See Table 1 for means and standard deviations for each of the measures examined in this analysis.)

Knowledge and Opinion Scale and Vignettes Measure

The ANOVA data analysis indicates that the training was effective at increasing knowledge (F[1,38] = 68.9087, p < .001) and effecting attitudes and opinions (F[1,38] = 33.9967, p < .001). Workshop participants also were significantly more able to respond appropriately to the hypothetical situations presented to them. The results, F(1,39) = 46.1974, p < .001, indicate the better developed abilities of workshop participants to identify behavioral indications of sexual abuse, talk to children about abuse, and decide on appropriate action.

Prevention Behavior Follow-Up

All the control and workshop participants completed a follow-up questionnaire 3 months after the workshop, in order to evaluate changes in behavior related to abuse prevention. Workshop participants reported significantly more time spent on “discussions of child abuse issues with a friend or colleague” t(40) = 3.79, p < .001; “classroom activities or discussions about abuse” T(40) = 2.01, p < .05; and “discussions with individual children about possible abuse” t(40) = 2.16, p < .05. Workshop participants also made significantly more reports of suspected child sexual abuse to the county child protective services agency, t(40) = 2.65, p < .01. No significant difference was found between the groups in terms of “time spent reading about sexual abuse” t(40) = 0.78 ns. (See Table 2 for summary of means and standard deviations.) The reader should note the large standard deviations for both the trained and untrained
TABLE 2
Teacher Prevention and Behaviors Follow-up: Means and Standard Deviations

<table>
<thead>
<tr>
<th>Behaviors</th>
<th>Untrained Teachers</th>
<th>Trained Teachers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reading Child Sexual Abuse Info</td>
<td>0.95 2.22</td>
<td>2.05 2.78</td>
</tr>
<tr>
<td>Discussing Child Sexual Abuse</td>
<td>0.52 0.68</td>
<td>2.81 2.68</td>
</tr>
<tr>
<td>Abuse Issues</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Implementing Classroom Activities</td>
<td>0.10 0.30</td>
<td>1.10 2.26</td>
</tr>
<tr>
<td>Counseling Children</td>
<td>0.10 0.44</td>
<td>0.48 0.68</td>
</tr>
<tr>
<td>Reporting to Department of Social Services</td>
<td>0.00 0.00</td>
<td>0.33 0.58</td>
</tr>
</tbody>
</table>

Teachers, which indicate a large degree of variability in the activities for both groups.

Workshop Evaluation

A workshop evaluation form completed by participants immediately following training indicated positive reactions to the experience. The workshop was rated by 100% of the teachers as “very much worth attending,” the highest rating on a 4-point Likert scale. When asked what the most helpful information had been, the most frequently mentioned items were the examples given of helpful responses to children disclosing abuse, indications of sexual abuse, and how to report abuse. All respondents indicated that no changes should be made in the curriculum. A total of 81% of the teachers rated themselves as “very likely” to report a case of suspected child sexual abuse to the county child protective services agency.

DISCUSSION

The CSAP:TTWC training program increased knowledge and led to attitudinal and behavioral changes related to child sexual abuse. As suggested by the Hazzard et al. original study (1988a), teachers benefited from this training in several ways. In addition to increased knowledge about sexual abuse (i.e., incidence, dynamics, behavioral indices, and reporting procedures), workshop participants exhibited significant changes in their opinions relative to control subjects. The trained teachers became more willing to acknowledge the severity of the problem of child sexual abuse, less blaming of the victim, more likely to see community agencies as helpful, and more confident of their own role in addressing the problem. The trained teachers were significantly more able to apply their knowledge to hypothetical situations which teachers might actually face. On the Vignettes Measure, the teachers who participated in the workshop were better able than control teachers to identify specific indicators of sexual abuse and to respond to hypothetical sexually abused children in helpful, supportive, and appropriate ways. Also, the trained teachers indicated on the 3-month follow-up measure, that they were taking part in significantly more behaviors related to abuse prevention than were the control teachers. The workshop participants reported significantly more time spent on classroom discussions, discussions with individual children, discussion with colleagues about sexual abuse, and reports of suspected abuse to the Department of Social Services.

The outcomes that differed from the original study were found in the follow-
up study. Seven reports were made to the Department of Social Services by the trained teachers during the 3 months following the workshop. The director of the local sexual abuse center indicated this number of reports to be a "significant increase" over the numbers reported by the teachers in the past. The teachers in the present study are from a state that requires mandatory reporting of suspected cases of child abuse, including child sexual abuse. This program may have made the teachers more conscious of their responsibilities. This could be a strong indicator that the workshop participants gained in knowledge, ability, and confidence made them more willing to act when confronted with a case of child sexual abuse. There were no reports made by the teachers of the control group. The 6-week follow-up of the original study yielded no significant differences between trained and untrained teachers, except in the area of reading about sexual abuse. There was no indication, in the present study, of a significant difference between the two groups in the amount of time spent reading about the subject of sexual abuse. This may not be a surprising outcome considering the amount of information the trained teachers had already read concerning child sexual abuse.

The authors of the original study felt that their lack of significant findings in behavior change could be due to the short follow-up period. However, we suggest several other explanations for the different follow-up findings. In the smaller school system of the present study, the teachers may feel more responsible for their students than teachers from large school systems. Another explanation could be that the small school system had no counselor in the elementary school. Six of the seven reports made by the trained teachers came from the elementary level. These teachers may be taking on more responsibility for talking with their students in lieu of a counselor. Hazzard et al. (1988a) noted that outside sources were brought in to conduct an abuse program with the students and that the teachers may have felt released of the responsibility of talking to their students about abuse.

There are several limitations associated with the present study. The participants were from a rural area and involved a small portion of the school system's teaching staff. The participants were all volunteers which may have affected their degree of interest and commitment to the training. The CSAP TTWC was an isolated effort of abuse prevention in the school instead of being a part of a more comprehensive prevention effort involving children and parents. Much of the data collected is based on analogue methodology, and while the authors relied on the scoring criteria established by the program developers (Hazzard et al., 1988a) the reliability and validity of their instruments may still need further investigation. Finally, although there were behavioral changes associated with the training, the veracity of those reports as well as how many teachers made reports is unknown.

Although the present study modified some aspects of the original study (i.e., format of presentation, subject population) it would appear that if the basic information is thoroughly covered, the program's effectiveness will not be compromised.

There was a significant impact on the behaviors of the teachers who participated in the workshop. However, more research should be done to determine how to best maintain these behavior changes. Suggestions have been offered as to how this might be accomplished (Finkelhor, 1984a; Kenward, 1987; Pollak & Levy, 1989; Wurtele, 1987). Additional research efforts also may need to be conducted in order to evaluate the percentage of founded versus unfounded reports (Repucci & Haugaard, 1989). Teacher training efforts need to be incorporated into a comprehensive program of child sexual abuse prevention/intervention (i.e., programs for children, parents, and teachers) (Holander, 1992; Webster, 1991). Researchers also might study the effect of having a child abuse expert within the school system to provide ongoing consultation and periodic program reviews with
the teachers. This local expert may be a member of the school district personnel (i.e., school psychologist, school counselor) or a member of the community willing to donate their time and expertise to the school. Finally, systematic evaluation efforts of existing or newly proposed programs need to continue.

REFERENCES


Abuse Prevention Evaluation


