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A MODEL CHILD ABUSE PREVENTION PROGRAM FOR ELEMENTARY
SCHOOL TEACHERS

THE UNIVERSITY OF ARIZONA

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A MODEL CHILD ABUSE PREVENTION PROGRAM
FOR ELEMENTARY SCHOOL TEACHERS

by
Martha Wade Haskell

A Thesis Submitted to the Faculty of the
DEPARTMENT OF COUNSELING AND GUIDANCE
In Partial Fulfillment of the Requirements
For the Degree of
MASTER OF ARTS
In the Graduate College
THE UNIVERSITY OF ARIZONA

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STATEMENT BY AUTHOR

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ABSTRACT

A model child abuse prevention program for elementary schools is described. The program is intended to educate teachers and other support personnel on physical abuse, sexual abuse, and neglect along with other related issues.

The model prevention program is presented including the program components, program agenda, and program methodology. Also included are sample letters, handouts, and a selected review of child abuse literature.

CHAPTER 1

INTRODUCTION

Recent studies indicate that child abuse and neglect have been in existence in many forms since the beginning of time (Kline, 1977). Within the historical context of the United States, the American colonies developed severe and strict guidelines for governing children. In fact, Massachusetts and Connecticut imposed the death penalty on undisciplined children in 1646 and 1651 respectively (Kline, 1977).

There are many definitions of child abuse and many forms of child abuse and neglect. One definition that brings the problem under a specific conceptual framework is by Broadhurst (1979).

An abused or neglected child means a child whose physical and mental health or welfare is harmed or threatened with harm by the acts or omissions of his parents or other person responsible for his welfare (p. 2).

The first reported case of child abuse occurred in New York City in 1874. The following year the Society for the Prevention of Cruelty to Children was formed as a private organization to help rescue children from abusive situations

(Newberger, 1982). The concept of the state having a right to become involved in parental neglect came about slowly and was initially set up on both moral and economic issues (Kline, 1977).

Two important breakthroughs in the abuse problem came about in 1961: A technological advance in pediatric radiology made it possible to identify an intentionally inflicted injury and an important medical symposium identifying the 'battered child syndrome' for the first time by Dr. C. Henry Kempe (Giovanni & Becerra, 1979). Kempe and colleagues discovered hundreds of young people had been injured severely by their parents by burning, stabbing, beating, shooting and other such violent means (Faller, 1981).

In 1963 the first mandatory reporting legislation was enacted and by 1966 every state had a reporting law for child abuse. The Federal Child Abuse Prevention and Treatment Act was passed in 1974. This act developed eligibility guidelines to enable states to receive federal grants, and soon after, over 40 states amended their laws to make necessary the reporting of suspected child neglect cases. In 1975 Congress created the National Center on Child Abuse and Neglect and allocated funds to upgrade child protective services (Faller, 1981).

An increase in reported cases of abuse was becoming very evident. For example, California had an increase from

4,000 to 40,000 reported child abuse cases during the years of 1968 and 1972. There were 10 reported cases in Florida in 1968 and 30,000 in 1972. And in the same four years, Illinois reported an increase of nearly 13,000 cases (O'Block, Billimoria & Behan, 1981).

Within the State of Arizona a study was done to document evidence of increases in child abuse between the years of 1971 and 1977. During 1971 and 1977 there were 86,278 reported incidences of child abuse and neglect and 14,000 of the cases were reported in 1977 alone (Warner & Hartgraves, 1980).

Because a teacher has daily interaction with a child, a teacher is in a position to observe a child's stressful situations, behavioral problems or changes, and any unmet needs which might be affecting the child (Broadhurst, 1979).

It is hoped that the model prevention program will educate teachers and other support personnel in order to prevent further child abuse and neglect.

Statement of the Problem

Although most of the literature written about child abuse and neglect has been published over the past decade, there is a scarcity of information on prevention programs for elementary school teachers. School personnel appear genuinely interested in helping government agencies such as the Child Protective Services (CPS) in recognizing, assessing,

and reporting child abuse but do not know either the correct procedures of reporting abuse or the ways of identifying abuse. A model prevention program that includes reporting procedures, behavioral indicators, differentiation between accidental and non-accidental injury, and other abuse-related issues and designed specifically for elementary school teachers might develop an awareness, on the part of participants, of this growing issue.

Purpose

The purpose of this manuscript is to provide a model child abuse prevention program for elementary school teachers (kindergarten through grade six) and other support personnel.

Rationale

The following rationale for a model prevention program for elementary school teachers is offered:

1. A teacher sees and interacts with a student on a daily basis.
2. Other school support personnel such as the principal, school nurse, and school psychologist have an opportunity to observe a student.
3. A teacher is required by many state laws to report injury by other than accidental means.
4. School personnel are not offered prior academic coursework on issues of child abuse.

Objectives of the Prevention Program

1. Provide information regarding physical abuse, sexual abuse, neglect, and other related issues.
2. Explain physical abuse, sexual abuse, and neglect in a behavioral context.
3. Provide information on cultural considerations regarding child abuse.
4. Provide information on how to talk to a student who may have been abused.
5. Explain reporting procedures and the role of governmental agencies.
6. Provide information on how to set up prevention programs within the school and community.
7. Provide bibliographic data and sample resources for further use.

Assumptions of the Study

The assumptions of the study are as follows:

1. Teachers, principals, nurses, and other support personnel will be willing to participate in a model child abuse prevention program.
2. Some of the data, which may be distasteful, will be presented in a professional, educational, and appropriate manner.

3. An eight-hour program divided into four parts will be an adequate amount of time to present material on child abuse.

4. Appropriate time will be arranged so all teachers and support personnel can attend.

5. Educational tools/handouts given out at the program will be helpful to teachers in future situations.

Limitations of the Study

The limitations of the study are as follows:

1. The prevention training model on child abuse will be designed for kindergarten through sixth grade teachers and support personnel and may not be appropriate for other educators.

2. Some teachers might not want to participate in the prevention program.

3. The data presented might be distasteful to some participants.

4. An eight-hour program might be too long for teachers to be exposed to the subject or it might not be adequate time to successfully educate teachers.

5. It might be difficult to find four consecutive days to present the program.

Definition of Terms

The following primary terms are defined as follows:

1. Physical abuse. Injuries inflicted by a parent or other caretaker ranging from bruising to injuries that cause death.

2. Sexual abuse. Physical contact between an adult and child during various stages of the child's development to sexually gratify the adult. It is generally an exercise of power of the adult over the child.

3. Neglect. Not attending to a child's basic needs such as clothing, shelter, medical needs and supervision. Where physical abuse is usually periodic, neglect is mostly chronic.

4. Child Protective Services. In Arizona it is a program administered by the Department of Economic Security, which is a branch of the Arizona State Government, which provides for the care of children reported to be abused, abandoned, or neglected. It protects the right of both children and parents. It seeks to prevent further neglect and learn better methods of child care.

5. Arizona 1976 amended law on child abuse. Any physician, hospital intern or resident, surgeon, dentist, osteopath, chiropractor, podiatrist, county medical examiner, nurse psychologist, school personnel, social worker, peace officer or any other person having responsibility for the

care of children whose observation or examination of any minor discloses evidence of injury, sexual molestation, death, abuse or physical neglect which appears to have been inflicted upon such a minor by other than accidental means or which is not explained by the available medical history as being accidental in nature, shall immediately report or cause reports to be made of such information to a municipal or county peace officer or to the protective services of the state department of economic security. Such reports shall be made forthwith by telephone or in person forthwith, and shall be followed by a written report.

CHAPTER 2

SELECTED REVIEW OF THE LITERATURE

In reviewing the literature on child abuse and neglect, some statistics on abuse will be revealed along with some information about why the school system should be involved.

Child abuse and neglect generally occur in the privacy of the home so it is difficult to determine exactly how many children are affected. The National Center on Child Abuse and Neglect indicate about one million children are abused by their parents annually which includes 100,000 to 200,000 abused physically, 60,000 to 100,000 abused sexually, and the remaining children are neglected (Broadhurst, 1979).

A 1980 study was conducted by three physicians, Straus, Gelles, and Steinmetz, who tried to measure the incidence of violence and child abuse towards children based on self reports of a nationally represented sample of 2,143 individual family members. The survey was generalizable to all intact families in the United States because of the sampling technique used. It was discovered that the milder forms of violence were most common. It was found that 58% of the 1,146 individuals that had at least one child at home between age 3 and 17 had performed some type of violence

toward their child in the year of the survey and 71% had been violent at some time while raising his/her child (Newberger, 1981). Some other findings of this study were as follows:

This survey defined child abuse as an act where, due to the nature of the violence, the child was at high risk of injury. . .the survey showed that more than 3 of every 100 children (3.6%) are at risk of serious injury each year from parents using at least one of the dangerous forms of violence. Assuming that each of these acts has a high probability of causing harm to child victims, then between 1.4 and 1.9 or the 46 million children between 3 and 17 years living with both parents in the U.S. were vulnerable to physical injury from their parents during the year of the survey (p. 28).

In the January, 1981, issue of Pediatrics in Review, Drs. Bittner and Newberger published a model for understanding child abuse (Appendix A). They have divided the model into "Socio-Cultural Factors" such as values and norms relating to violence, "Child-Produced Stresses" such as a child being behaviorally different, "Social-Situational Stresses" such as unemployment of a family member, "Parent-Produced Stresses" such as low self esteem, "Triggering Situations" such as a family conflict, and "Maltreatment" or the injury.

Faller (1981, p. 32) divided into three similar categories the factors which might be instrumental in abuse and neglect cases. She indicated that an interplay of two or more of the factors was often a reason for abuse/neglect. She divided the categories "Individual Parent Factors," "Family-Related Factors," and "Environmental Factors".

It has been recommended that child abuse be attacked on three levels of prevention. First, to educate the population on skills for parenting and child rearing through courses in the public school system which would include how to prevent child abuse; second, to have available programs for parents on parenting skills and ways to improve self image, such as a Parents' Anonymous group; and third, to develop crisis centers for group therapy (Hunner & Walker, 1981).

Ultimately, the role of the school needs to be further expanded to include prevention through the sponsoring of such programs as education for parenthood, forums on discipline, groups for adolescents, premarital and parenting seminars, and courses for the community on child abuse (Volpe, Breton & Mitton, 1980, p. 8).

Teachers see the child every day so they may be the first persons to discover signs of abuse. Since teachers are professionals who have been trained to be observant and

assess his/her students, they must know when to be suspicious of an abusive situation and how to detect the symptoms of abuse (Volpe, Breton & Mitton, 1980).

Broadhurst (1979, p. 12) went on to say the following:

Sensitive educators can often identify a particular type of maltreatment through the child's appearance or behavior at school or during routine interviews with parent or by recognizing physical and behavioral indicators. Academic and psychological clues can also provide some evidence of possible maltreatment.

Research has indicated that child abuse and neglect is very much related to learning because these abused children often show significant learning problems. In many key academic areas children are below grade-level performance (Broadhurst, 1979).

Traditionally if an abuse was suspected by school personnel, another institution was called in to assist and the school's responsibility ended there. However, through specialized training schools could take more responsibility and go beyond the point of reporting and develop parenting networks for the child who is in trouble (Volpe, Breton & Mitton, 1980).

Donald Kline (1977) has written a primer for school personnel regarding child abuse and neglect and has made some

suggestions regarding school policies and procedures. He said that a child abuse and neglect policy should be adopted and issued to all school personnel since all states require school personnel to report suspected cases. This policy should indicate the legal and professional obligations of each teacher regarding child abuse and neglect and explain the immunities from civil and criminal liability if the report was made in good faith. And the adopted policy should indicate that at designated times inservice personnel could assist personnel in how to identify a suspected case of abuse.

Kline goes on to say that although the school is involved in reporting suspected cases, they are not responsible for proving abuse:

Providing proof of neglect, abuse, and/or sexual molestation is the responsibility of the agency designated to receive the report. Usually, the child protective service worker in the division or department of social services, the police, and/or the county attorney (or another attorney designated to handle such matters) must provide proof in those few cases that reach the court of appropriate jurisdiction (pp. 17-18).

In 1978, a study was conducted using a random sampling method with members of the National Association of

School Psychologists for the purpose of determining if rural school psychologists received a different kind of exposure or greater exposure to the problems involving child abuse. Seventy-three percent of the responses were received from the national sample and 27% of the metropolitan sample. Analysis of the questionnaires indicated the following:

Seventy-one percent of school psychologists employed by school districts, 46% of trainers of school psychologists, 90% of school psychologists in private practice, and 61% of those who had retired or were employed elsewhere indicated that they had some employment-related experience with child abuse. . .the number of cases of abuse that school psychologists had been involved with reflected a significantly increasing trend ($p < .001$) from 1975 to 1977 (O'Block, Billimoria & Behan, 1981, p. 63).

The same study indicated more extensive academic preparation in handling abuse was necessary. Internship experience or coursework was the most frequent recommendation. Inservice workshops were suggested as part of the school psychologists' training as the survey revealed that the majority of respondents had no background in the child abuse area (O'Block, Billimoria & Behan, 1981).

In 1976 the National Central Registry was developed so the abuse problem could be tracked more adequately, and even though it appears that statistics of child abuse have increased, it also may indicate an improvement in reporting procedures (Faller, 1981).

Also in 1976, Arizona anti-abuse legislation was amended and now makes specific reference to the groups responsible for reporting child abuse and neglect. School personnel is one such group who is required under penalty of law to report any suspicions of abuse or neglect emotionally, sexually, or physically (Warner & Hartgraves, 1980).

An examination of the literature indicates supportive evidence that child abuse and neglect is a fast-growing area of concern and that there appears to be a sizable increase in abuse statistics whether it is due to an increase in reported cases, factors included in data such as the Newberger model or both. Also, literature reveals supportive evidence that the teacher is in a unique position to observe the child. By educating the teacher, and ultimately all school personnel about child abuse, prevention might be greater. It is possible to speculate that if more research is done in this area of educating school personnel, there will be more support for the idea that increasing the awareness level of school personnel to abuse and neglect through education and/or workshops might decrease child abuse cases.

CHAPTER 3

INTRODUCTION

The model child abuse prevention program is composed of the following four sections: program components, program agenda, suggested materials for the program, and program methodology.

Program Components

Week One--Two Hours

Goal: Educate teachers and support personnel on the problem of physical abuse and how it relates to the classroom setting.

Teachers and support personnel will be given an overview of the prevention program. An expert on physical abuse will introduce and define the topic and explain common patterns of injury such as bruising and burns, unexplained injury such repeated black eyes, and behavioral "red flags" or warnings such as an unusually fearful child. A 20-minute film will be presented on the subject. Teachers will be encouraged to ask questions and present feedback. A handout by Broadhurst (1979) on physical abuse indicators will be given out at the end of the program (Appendix B).

Week Two--Two Hours

Part 1: Neglect (55 minutes)

Goal: To define and explain neglect from a behavioral context as it relates to the classroom setting.

An expert will define neglect and explain physical, emotional, and material indicators of the problem. The traits of emotional abusers will be presented along with positive activities for the teacher to use in the classroom to help eliminate neglect and encourage the child. A handout by Broadhurst (1979) on neglect indicators will be given out at the end of the presentation (Appendix C).

Part 2: Child Abuse and Neglect within a Cultural Context (45 minutes)

Goal: To explain cultural differences within families regarding child abuse and neglect and how it may affect the child's school performance.

An expert on cultural considerations in child abuse will present information on the Native American family, the Hispanic American family, and the Black American family. The presenter will explain cultural myths and stereotypes along with communication barriers to overcome. From CPS a suggestions and approaches for effective intervention sheet will be handed out at the end of the presentation (Appendix D).

Week Three--Two Hours

Part 1: Sexual Abuse (60 minutes)

Goal: Explain sexual abuse with behavioral warnings as it relates to the classroom setting.

An expert will define sexual abuse and explain the child's behavioral indicators such as inability to concentrate in school, sudden drop in school performance, or to arrive at school very early and leave late with few, if any, absences. An explanation will be given concerning the dynamics of an incestuous family in the hope that this information may alert the teacher when talking to a student privately or with a parent-teacher conference. A handout by Broadhurst (1979) on sexual abuse indicators will be distributed at the end of the presentation (Appendix E).

Part 2: Interviewing your Student, Tips and Role Playing (30 minutes)

Goal: To explain the do's and don'ts of interviewing a student--how to talk to the child who may have been abused.

An expert will present material on interviewing the student when the teacher suspects an abusive situation. Suggestions will be made as what to do and not to do when talking with the student. A role play demonstration will be presented to indicate how an interview might be done. A

handout by Broadhurst (1979) on the do's and don'ts of interviewing will be distributed at the end of the presentation (Appendix F).

Week Four--Two Hours

Part 1: Child Protective Services or Government
Agency Responsible for Child's Welfare/
Children's Crisis Shelter (30 minutes)

Goal: To acquaint teachers with the services of a children's protective agency and explain a teacher's legal responsibilities in an alleged abusive situation.

An expert from a children's protective agency will present material on the role of the agency in the community and the responsibilities of the agency. The role of a children's crisis shelter will be mentioned and the services the shelter has for children and families. A handout by Broadhurst (1979) on a form for reporting abuse will be distributed at the end of the presentation (Appendix G), in addition to a copy of the state of Arizona's duty to report nonaccidental injuries and physical neglect of minors (Appendix H).

Part 2: What a Teacher can do for the School and
Community for Child Abuse Prevention
(40 minutes)

Goal: To give teachers additional suggestions and resources for the school setting and the community to help present abuse.

An expert will discuss programs the school could implement such as a formal program to meet the needs of abused or neglected children similar to already established programs for handicapped children. Material will be presented on community programs which could be implemented by a teacher or in conjunction with teachers to educate the community to increase prevention. A formerly abused student will speak briefly to the group about his/her experience with his/her family to end an abusive situation. A handout of school and community suggestions will be distributed at the end of the presentation (Appendix I), along with a bibliography (Appendix J) on child abuse and neglect for educators and a program evaluation (Appendix K).

Agenda

Week One

Weekday 3:00 p.m. - 5:00 p.m.

Introductory overview of model program	3:00-3:15
Film: "Child Abuse Our Problem Too"	3:15-3:35
Feedback: Questions and answers	3:35-3:50
Break	3:50-4:00
Expert lecturer: Physical abuse	4:00-4:40
Feedback: Questions and answers	4:40-4:50
Wrap up: Distribution of handouts	4:50-5:00

Week Two

Weekday 3:00 p.m. - 5:00 p.m.

Introductory overview of today's program	3:00-3:10
Expert lecturer: Neglect	3:10-3:45
Feedback: Questions and answers	3:45-3:55
Break	3:55-4:05
Expert lecturer: Child abuse and neglect within a cultural context	4:05-4:45
Feedback: Questions and answers	4:45-4:55
Wrap up: Distribution of handouts	4:55-5:00

Week Three

Weekday 3:00 p.m. - 5:00 p.m.

Introductory overview of today's program	3:00-3:10
Expert lecturer: Sexual abuse	3:10-3:55
Feedback: Questions and answers	3:55-4:10
Break	4:10-4:20
Expert lecturer: Interviewing your student: Tips and role playing	4:20-4:50
Feedback: Questions, answers, and handouts	4:50-5:00

Week Four

Weekday 3:00 p.m. - 5:00 p.m.

Introductory overview of today's program	3:00-3:10
Expert lecturer: Child Protective Services/Children's Crisis Shelter	3:10-3:40
Feedback: Questions and answers	3:40-3:50
Break	3:50-4:00
Expert lecturer: What a teacher can do for the school and community for child abuse prevention	4:00-4:30
Feedback: Questions and answers	4:30-4:40
Program wrap up, handouts, program evaluation	4:40-5:00

Suggested Materials for Prevention Program

Film

Filmstrip projector

Overhead projector

Screen

Extension cords

Cassette tape recorder

Flip chart, magic markers

Handout materials for participants

Program packets: notebook, pencil, name tags

Refreshments

Methodology for Setting up
a Model Prevention Program

The following 12 steps are suggested for setting up the program:

1. Identify a receptive school.
 - A. Set up an interview with the school principal.
 - B. In the case of a small school district, set up an interview with the school superintendent.
 - C. If principal/superintendent is receptive, find out and follow district procedures for setting up an in-service day(s) for the program and establish an appropriate time frame.
 - D. Offer to make a brief faculty presentation of the model on an appropriate date.
2. Contact expert speakers.
 - A. Set up an interview with the speaker to explain the prevention program and what the expert might present.
 - B. Write a letter to the speaker to explain the prevention program and what the expert might present.
3. Identify a location for the program and make appropriate arrangements for times, school insurance, etc.

4. Write confirmation letters to speakers (Appendix L).
5. Send a letter to teachers with all program information (Appendix M).
6. Send a preassessment survey to teachers who have responded favorably to find out what they may already know about child abuse and what they might like to learn (Appendix N).
7. Call and remind speakers.
8. Collect all materials for the program.
9. First presentation.
10. Additional presentations.
11. Send thank you letters to speakers.
12. Send thank you letters to teachers for participating with a suggested date for a posttest (Appendix O).

The basic intent of the program components, the program agenda, suggested program materials, and program methodology was to educate teachers and support personnel on child abuse issues and show the development of a model program.

CHAPTER 4

ADAPTATIONS, RECOMMENDATIONS AND SUMMARY

The following components are included in this section: Adaptations to the model child abuse prevention program, recommendations to the prevention program and a summary of the program.

Adaptations

It has been suggested that the model prevention program be held in four two-hour segments or once a week for four weeks. Other recommendations are as follows:

1. The program could be presented in eight segments such as 2:30 to 3:30 p.m. for eight consecutive weeks.
2. The program could be designed as an eight-hour workshop on a Saturday early in the school year or on an already designated in-service day.
3. The program could be a P.T.A. project for both teachers, support personnel, and interested parents.
4. The program could have a facilitator or co-facilitators, such as a graduate student, present the program after acquiring sufficient information on the topics from local experts.

The program should be adapted to the most appropriate time for the school involved and the facilitator(s) to enable

school and support personnel to benefit the most from the model prevention program.

Recommendations

The following recommendations are suggested for the model child abuse prevention program:

1. Contact the principal/superintendent in the early spring in order to choose the in-service days for the following school year. For example, the first three days of the school year are often automatic in-service days for teachers. Or request the first four Wednesdays in September and allow teachers to leave early on each following Friday. This should help guarantee the necessary time for a prevention program.

2. A midpoint evaluation by the facilitator is suggested for teachers to evaluate and assess the program (such as at the conclusion of week two). This should allow possible adaptations to the program of some material that may not be as pertinent to teachers and include information which would be more interesting.

3. Have a graduate student implement this model prevention program in an elementary school(s).

4. Develop a similar model program for the following populations: (a) parents; (b) students; (c) secondary teachers; (d) preschool teachers; (e) medical profession; (f) P.T.A. groups.

5. Translate the model prevention program into other languages such as Spanish for the Hispanic communities.

6. Investigate the possibility of salary credit for teachers who participate in a child abuse prevention program.

The program should be open to any recommendations which will help achieve the goal of abuse prevention in the elementary schools.

Summary

An increase in child abuse reported cases is overwhelmingly on the rise. Teachers are one group of people required by law to report a suspected abuse. Teachers see children on a daily basis and need to develop an awareness of behavioral indicators of physical abuse and neglect, to know reporting procedures, to set up prevention programs within the school and community, and other abuse-related issues.

A model child abuse prevention program for the elementary school teacher and support personnel was designed. It incorporates the following elements:

1. Lectures on physical abuse, sexual abuse, and neglect.
2. Lecture on child abuse and neglect within a cultural context.

3. Lecture on interviewing the student.
4. Lecture introducing a governmental agency such as the Child Protective Services.
5. Lecture on what a teacher can do for the school and community for child abuse prevention.

The basic intent of the program was to show that elementary school teachers can make the difference in prevention of abuse.

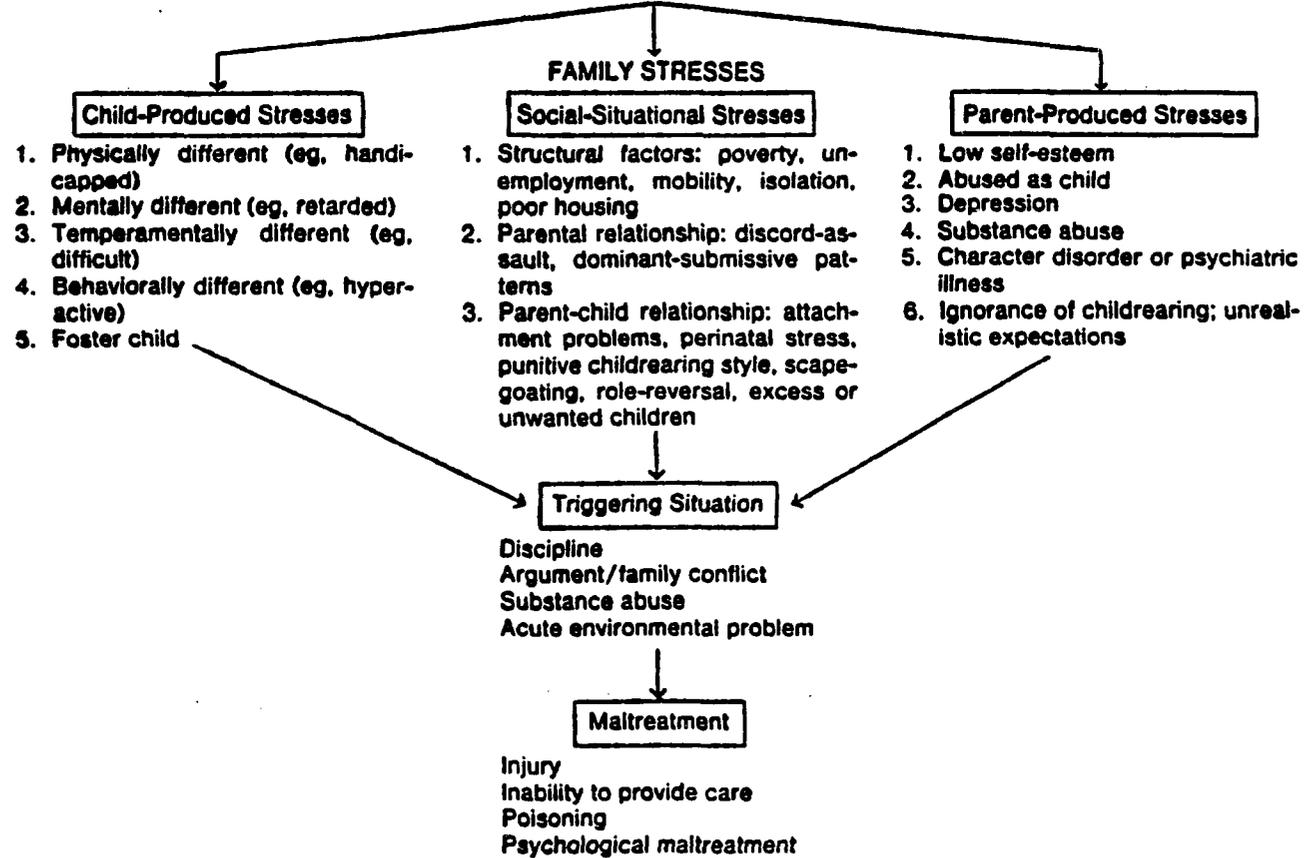
APPENDIX A

MODEL FOR UNDERSTANDING CHILD ABUSE*

(* Newberger, E. H. Child abuse. Boston: Little, Brown and Company, 1982. Reproduced by permission.

Social-Cultural Factors

1. Values and norms concerning violence and force; acceptability of corporal punishment
2. Inegalitarian, hierarchical social structure; exploitative interpersonal relationships
3. Values concerning competition vs cooperation
4. Inequitable, alienating economic system; acceptance of permanent poor class
5. Devaluation of children and other dependents
6. Institutional manifestations of all of the above: law, health care, education, welfare system, sports, entertainment, etc



APPENDIX B

INDICATORS OF PHYSICAL ABUSE

Physical indicators of physical abuse in the school-age child include:

Unexplained bruises and welts

on the face, lips, or mouth

in various stages of healing (bruises of different colors, for example, or old and new scars together)

on large areas of the torso, back, buttocks or thighs

clustered, forming regular patterns, or reflective of the article used to inflict them (electrical cord; belt buckle)

on several different surface areas (indicating the child has been hit from different directions)

regularly noted as fading marks when the child returns to school after an absence, weekend, or vacation

Unexplained burns

cigar or cigarette burns, especially on the soles of the feet, palms of the hands, back or buttocks

immersion or "wet" burns, including glove-or-sock-line burns on the buttocks or genitalia

patterned or "dry" burns which show a clearly defined mark left by the instrument used to inflict them (e.g., electric burner; iron)

rope burns of the arms, legs, neck or torso

Unexplained fractures

to the skull, nose, or facial structure

in various stages of healing (indicating they occurred at different times)

multiple or spiral fractures

swollen or tender limbs

Unexplained lacerations and abrasions

to the mouth, lips, gums or eyes

to the external genitalia

on the backs of the arms, legs, or torso

Unexplained abdominal injuries

swelling of the abdomen

localized tenderness

constant vomiting

Human bite marks

especially when they appear adult size or are recurrent

Behavioral indicators of physical abuse

Conduct can also be a tip-off to the presence of child abuse and neglect. Abused and neglected children may demonstrate certain characteristic behavior or conduct which can be spotted by the sensitive educator. For the adolescent particularly, behavior may be the only clue to child abuse and neglect. These behaviors may exist independent of or in conjunction with physical indicators.

The following are some of the behaviors which may be associated with physical abuse. The educator should be alert for the child who:

-is wary of physical contact with adults. In the classroom, most children accept physical closeness to a teacher. The abused child will often avoid

it, sometimes even shrinking at the touch or approach of an adult becomes apprehensive when other children cry.

-demonstrates extremes in behavior. Extreme aggressiveness or extreme withdrawal, for example: behavior which lies outside the range expected for the child's age group .

-seems frightened of the parents. States s/he is afraid to go home, or cries when it is time to leave.

-reports injury by a parent.

APPENDIX C
INDICATORS OF NEGLECT

Neglect involves inattention to the basic needs of a child, such as food, clothing, shelter, medical care, and supervision. While physical abuse tends to be episodic, neglect tends to be chronic. When considering the possibility of neglect, it is important to note the consistency of indicators. Do they occur rarely, or frequently? Are they chronic (they're most of the time), periodic (noticeable after weekends or absences), or episodic (seen twice this semester when there was illness in the family)? In a given community of sub-population, do all the children display these indicators, or only a few? Is this culturally acceptable childrearing, a different lifestyle, or true neglect? Answers to questions like these can be extremely helpful in differentiating between neglect and differing ways of life.

Physical indicators of neglect

Physical indicators of neglect include:

constant hunger, poor hygiene, or inappropriate clothing

constant lack of supervision, especially when engaged in dangerous activities or overextended periods of time

constant fatigue or listlessness

unattended physical problems or medical needs, such as untreated or infected wounds

abandonment

Behavioral indicators of neglect

The educator should be alert for the child who:
is begging or stealing food
constantly falls asleep in class
rarely attends school
comes to school very early and leaves very late
is addicted to alcohol or other drugs
is engaging in delinquent acts such as vandalism or
theft
states that there is no one to care for or look after
him/her

APPENDIX D

SUGGESTIONS AND APPROACHES FOR EFFECTIVE INTERVENTION

Ethnic Specific Approaches for Initial Interviews

Native Americans. The first interview should be a low-key and nonconfronting as possible. Be open and aware of subtle forms of disagreement such as limited participation in discussion, silence, or even over-cooperation. Keep discussion abstract and non-emotional.

Hispanics and Latinos. Initial meeting should be warm and friendly. Greetings should be personal with your hand extended as part of the greeting. Open the discussion with small talk and light conversation before you move on to more relevant discussions.

Blacks. Discussions should be casual and "down-to-earth" as possible without compromising the purpose of your meeting. Be cautious of sounding too official or authoritative. Light, "warm up" conversation sometimes helps to relax the client before discussing purpose of meeting.

General Approaches for Effective Intervention

Identify patterns of activity and roles of the family members and kinship groups. For example who is the primary child caretaker--the mother, grandmother, etc.? What are the roles of elder siblings and close relatives? Who is responsible for household chores, getting children ready for school, preparing meals, etc.?

Identify the key person in family and relate as much as possible to that person. For example, although in the traditional Hispanic family the mother is the primary child carer, the father is considered the decision-maker and head of the household. Therefore, the father may have to be just as involved as the mother in any decisions concerning the welfare of the child.

Identify interpersonal dynamics of the family. In some families, the person clearly identified as the decision maker may consult or seek the advice of a friend, relative or the spouse before making any decisions.

If possible, ascertain the extent to which the family has acculturated. Some families have a stronger ethnic identity than others. Therefore, it may be inappropriate to assume that some cultural practices are observed in the home. For example, some Native Americans born outside the reservation may have values that more closely resemble the dominant society than the tribe to which their family belongs. However, do not underestimate the ethnic pride of the family.

If you observe a practice in the home that you are not familiar with, don't be reluctant to ask the family to explain and discuss the cultural significance of the practice. Also be willing to share information about your ethnic background.

Use familiar words and terms. Avoid being patronizing and condescending in tone. Avoid overusage of slang or dialect. Don't use words that you are not familiar or comfortable with. For families with limited English language skills where the use of an interpreter may not always be necessary, try to incorporate words or phrases of their language that effectively express the point.

Identify and suggest, whenever appropriate, self-help organizations that provide services directed to the specific needs and concerns of the particular ethnic group.

Be willing to listen to whatever problems the client wants to discuss. Leave the situation if your emotions become too involved and return later when you feel calmer.

APPENDIX E

INDICATORS OF SEXUAL ABUSE

Sexual abuse includes any contacts or interactions between a child and an adult in which the child is being used for the sexual stimulation of the perpetrator or another person. Sexual abuse may also be committed by a person under the age of 18 when that person is either significantly older than the victim or when the perpetrator is in a position of power or control over another child.

Physical Indicators of Sexual Abuse

Sexual abuse is not often discovered in a school setting through physical indicators alone. Frequently a child confides in a trusted teacher or counselor or nurse that s/he has been sexually assaulted or molested by a caretaker, and that may be the first sign that sexual abuse is occurring. There are some physical signs to be alert for, however. These include:

- difficulty in walking or sitting
- torn, stained, or bloody underclothing
- complaints of pain or itching in the genital area
- bruises or bleeding in external genitalia, vaginal or anal area
- vereneal disease, particularly in a child under 13
- pregnancy, especially in early adolescence

The sexually abused child may:

- appear withdrawn; engage in fantasy or infantile behavior; even appear retarded
- have poor peer relationships

be unwilling to change for gym or to participate in
physical activities

engage in delinquent acts, or run away

display bizarre, sophisticated, or unusual sexual
knowledge or behavior

state s/he has been sexually assaulted by a caretaker

APPENDIX F

SOME "DO'S AND DON'TS" OF INTERVIEWING

When Talking with the Child

DO:

Make sure the interviewer is someone the child trusts
Conduct the interview in private
Sit next to the child, not across a table or desk
Tell the child that the interview is confidential
Conduct the interview in language the child understands
Ask the child to clarify words/terms which are not understood
Tell the child if any future action will be required

DON'T:

Allow the child to feel "in trouble" or "at fault"
Disparage or criticize the child's choice of words or language
Suggest answers to the child
Probe or press for answers the child is unwilling to give
Display horror, shock, or disapproval of parents, child, or the situation
Force the child to remove clothing
Conduct the interview with a group of interviewers
Leave the child alone with a stranger (e.g., a CPS worker)

When Talking with the Parents

DO:

Select interviewer(s) appropriate to the situation
Conduct the interview in private

Tell the parent(s) why the interview is taking place

Be direct, honest and professional

Tell the parent(s) the interview is confidential

Reassure the parents of the support of the school

Tell the parents if a report has been made or will be made

Advise the parent(s) of the school's legal responsibilities to report

DON'T:

Try to "prove" abuse or neglect by accusations or demands

Display horror, anger, or disapproval of parent(s), child, or situation

Pry into family matters unrelated to the specific situation

Place blame or make judgements about the parent(s) or child

APPENDIX G
HOW TO REPORT

The following information must be provided to:

(name of person/position)

(telephone number or address)

Child's name: _____ age _____

Address: _____

Parent's(s') name(s): _____

Address: _____

Physical indicators observed _____

Behavioral indicators observed: _____

Other indicators observed/known _____

Reporter's name and position _____

Date of report: _____

APPENDIX H

DUTY TO REPORT NONACCIDENTAL INJURIES AND
PHYSICAL NEGLECT OF MINORS; CLASSIFICATION

- A. Any physician, hospital intern or resident, surgeon, dentist, osteopath, chiropractor, podiatrist, county medical examiner, nurse, psychologist, school personnel, social worker, peace officer or any other person having responsibility for the care of children whose observation or examination of any minor discloses evidence of injury, sexual molestation, death, abuse or physical neglect which appears to have been inflicted upon such minor by other than accidental means or which is not explained by the available medical history as being accidental in nature shall immediately report or cause reports to be made of such information to a municipal or county peace officer or to the protective services of the state department of economic security. Such reports shall be made forthwith by telephone or in person forthwith and shall be followed by a written report. Such reports shall contain:
1. The names and addresses of the minor and his parents or person or persons having custody of such minor, if known.
 2. The minor's age and the nature and extent of his injuries or physical neglect, including any evidence of previous injuries or physical neglect.
 3. Any other information that such person believes might be helpful in establishing the cause of the injury or physical neglect.
- B. When such telephone or in-person reports are received by the municipal or county peace officer, they shall immediately notify the child protective services of the department of economic security and make such information available to them.
- C. Any person required to receive reports pursuant to subsection A may take or cause to be taken photographs of the child and the vicinity involved. Medical examinations including, but not limited to, radiological examinations of the involved child may be performed.
- D. Anyone participating in the making of reports required under the provisions of this section, or any one participating in a judicial proceeding resulting from such reports, shall be immune from any civil or criminal liability by reason of such action unless such person acted with malice or unless such person has been charged with or is suspected of abusing or neglecting the child or

children in question. Except as provided in subsection E of this section, the physician-patient privilege, husband-wife privilege or any privilege except the attorney-client privilege, provided for by professions such as the practice of social work or nursing covered by law or a code of ethics regarding practitioner-client confidences, both as they relate to the competency of the witness and to the exclusion of confidential communications, shall not pertain in any civil or criminal litigation in which a child's neglect, dependency, abuse or abandonment is an issue nor in any judicial proceeding resulting from a report submitted pursuant to this section.

- E. In any civil or criminal litigation in which a child's neglect, dependency, abuse or abandonment is an issue, a clergyman or priest shall not, without his consent be examined as a witness concerning any confession made to him in his role as a clergyman or a priest in the course of the discipline enjoined by the church to which he belongs. Nothing in this subsection discharges a clergyman or priest from the duty to report pursuant to subsection A of this section.
- F. A person who violates any provision of this section is guilty of a class 2 misdemeanor.

Child Abuse; definitions; classification

- A. In this section, unless the context otherwise requires:
 - 1. "Child, youth or juvenile" means an individual who is under the age of 18 years of age.
 - 2. "Physical injury" means the impairment of physical condition and includes but shall not be limited to any skin bruising, bleeding, failure to thrive, malnutrition, burns, fracture of any bone, subdural hematoma, soft tissue swelling, injury to any internal organ or any physical condition which imperils a child's health or welfare.
 - 3. "Serious physical injury" means physical injury which creates a reasonable risk of death, or which causes serious or permanent disfigurement, or serious impairment of health or loss or protracted impairment of the function of any bodily organ or limb.

- B. Under circumstances likely to produce death or serious physical injury, any person who causes a child to suffer physical injury or, having the care or custody of such child, causes or permits the person or health of such child to be injured or causes or permits such child to be placed in a situation where its person or health is endangered is guilty of an offense as follows:
1. If done intentionally or knowingly, the offense is a class 2 felony.
 2. If done recklessly, the offense is a class 3 felony.
 3. If one with criminal negligence, the offense is a class 4 felony.
- C. Under circumstances other than those likely to produce death or serious physical injury to a child, any person who causes a child to suffer physical injury or abuse as defined in section 8-546, subsection A, paragraph 2 except for those acts in the definition which are declared unlawful by another statute of this title or, having the care or custody of such child, causes or permits the person or health of such child to be injured or causes or permits such child to be placed in a situation where its person or health is endangered is guilty of an offense as follows:
1. If done intentionally or knowingly, the offense is a class 4 felony.
 2. If done recklessly, the offense is a class 5 felony.
 3. If done with criminal negligence, the offense is a class 6 felony.

APPENDIX I

SCHOOL AND COMMUNITY SUGGESTIONS TO PREVENT
CHILD ABUSE AND NEGLECT

A caring, patient teacher can be a very positive influence with an abused or neglected child. The following variables are suggested for the classroom:

- Acceptance of the child and not the behavior
- Listening for feelings
- Classroom stimulation
- Individuation
- Appropriate role models
- Appropriate behavior models
- A sense of safety and security in the classroom
- Setting goals
- Socialization activities
- Responsibility, respect, resourcefulness, responsiveness
- Love and warmth
- Natural and logical consequences in the classroom: a substitute for reward and punishment
- Stability/permanence
- Opportunities and benefits for learning and mastery
- Continuity of care

The following variables are suggested for the community for child abuse prevention:

- Parenting education
- Emergency babysitting program
- Crisis nursery
- Child advocacy programs

Child abuse hotline

Emergency/crisis nursery

Family counseling

Day care

Transportation services

Housekeeping services

Home management services

Legal resources

Emergency medical services

APPENDIX J

SUGGESTED BIBLIOGRAPHY FOR EDUCATORS

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- Butler, S. Conspiracy of silence: The trauma of incest. San Francisco: New Glide Publications, 1978.
- Channeles, S. Sexual abuse of children. Denver: American Humane Association, 1967.
- Kline, D. F. Child abuse and neglect: A primer for school personnel. Reston, Virginia: The Council for Exceptional Children, 1977.
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Pamphlets Available on Child Abuse

- Fraser, B. C. The educator and child abuse. 111 E. Wacker Drive, Suite 510, Chicago, Ill. 60601, 1978.
- Irwin, T., Braude, A. To combat child abuse and neglect. Public Affairs Committee, Inc., (5th printing June 1976. Public Affairs Pamphlet No. 508.
- The roles and responsibilities of professionals. Vol. 2, U.S. Department of Health, Education, Welfare, Office of Human Development/Office of Child Development, Children's Bureau/National Center on Child Abuse and Neglect.

National Organizations to Contact for More Information
on Child Abuse

American Humane Association, Children's Division

P.O. Box 1266

Denver, Colorado 80201

Educational Information Center

Arizona Department of Education

1535 W. Jefferson

Phoenix, Arizona 85007

National Center for the Prevention and Treatment of Child
Abuse and Neglect

University of Colorado Medical Center

1001 Jasmine Street

Denver, Colorado 80220

The National Center on Child Abuse and Neglect, Children's
Bureau

Office of Human Development/Association for Children, Youth
and Families

P.O. Box 1182

Washington, D. C. 20013

APPENDIX K

PREVENTION PROGRAM EVALUATION

Please take a minute or two to fill this out before you leave. Your input will help us to determine how to best prepare further programs. Please refer to the agendas for assistance. Thank you.

Did you find the information shared in the program relevant, interesting, informative?

Do you have any suggestions regarding the presentation; topics that you'd prefer were deleted; topics that you'd like to see expanded?

Are there any additional topics which you'd like to know something about regarding child abuse and neglect or related issues?

APPENDIX L

SAMPLE LETTER TO EXPERT LECTURERS

Date

Expert
Address
City

Dear Expert:

Thank you for agreeing to speak at the prevention program at (location) at (time) on (date).

As we discussed, you will have (time) to present the material on your topic. A preassessment survey will be sent to each interested teacher and I would be glad to let you know the results if it would assist in your presentation.

If you have any questions or suggestions, please contact me at the following phone number .

Looking forward to your contribution to the program.

Sincerely,

Coordinator

APPENDIX M

SAMPLE LETTER TO TEACHERS

Date

Teacher
Address
City

Dear Friend:

As a teacher and involved member in your community, you have been selected to participate in an important project: A model child abuse prevention program for elementary school teachers. The program will begin _____, _____, from 3:00 to 5:00 p.m., and will continue on the following three _____ ending _____.

With your attendance at the program you will be making an important contribution to the planning and future direction of child abuse prevention in your school district. Please check the appropriate area at the bottom of the page.

Please return this information no later than _____ in the stamped, self-addressed envelope. If you have any questions or concerns, contact _____ at the following phone number _____. Attention to this matter will be deeply appreciated.

Thank you very much.

Sincerely yours,

Coordinator

NAME: _____ SCHOOL DISTRICT _____

I will attend the model prevention program on _____

I will not attend the model prevention program on _____

APPENDIX N

SAMPLE QUESTIONS FOR PREASSESSMENT SURVEY

1. What do you want to learn most about:
 - a. Physical abuse
 - b. Sexual abuse
 - c. Neglect

2. What are your greatest concerns and fears as a teacher regarding child abuse?

3. What questions would you like answered in this workshop?

4. Have you ever referred a student to your school counselor or reported a case of alleged child abuse?

If yes, how many times?

5. Please rank order the seven prepared topics which will be included in the program:

Physical abuse _____

Neglect _____

Child abuse and neglect within a cultural context _____

Sexual abuse _____

Interviewing your student: tips and role playing _____

Child Protective Services (legal responsibilities) _____

What a teacher can do for the school and

community for child abuse prevention _____

6. Please comment on whether you think child abuse is a problem within your school population.

APPENDIX O

SAMPLE POSTTEST QUESTIONS

1. According to laws in this state, who are persons required to report suspected child abuse and neglect?

2. Some behavioral indicators of child abuse and neglect are as follows:

3. Persons who suspect child abuse and neglect but do not report are subject to:

_____ No penalty

_____ A penalty up to _____

4. There are numerous myths about child abuse and neglect. List six of these myths.

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