



**DADE COUNTY PUBLIC SCHOOLS**

**EVALUATION OF THE  
SAFE CHILD PROGRAM**

**OFFICE OF EDUCATIONAL EVALUATION & MANAGEMENT ANALYSIS**

# **THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA**

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## **Executive Summary**

The Safe Child Program is designed to prevent sexual, emotional and physical abuse of young children, and to address the problem of threats posed to the children by strangers. The program, which targets children in pre-k through second grade, is sponsored by the National Council of Jewish Women and Hands in Action as a community service. The Safe Child Program was first implemented in the Miami-Dade County Public Schools in the 1993-94 school year. That year 27 elementary schools participated. The program has been expanded each subsequent year. By 1996-97, the year in which this evaluation was conducted, 89 schools were participating in the program. Currently, there are 110 schools participating.

The evaluation of the Safe Child Program addressed three basic aspects of the program. They were: (a) the implementation of the program, (b) its perceived impact, and (c) the reactions of the participants. In the following sections, the key outcomes associated with each aspect are enumerated.

### **The implementation of the program.**

- A large majority of the teachers in the participating schools have been trained and are teaching the Safe Child Program.
- Training is generally regarded as adequate, but there are gaps in the coverage.
- For the most part, both teacher-trainers and teachers reported that they have enough materials, and most stated that they are satisfied with the quality.
- The assessments of parent involvement were generally favorable, but less so than other aspects of the program.
- Parents of students in participating schools reported more meetings on the issue of child abuse than those in non-participating schools, but large numbers in both sets of schools reported none.

### **The perceived impact of the program.**

- The Safe Child Program is seen by teachers and principals as improving on the similar program that it replaces.
- The Safe Child Program is seen as better organized and managed than comparable programs.
- Teaching children about abuse and strangers is perceived as effective by both parents and teachers regardless of the program being used.

- Compared to other selected safety topics, the time devoted to the threat of strangers was high while that devoted to sexual abuse was comparatively low.
- The Safe Child Program has fostered greater awareness among parents.

### **Reactions of the participants.**

- The parents who have a knowledge of the program have a favorable impression of it.
- Principals and teacher-trainers generally give the Safe Child Program high marks.
- The teachers also have a generally favorable opinion of the program.
- Some indications of dissatisfaction with the program emerged in the surveys.

### **Summary and recommendations.**

The evaluation has revealed that the case for the adoption of the Safe Child Program in the district's elementary schools is favorable. Several outcomes favor adoption. First, there is evidence that the program increases parent awareness and involvement. Second, most teachers who use the program tend to support it, and this support increases with experience. Third, there is evidence that the program is better structured than other similar programs.

However, other outcomes of the evaluation do not favor a total adoption of the program. These include: a) all programs dealing with safety and abuse are regarded by teachers and parents alike as being effective; b) a program on abuse and safety is already in place, and the cost of materials and program training must be assumed by each school in which the Safe Child Program is adopted; c) the Safe Child Program does not appear to increase the time devoted to the topics of strangers and sexual abuse; and d) dissatisfaction with the Safe Child Program is small but strongly stated, and concentrated by school.

Based on these outcomes, the following recommendations are proposed.

1. Schools should be fully informed of the features and advantages of the Safe Child Program, and encouraged to consider it seriously for adoption. However, the final decision to adopt it should remain at the school level. Ideally, the program's adoption should be contingent on receiving the approval of a majority of the instructional staff who will be responsible for its delivery.
2. Steps should be taken to ensure that all teachers of the Safe Child Program are adequately trained in the program.
3. Further inquiry should be made into whether there is a need to provide teachers with inservice on teaching of young children about the dangers of sexual abuse.

## Introduction

### The Safe Child Program

**Description of the Program.** The creator of the Safe Child Program, Dr. Sherryll Kraizer, has described the program as follows:

The Safe Child Personal Safety Training Program [is] a standardized, scripted, videotape curriculum that provides training for teachers, parents and children ages three through 10 in five age-appropriate segments .... The Safe Child program emphasizes prevention of sexual, emotional and physical abuse by people known to the child, prevention of abuse and abduction by strangers, and safety for children in self-care .... the curriculum builds from children's everyday experiences and teaches them how to apply generalized skills to specific risk-associated situations. (Kraizer, Witte & Fryer 1989, p. 24)

In the 1996-97 school year, the Safe Child Program was implemented in 89 elementary schools within the Miami-Dade County Public Schools (MDCPS). These schools volunteered to provide the program to students in pre-k through second grade. Programmatic training was provided by Dr. Kraizer and district level personnel to staff members designated by school site administrators. In turn, these staff members scheduled and implemented school site training for classroom teachers and parent groups.

The Safe Child Program is implemented in three phases. The first phase is the teacher training component which includes: (a) an introduction to the program; (b) an overview of the problems of child abuse; (c) the dynamics of child abuse; (d) specific techniques for teaching the classroom program, recognizing and reporting abuse; and (e) other required implementation information. Phase two of the program addresses the implementation of parent seminars. Information provided to parents includes: (a) the introduction to the program; (b) an overview of the problems of child abuse; (c) specific prevention techniques taught to their children for recognizing and reporting abuse; and (d) treatment and resources for help. Phase three of the program contains the classroom implementation component. Each day's lesson begins with a videotape presentation; an accompanying teacher's manual provides a script which includes such activities as role-playing, discussion, and classroom activities. A typical lesson can range from 20 minutes to an hour. Over a ten-day period in pre-kindergarten and kindergarten, and over a five-day period in both grades one and two, the children are sequentially and developmentally introduced to a range of prevention tactics.

**Origins of the Program.** The Safe Child Program "evolved from Children Need to Know: Personal Safety Training, developed by Health Education Systems [of] ... Palisades, New York" (Kraizer, Witte, & Fryer, 1989, p. 27). At that time, Dr. Kraizer was Director and President of Health Education Systems. (This earlier program is described in Kraizer, Fryer & Miller, 1988.) To date, the Safe Child Program has apparently been widely applied. An article reporting the results of an evaluation conducted under the supervision of Dr. Kraizer and her staff draws on participants "from rural, urban and suburban schools in three states" (Kraizer, Witte, & Fryer, 1989).

**History of the Program in Miami-Dade County.** Sponsored by the National Council of Jewish Women and Hands in Action as a community service, the Safe Child Program was first implemented in the MDCPS in the 1993-94 school year. That year, 27 elementary schools participated. The program has been expanded each subsequent year. By 1996-97, the year in which this evaluation was conducted, 89 schools were participating in the program. Currently, there are 110 schools participating.

## **The Evaluation**

**Design of the Evaluation.** The primary purpose of the evaluation of the Safe Child Program was to generate information to facilitate decisions regarding the further extension of the program. The strategy of the evaluation was to elicit responses from the major participants in the program regarding its implementation and perceived effectiveness. The evaluation addressed three main topics: (a) the implementation of the program; (b) its impact on students; and (c) the participants' reactions to the program.

**The Surveys.** The chief source of data for the evaluation was a series of surveys. Six populations were targeted using five separate instruments. The six populations were: 1) the principal of each school participating in the Safe Child Program in 1996-97; b) the teacher-trainer (or if more than one, the teacher-trainer serving as contact person) at each of the participating schools; c) all pre-k through second grade regular teachers at each participating school; d) a randomly selected sample of 500 pre-k through second grade regular teachers at schools not participating in the program; e) a randomly selected sample of 500 parents of pre-k through second grade students in the participating schools; and f) a randomly selected sample of 500 parents of pre-k through second grade students in the non-participating schools. Copies of the survey instruments are found in the appendices. The text of the instruments forwarded to parents were in three languages: English, Spanish, and Haitian Creole.

Table 1 gives an overview of the mailing dates and response rates of the surveys. A review of the table reveals that the principals, with 69.7 percent, had the highest response rate, followed by the teacher-trainers with 61.8 percent. Slightly more than half of the teachers responded: 51.9 percent of the participating group, and 54.2 percent of the non-participating. The parents' responses were the lowest: 26.6 percent for the participating group, and 26.0 percent for the non-participating.

A response rate substantially lower than 100 percent necessarily introduces the question of bias, in the sense of self-selection among the respondents. To address this potential problem, a number of questions in the teacher survey requested information that could reinforce confidence in the comparability of the two groups of teachers. Specifically, on the two surveys of participating and non-participating teachers, the respondents were asked to rate the importance of six goals of teaching. The analysis revealed that the mean responses of the two groups did not exhibit a statistically significant difference in any of the items. Both teacher surveys also included a list of seven safety topics, and respondents were asked to indicate the approximate amount of time spent on each over the course of the school year. Once again, the analysis revealed that the amount of emphasis placed on the different topics by both groups of teachers is

Table 1  
Surveys Conducted

Target Population	Date	Surveys	
		Forwarded	Returned (%)
Principals of Participating Schools	April	89	62 (69.7)
Teacher-Trainers	April	89	55 (61.8)
Teachers in Participating Schools	May	1,223	635 (51.9)
Teachers in Non-Participating Schools	May	500	271 (54.2)
Parents, Participating Schools	June	500	133 (26.6)
Parents, Non-Participating Schools	June	500	130 (26.0)

very similar. The teachers in both groups cover the same topics to roughly the same degree, and assign the same order of importance to them. The implication is that the two groups do not differ with respect to their professional philosophy or attitudes toward safety instruction, and are thus generally comparable in the aspects addressed by this evaluation.

In the same manner, information requested in the parent survey served to reinforce the confidence in the comparability of the participating and non-participating groups. As previously noted, the survey instrument was provided to each parent in three languages: English, Spanish, and Haitian Creole. The proportions by language returned from each group were all but identical. As such, the groups do not vary by preferred language. Additionally, the two groups do not exhibit a statistically significant difference in the number of years they had been associated with their child's school at the time of the survey. Finally, several questions in the parent survey addressed various aspects of their school involvement. Both groups were asked about the number of visits made to the school during the year, and about the number of conversations with the child's teacher. In all cases, the analysis of responses revealed no statistically significant difference in the two groups. Consequently, the two groups of parents, like the two groups of teachers, are generally comparable in the aspects addressed by the evaluation.

### Implementation

*What has been the extent and adequacy of the training for the program?*

**A large majority of the teachers in the participating schools have been trained and are teaching the Safe Child Program.** With regard to the training and the implementation of the program, the results of the surveys of the teacher-trainers and the participating school teachers are quite similar. A total of 855 pre-k through second grade teachers were reported in the count