

# PREVENTION

## REPLICATING CHILD ABUSE PREVENTION PROGRAMS: A WORD OF CAUTION

—by Deborah Daro

The past twenty years have seen a rapid growth in the number of prevention programs nationwide and a corresponding increase in their assessment. The literature is replete with examples of programs which have successfully mitigated the risk for maltreatment. These program models include:

- home visiting services, particularly those offered prior to or at birth and continuing for a one- to two-year period (Lutzker, 1984, 1987; Gray, Cutler, Dean & Kempe, 1979; Olds, Chamberlin & Tatlebaum, 1986);
- group-based educational and support programs targeting parents with children of various ages (Bavolek & Dillinger-Bavolek, 1985, 1988; Ellwood, 1988; Levin, 1988; Miller, 1988; Rodriguez & Cortez, 1988);
- self-help groups such as Parents Anonymous (Cohn, 1979; Fritz, 1986; Juneqicz, 1983; Moore, 1983);
- family resource centers which serve as clearinghouses for various educational and support services utilized by at-risk families (Kagan, Powell, Weissbourd & Zigler, 1987);
- crisis intervention services and respite care nurseries (Cherry & Kirby, 1971; Green, 1976; Kempe & Helfer, 1976; Vaughan & Loadman, 1987);
- child assault prevention programs (Fryer, Kraizer and Miyoski, 1987; Harvey, Forehand, Brown & Holmes, 1988; Hazzard, 1990; Kolko, Moser & Hughes, 1989; and Wurtele, Saslawsky, Miller, Marrs & Britcher, 1986).

While it is tempting for those interested in expanding local prevention efforts simply to select one or more of these models for replication, such action is unwise. Effectively using available research to enhance child abuse prevention efforts requires more than replicating a promising intervention. The process involves careful attention to the context in which the program will be placed, the proposed target population it will serve, and the broader social service environment in which it will operate. While planning is always necessary when establishing a service delivery system, it is particularly important for child abuse prevention programs for a number of reasons.

First, it is often unclear how a given family, culture or community will respond to different interpersonal and environmental causes of maltreatment. While some causal factors have universal effects, most influence parenting patterns in diverse ways. Planners

of prevention services need to consider the full range of causal factors and their potential effects.

Second, prevention efforts need to be particularly sensitive to cultural and community differences in parenting style, family structure, family privacy and parent-child relationships. Because intervention occurs prior to any notable misconduct on the part of parents, prevention programs must be non-judgmental, offering assistance rather than reform or "cure". Tailoring efforts to the normative standards of care found within a specific community or target population is critical to making interventions comprehensible and effective within the target community.

Finally, effectively preventing child abuse requires a combination or continuum of services. While a single service may effectively address a particular causal factor or parenting need, it cannot adequately protect the family from the wide range of stress factors it will ultimately encounter. To a large extent, prevention programs rely on the overall community response system to sustain their gains over time. Therefore, the eventual success of an individual program is largely dependent upon the resources and effectiveness of other local efforts.

Program evaluations that document changes in specific outcome measures provide only one important standard for determining whether a given program is a promising candidate for replication. Far more important is understanding whether the successful program's organizational auspice, client characteristics, and community service system mirror the conditions in the community seeking a new prevention program. Rather than offering clear models for replication, research on child abuse prevention programs provides service planners with numerous building blocks for constructing the most relevant prevention system for their particular situation.

### Promising Service Features

On balance, two major prevention avenues have generated the most interest in terms of the number of providers and researchers they have attracted (Daro, 1989). The first group, the parenting enhancement models, includes a wide range of programs designed to expand and strengthen the capacity of parents to better care for their children. The second group, the child empowerment service models, is a more homogeneous cluster of strategies that target the potential victims of abuse, enabling them to resist threats of maltreatment, particularly sexual assault. While no prevention program is universally successful, several components of these service models have been identified as increasing the probability of success with diverse populations.

The most promising feature of parenting enhancement services include:

- initiating services prior to or as close to the birth of the first child as possible.
- tying the service to the child's developmental level, recognizing the unique challenges involved in caring for and disciplining children of various ages
- providing opportunities for parents to model the interactions or discipline methods being promoted through the intervention.
- maintaining the intervention for at least six months
- complementing educational and therapeutic efforts with self-help groups, such as Parents Anonymous.
- balancing home-based and group-based interventions in order to address those isolated and uncomfortable in group settings as well as those who appreciate opportunities to share problems with other parents.
- teaching parents how to make use of existing social supports and community services.

Research on child assault prevention programs reveals that most programs which work:

- provide children an opportunity to rehearse prevention strategies and receive feedback on their performance
- are developmentally tailored to a child's cognitive characteristics and learning ability.
- present material for younger children in a stimulating and varied manner in order to maintain their attention and to reinforce the information learned.
- teach children generic concepts such as assertive behavior, decision-making skills, and communication skills which can be used in everyday situations.
- develop longer programs which are better integrated into regular school curricula and practices.
- create more formal and extensive parent and teacher training components.
- offer booster sessions to reinforce the concepts presented.
- include extended after-school programs and in-depth discussion opportunities for certain high risk groups (e.g., former victims, teen parents).
- involve all significant adults (e.g. teachers, parents, extended family, community leaders) in learning about sexual abuse and how to respond to reports.

### Conclusions

Selecting a prevention program for replication is more than simply identifying the program with the most promising outcomes. Program structure, staffing and content must always be arrayed against the characteristics of the client population being assisted and the community in which the services are delivered. In reviewing model programs for possible replication, the following questions should be asked:

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## DARO (continued from page 7)

- Does the program address the risk factors you want to address (i.e., parenting knowledge, parenting skills, education for children, etc.)?
- Can the intensity and duration of the intervention be sustained with the resources you have available?
- Does your staff need additional training or skill building in order to provide adequate service?
- Has the program been successful with the types of families or individuals you anticipate serving with your intervention (i.e., with people of the same race, culture or family structure)?
- Is the program's success dependent upon the availability of other services in the community?

Successful prevention efforts require careful planning both prior to and after their implementation. While program evaluation findings can provide a useful framework for structuring this planning activity, they cannot replace it. Preventing child abuse remains largely a community-specific activity which requires continuous attention to shifting population, agency and community service characteristics.

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