



School-Based Prevention and Intervention of Child Maltreatment:

Current Practice and Future Directions

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 - **Hall, C. M.,** Runion, M. C., & Perkins, D. F. (in press). School-based prevention and intervention of child maltreatment: Current practice and future directions. In Dixon, Perkins, Craig, & Hamilton-Giachritsis (Eds.), *What Works in Child Protection: An Evidence-Based Approach to Assessment and Intervention in Care Proceedings*. Hoboken, NJ: Wiley-Blackwell.
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Overview of Today's Presentation



- How child maltreatment (and other aversive experiences) affect cognitive development and academic performance
- Current realities of schools – capacity for implementation and pressure to perform
- Perspectives on the role of school personnel
- The *IOM Protractor*
 - Prevention, Treatment, Maintenance
- Conclusions and recommendations



Effects of Child Maltreatment

Cognition, Academic Performance and School Adjustment

Maltreatment and the Developing Brain

Watts-English, Fortson, Gibler, Hooper, & De Bellis, 2006

- Brain growth and neurobiological changes
 - By age 2, total brain weight is 75% of that of an adult brain.
 - Development of the parietal and frontal lobes are prominent from age 7 to 16 years
- Traumatic experiences disrupt this growth through a number of pathways
 - Prolonged stress and maltreatment are related to alterations in the processes that are involved in brain maturation, cognitive functioning and emotion regulation



The Fallout – Mental Health Symptomology



- PTSD
- Internalizing disorders – anxiety, depression, somatic symptoms, school avoidance and phobia
- Externalizing disorders – oppositional behavior, attention dysregulation, aggression

The Fallout – Cognitive Function and Academic Performance

Watts-English, Fortson, Gibler, Hooper, & De Bellis, 2006

- Faster loss of neurons in the hippocampus – direct effects on memory, learning, and storing and processing of information.
- Deficits on measures of cognitive and academic performance, poor teacher assessments of school performance, lower grades
- Problems with attention, problem solving, abstract reasoning





The Realities of Schools

Capacity, Pressure, and Implementation Readiness

Every Student Succeeds Act (ESSA)

The "New" No Child Left Behind



- Reauthorization of the Elementary and Secondary Education Act, commitment to equal opportunity for all students.
- Improvements over NCLB
 - State driven and based on multiple measures
 - State developed identification and intervention of bottom 5% of schools
 - Includes Pre-K
 - Teacher and leader evaluation and support systems including student learning and observation

Other Pressures

Tired of being told what to do....



- Common Core Standards
- Administrative changes that ultimately can change the focus of school district efforts
 - Often without stakeholder input
- Union issues
 - Trying to establish fair pay and work schedules
 - Balancing collective bargaining with "getting the job done"
- Lack of mentoring, coaching, and ongoing support

Implementation Science

How do we help schools utilize programs/ strategies that work?

- The use of strategies to put a new program in place within an organization
- Implementation stages
 - Dissemination
 - Adoption
 - Initial Implementation
 - Sustainability
- Strategies to promote implementation (Forman et al., 2013)
 - Dissemination – information dispersal about new programs and practices to practitioners
 - Implementation – Active approach to providing the necessary supports and organizational/ systems conditions for using those new programs and practices

What Do Schools Need for Effective Implementation?

Forman et al., 2013

- Teacher support – coaching, consultation
- Principal and administrator support
- Integration of interventions with other school programs/ initiatives
- Engaging the school in planning for implementation





The Role of School Personnel

Perspectives and Evidence



Focus on the Whole Child

Hall, Runion, & Perkins, in press

- Adoption of public service health models to serve children in school contexts
- Children exposed to multiple risks – poverty, risk of maltreatment – may not benefit from traditional service models
 - Issues with cultural relevance and attrition/ engagement
- Whole child emphasis may improve collaborative efforts between agencies and help with more global support (Fantuzzo, McWayne, & Bulotsky, 2003)

Social Justice and Human Rights

Hall, Runion, & Perkins, in press

- United Nations Convention on the Rights of the Child – implications for school psychology practice (Hart & Hart, 2014)
 - Gatekeepers in leading school efforts that promote practices that support the overall success of children
- A broader school mission (in addition to academic success) related to serving as the protectors of children in their charge
- School professionals may serve to:
 - Identify children at-risk or those being harmed
 - Procedural safeguards within the school
 - Professional development and parent outreach
 - Evaluation of individual children
 - Advocacy for vulnerable or disabled children

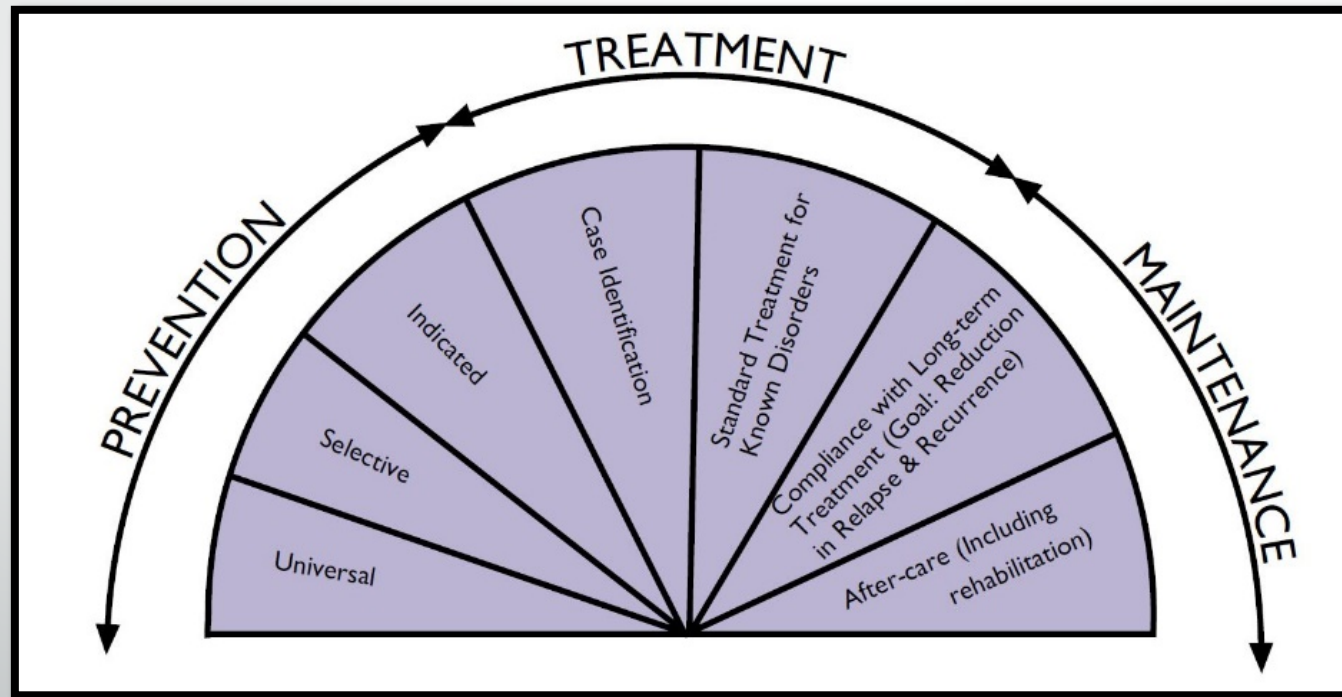


The IOM Protractor

A way to integrate current multi-tiered systems of service
and a public health framework

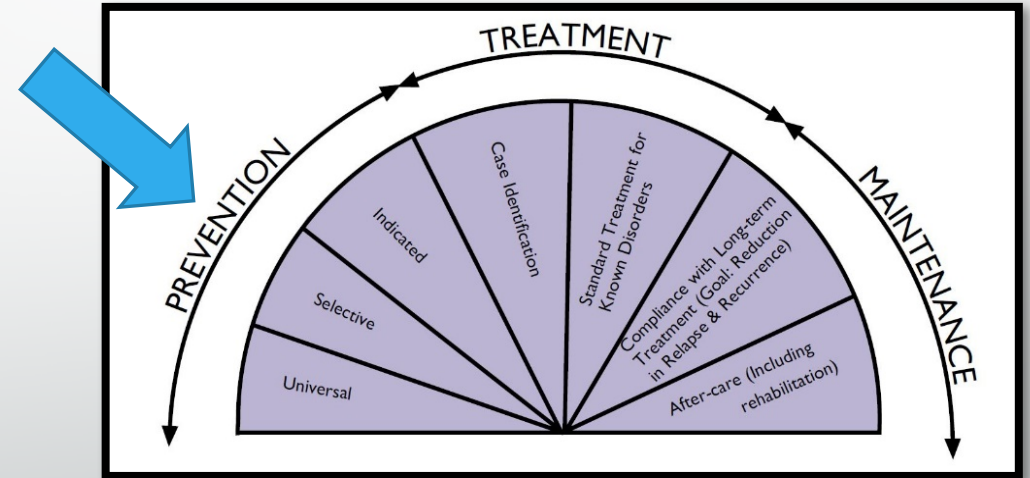
The Institutes of Medicine (IOM) Protractor

Springer & Phillips, 2007



Prevention

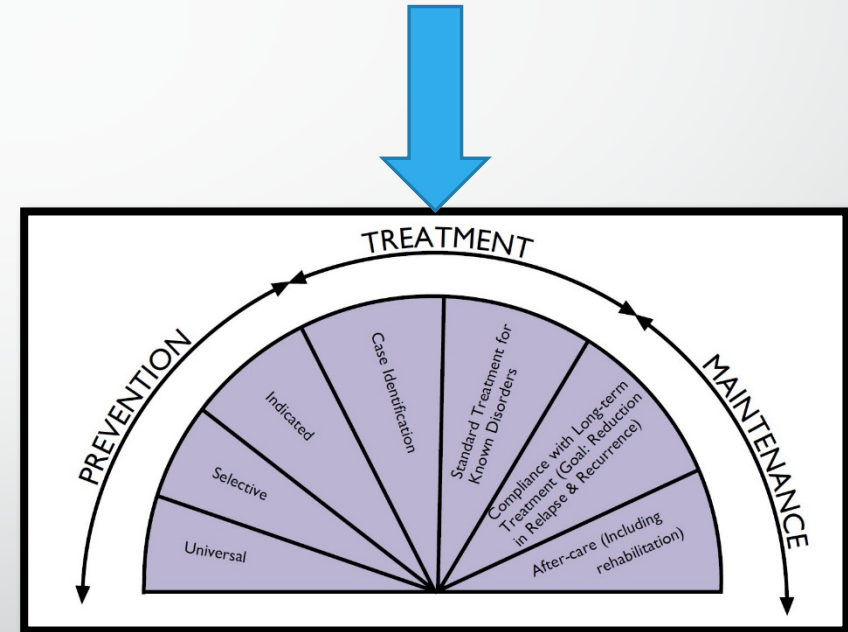
- Variety of prevention programs to prevent maltreatment targeted for students, parent, teachers, families
 - Some are designed for school-based implementation, others are designed for community settings (e.g., recreation centers, churches)
- Universal prevention programs AND programs for at-risk youth/ families
 - *Child Sexual Abuse Prevention: Teacher Training Workshop; Parenting Our Children to Excellence; Who Do You Tell?*
- Program evidence includes:
 - Short-term increases in knowledge; questions remain about longer-term impact
 - Some programs show differential effects for strategy effectiveness for known vs. unknown perpetrators



Treatment: Detection and Reporting

A necessary first step....

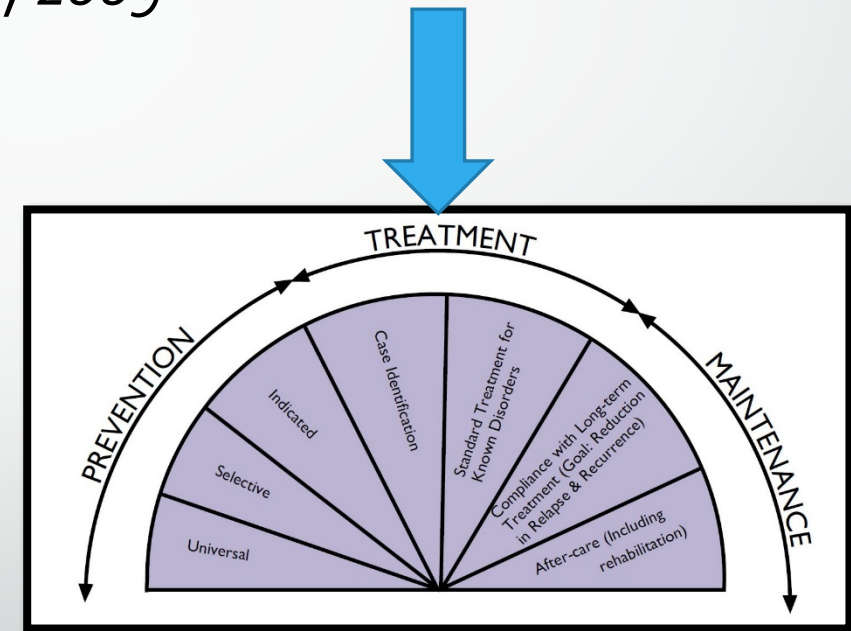
- May include both case identification/ detection and standard care
- Most programs include a psychoeducation component
- Challenges remain regarding under-reporting of suspected abuse
 - 40% of teachers/ administrators admitted to failing to report an instance of maltreatment in their career (Zellman, 1990)
 - Increased reporting among special educators, potentially due to increased risk (Kenny, 2001)
- Professional development training has lackluster results due, possibly, to lack of ongoing coaching/ support (Alvarez et al., 2004)



Treatment: Intervention for Maltreated Children

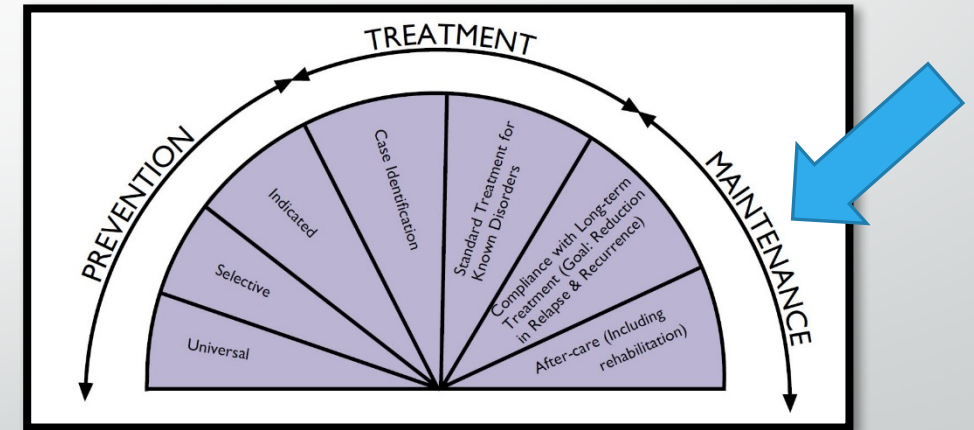
Brassard et al., 2009

- Questions re: whether or not school-based practitioners have the requisite training to provide direct service related to trauma, family therapy/ engagement
- Manualized programs that support behavior regulation and social-emotional learning may be indicated (PATHS, Incredible Years)
 - Effects for traumatized children of these universal programs is not understood
- Interventions focused on academic engagement and instruction – *School Success Program* (Mallett, 2012)



Maintenance

- Support with continued treatment and care coordination in the community
- Reporting and prevention of future abuse
- Differential roles for elementary, middle, and high school teachers
 - Identification of a school-based case manager





Care Coordination

A School-Based Case Manager

1. Primary contact for providers who may be interacting with the child while on school grounds.
2. Consolidating information about current living arrangements, progress in treatment, and progress in legal proceedings (may keep school personnel informed).
3. Communicating current therapy goals and techniques so that accommodation/practice can be continued in school.
4. Provide progress-monitoring updates from school-based personnel.



Conclusions and Recommendations

A way forward...

Gaps in Knowledge

- Primary focus on participant knowledge and skill gain tied to educational program content
- Mixed results for long-term maintenance
- Outcomes of interest should be expanded to include:
 - Reductions in maltreatment incidents
 - Increases in rates of reporting
- More research is needed related to the capacity for schools to provide care across levels.

Conclusions

- Movement toward a social justice and public health perspective in working with children who experience adverse childhood experiences, especially maltreatment.
- Move beyond requirements – join with community organizations and take an active role.
- Examining organizational needs (e.g., training, infrastructure, community connections, policy/ procedures) in order to better address maltreatment.
- Examine their role in serving the whole child.

Questions?



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