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A social skills and abuse prevention program for adolescents with developmental disabilities : a case study

Brenda Gail Hughes
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Hughes, Brenda Gail, M.A.

San Jose State University, 1991

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Ann Arbor, MI 48106**



**A SOCIAL SKILLS AND ABUSE PREVENTION PROGRAM
FOR ADOLESCENTS WITH DEVELOPMENTAL
DISABILITIES: A CASE STUDY**

A Thesis

Presented to

**The Faculty of the Division of Special Education
and Rehabilitative Services
San Jose State University**

In Partial Fulfillment

of the Requirements for the Degree


Master of Arts

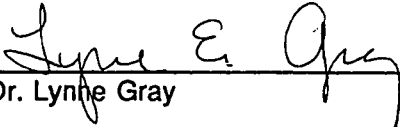
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May, 1991

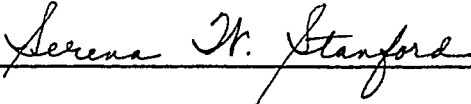
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ABSTRACT

A SOCIAL SKILLS AND ABUSE PREVENTION PROGRAM FOR ADOLESCENTS WITH DEVELOPMENTAL DISABILITIES: A CASE STUDY

by Brenda G. Hughes

Sexual abuse and exploitation are pervasive problems affecting individuals with developmental disabilities from childhood through adulthood. This study examines the results of teaching a social skills and abuse prevention curriculum to adolescents with developmental disabilities.

The research design includes baseline assessment, treatment, withdrawal of treatment, and delayed posttesting. Instruction and testing were done in both classroom and community environments. Four male students received instruction presented in group format in the classroom. Individual instruction occurred in community community environments through encounters with persons acting as perpetrators. Results indicate all four subjects learned the appropriate social and self-protection skills in the classroom setting and generalized most of these skills to community based settings.

This research strongly supports the continued development and implementation of social skills and abuse prevention curriculum to ensure the safety of individuals with developmental disabilities.

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CHAPTER I

Introduction

Opportunities to gain information in the areas of social skill development and self-protection are critical for all members of society. During childhood, individuals must learn that one's body belongs to oneself and that every person has the right to choose not to be touched by someone else. As children grow into adolescence, they continuously gain independence and frequently experience new environments. Adults generally assume children and adolescents possess the self-protection skills necessary for their experiences to be positive. Unfortunately, this frequently is not the case. Child abuse and exploitation among the general population occur at alarming rates and continue to increase annually.

Individuals who are developmentally disabled are especially vulnerable to abuse because of their dependence upon others for basic needs, difficulty with recognizing dangerous and threatening situations, and their lack of knowledge regarding basic preventive procedures. Teachers and parents must educate students with developmental disabilities in appropriate social behavior and self-protection.

Current best practices in the education of individuals with developmental disabilities involve instruction in community environments in addition to the classroom (Falvey, 1989; Orlove & Sobsey, 1987). Through individualized, community based instruction, students learn functional skills in new and unfamiliar settings. Most students lack the skills necessary for interacting and participating in these environments in a safe manner. Students with developmental disabilities face a dual challenge. First, they are faced with the need to develop self-protection skills which are critical for independent functioning in the community. At the same time, these students are challenged to learn in community settings which do not provide the safety and

security found in classroom environments.

Statement of the Problem

Current statistics and research support the fact that sexual abuse and exploitation are pervasive problems affecting the developmentally disabled and the nondisabled population from childhood through adulthood. Individuals with developmental disabilities are at a higher risk for sexual abuse than their nondisabled peers because they may never have been taught to distinguish appropriate affectionate behavior from sexually exploitive behavior. This vulnerability does not decrease as persons who are developmentally disabled mature. In fact, as they spend more time in community settings, the potential for exploitation increases.

Purpose of the Study

Individuals with developmental disabilities lack appropriate social and self-protection skills which contributes to their increased vulnerability for sexual exploitation and abuse. Educators and parents must help students become safe by teaching them abuse prevention skills. Self-protection skills must be taught in a manner which is appropriate for the student's level of functioning and which allows learned skills to generalize to community environments.

The purpose of this study was to examine skill development gained through teaching a social skills and abuse prevention program to adolescents with developmental disabilities.

Research Questions

1. Given the abuse prevention curriculum, will students learn the appropriate social and self-protection skills in the classroom setting?
2. Given the abuse prevention curriculum, will students generalize social and self-protection skills to community based settings?

Definition of Terms

Abuse - The non-accidental injury of a person by another or the committing of acts that could result in injury through acts of commission or omission (Baladerian, 1990).

Abuse Prevention Self Protection Training - The development of skills an individual needs to be safe, often incorporating assertiveness training and learning about types of touch, coercion, and abuse.

Community Based Instruction - Teaching functional skills in the environment in which they naturally occur, i.e. counting money while purchasing in a store.

Developmental Disability - Significantly subaverage general intellectual functioning resulting in or associated with concurrent impairments in adaptive behavior and manifested during the developmental period (American Association on Mental Deficiency).

Exploitation - Unjust or improper use of another person for one's own profit or advantage (Webster's New Collegiate Dictionary, 1981).

Functional Skills - Skills required for an individual to participate in a variety of diverse, integrated environments, i.e. brush teeth, make a sandwich, or wash laundry.

Generalization - Transfer of knowledge or skills learned in one setting to another setting.

Integrated Environments - Environments frequented by nondisabled peers.

Social Skills - The skills necessary for appropriate communication and interaction with others.

CHAPTER II

Review of Literature

Over the past two decades, much emphasis has been placed on deinstitutionalization of persons with disabilities. Through the deinstitutionalization process we have discovered that most of these individuals were ill-prepared for life in community based settings and lacked the necessary skills to live safely in many communities (Kempton & Stiggall, 1989). As professionals and members of society in general become more accepting and aware of the needs of persons with disabilities, normalization and community integration are becoming more of a reality. Current best practices for educating students with developmental disabilities include functional, community based instruction (Falvey, 1989). Due to the fact that these students are now being prepared for life in community based settings, it is critical that educators also provide them with opportunities to develop self-protection skills. Sexual abuse and exploitation are pervasive problems affecting the developmentally disabled from childhood through adulthood (Baladerian, 1990; Blomberg, 1987; The G. Allan Roeher Institute, 1988; Ryerson, 1984). The purpose of this research was to examine the effectiveness of teaching a social skills and abuse prevention curriculum to adolescents with developmental disabilities. This review summarizes available literature involving (a) learner characteristics and appropriate teaching strategies (b) appropriate curricula and instructional environments, (c) the self-protection needs, and (d) teaching self-protection.

Learner Characteristics and Appropriate Teaching Strategies

Students with special needs have unique learning characteristics and most often are unable to learn in the traditional academic manner. These students may possess many of the following characteristics: (a) immature social behavior; (b) short

attention span; (c) distractibility; (d) impulsiveness; (e) inability to perceive, understand, or interpret what is seen or heard, though vision and hearing are within normal limits; (f) low tolerance to frustration; and (g) frequent inappropriate social behavior (Kempton, 1988). Other learner characteristics include selective attention deficits and delays in social skills, communication skills, motor skills, and cognitive skills. Students with developmental disabilities have difficulties transferring or generalizing learned skills to the environments in which they naturally occur. Therefore, instruction should take place in those natural environments (Falvey, 1989; Orlove & Sobsey, 1987).

Educators must employ systematic and appropriate instructional techniques to facilitate learning for students with these difficulties. Instruction must occur frequently enough to provide the student with repeated opportunities to develop skills. The number and duration of trials necessary for task mastery is often considerably more than would be necessary for nondisabled persons. Falvey (1989) discussed essential instructional methods for teaching students with severe handicaps. She suggested that instruction must occur in "natural environments" which refers to those environments frequented by nondisabled peers. Instruction also should incorporate the principle of "partial participation" which allows students access to environments and activities at levels in which they are able to participate.

Assessment and curricula materials must be functional and chronologically age-appropriate. The term "functional" refers to usefulness of the skill for the individual. Functional skills are essential to participation in a variety of diverse, integrated environments, for example learning to make purchases, locate items in grocery stores, and read bus schedules. Chronologically age-appropriate assessments are those assessments that involve behaviors expected of nondisabled peers of the same age within

an array of integrated community environments. Curricula and materials that are chronologically age-appropriate are those that involve the teaching of activities that are performed by nondisabled peers regardless of the student's mental age.

"Data based instruction" is a method used to monitor progress that allows for verification of students' acquisition of new skills through the use of data collection. The students must be taught to perform activities in response to the natural cues and corrections within each natural environment. This refers to responding to the cue or stimuli that naturally occur in the environment which trigger the desired response, for example wearing a coat because it is cold outside rather than because the individual was told to put on a coat. Since students with developmental disabilities often have difficulty generalizing skills, no inferences or assumptions can be made in relation to a student's ability to transfer skills from one environment to another.

Appropriate Curricula and Instructional Environments

During the late 1970's and early 1980's, education for students with severe disabilities often involved using the Developmental Model for determining curricular content. Orelove and Sobsey (1987) described this model as based on normal sequences of child development with skills taught in the same sequence as they are demonstrated by nondisabled children. Instructional objectives are determined by the items a student performs incorrectly on developmental checklists and tests. This model may have some potential advantages such as the ease of determining instructional objectives. However, there are many disadvantages to using the developmental model in curriculum development for students with severe handicaps because: (a) many targeted skills may never be learned because individuals with severe disabilities do not necessarily develop skills in a "normal" sequence; (b) the developmental model teaches isolated skills, whereas learned skills should represent skills necessary to live and work in meaningful

ways; and (c) the materials used do not relate to those materials actually utilized in natural environments (Orellove & Sobsey, 1987).

The most natural environments for many skills lie outside the school. Therefore, the instructional day may be spent in home, work, and community settings. This is frequently referred to as community based instruction. Community based instruction resolves most of the disadvantages of the developmental approach. Specific skills to be learned are highly individualized and directly relevant to each student's life skill needs. Instead of spending time on "readiness" activities, instruction focuses on critical skills needed for later life. Skill transfer is enhanced due to the relevant nature of activities and instruction within the community based settings. Instructional environments may include stores, restaurants, shopping malls, theaters, sporting events, and work environments. Prior to the deinstitutionalization movement, students encountered fewer of these environments. Through community based instruction and an increase in public acceptance, students currently frequent a variety of environments on a more consistent basis.

Nondisabled students have an expanded opportunity for socialization and learning in a wider array of environments than their peers with disabilities. This is especially significant in the development of social and self-protection skills. Thornburg (1981) described a study in which he surveyed all of the 1152 students in a midwestern high school to determine from whom they got information about sex, age at which they first began receiving such information, and the accuracy of the information obtained. Students completed a three part questionnaire which included identifying mother, father, peers, literature, schools, physician, minister, or experience, as sources from whom they first learned of a variety of concepts involved in sex education. The age at which students first learned of each concept was recorded in the second part of the

questionnaire. The third part requested students to write a definition of each term they indicated they knew.

According to predetermined criteria, the researcher ranked the accuracy of the responses on a scale ranging from highly accurate, to accurate, to distorted, to highly distorted. Results indicated peers as the single, most often cited, 37.1%, and most accurate source of information on sexual issues. Schools were reported as the primary source of first sex information for 15.2% of those students surveyed. Parents were cited as primary source for 19.6% of students surveyed with mother giving information 17.4% and father 2.2%. Information concerning conception and menstruation accounts for half of the total information provided by the mother.

For a variety of reasons, it is appropriate to teach social-sexual education for students with developmental disabilities in school settings. First, students with developmental disabilities frequently have a smaller number of peers to obtain information from and those peers often lack accurate information as well. Second, school programs are in a position to provide large numbers of students with appropriate presentations of information. Third, the developmentally disabled student is often educated in the public school system until the age of 22. The extended time spent in school supports the need for teaching social-sexual education within the school setting to maximize learning. Fourth, for various reasons comprehensive social-sexual information is most often not taught in the home. Although instruction must be made available to students within school settings, the greatest success comes from the cooperation of home, school, and other professionals in contact with the student who is developmentally disabled so that every opportunity is utilized to reinforce essential learning (Kempton & Stiggall, 1989).

Self-Protection Needs

As students with developmental disabilities experience new environments and opportunities, they face new challenges. A short time ago, students had little or no opportunity to participate in activities which promote independence. Through individualized, community based instruction, students learn new skills such as independently crossing streets, using public transit services, and making purchases in community settings. Students must learn to participate and interact within these environments in a safe manner. Personal safety in community environments is one of the most significant new challenges these students face.

Individuals with developmental disabilities are vulnerable to abuse because these persons often have: (a) poor muscle tone which inhibits defense, (b) difficulty with recognizing dangerous and threatening situations, (c) limited cognitive abilities, (d) a smaller repertoire of life experiences, and (e) an inability to make realistic choices (Johnson, 1990). Winifred Kempton (1973) described additional characteristics related to abuse. She states that these students: (a) often respond disproportionately to attention and give attention indiscriminately; (b) often have poor judgement and deficient reasoning ability; (c) often cannot explain feelings or experiences; (d) do not have access to accurate information given by peers, may not have friends or friends may have no knowledge to offer; and (e) often lack ability to distinguish reality from unreality, more likely to believe myths or untrue stories and are more frightened and confused by them. In addition, professionals and parents often do not encourage persons with disabilities to develop decision making skills, therefore socializing them to be dependent. This may result in passivity, becoming overeager to please, and agreeing to do almost anything another person requests. Zirpoli (1986) explained that this vulnerability does not decrease as the person with developmental disabilities matures.

Since 1982, The National Committee for Prevention of Child Abuse (NCPA) has conducted an annual, national survey to determine the number and characteristics of child abuse reports for the purpose of monitoring trends. Each state has a Federal Government liaison officer for child abuse and neglect who is contacted by telephone and asked to complete the survey. Of the 50 state representatives contacted, 49 knew or were able to project child abuse reporting statistics for 1989. All state representatives responded to questions regarding their reporting procedures and child welfare practices. The validity of the results of this survey are weak because of variations in definitions of abuse and procedures for substantiation. Substantiation generally refers to those cases identified as having sufficient proof of maltreatment to justify more intrusive state intervention into the family. In the 1990 National Committee for Prevention of Child Abuse report, Daro and Mitchel (1990) stated that, "Based upon reporting data collected from 48 states and the District of Columbia, over 2.4 million reports were filed in 1989, approximately 10% more than had been recorded in 1988" (p. 2). Finkelhor (cited in Ryerson & Sundem, 1981) estimated that 1 in every 5 females and 1 in every 10 male children will be sexually abused before age 18. In an update paper, Baladerian (1990) described the estimates of the incidence of child sexual abuse among the general population to be approximately 1 in 4 females and 1 in 5 males will experience some type of sexual abuse before the age of 18. These child abuse reports, however, refer to the general population and do not specifically include persons with developmental disabilities.

Persons with disabilities are more vulnerable to abuse than their nondisabled peers (Baladerian, 1990; Johnson, 1990; The G. Allan Roeher Institute, 1988; Ryerson & Sundem, 1981). Ryerson and Sundem (1981) described research in the state of Washington by Jones, Shelan, and Buckman (1980) which indicated that the risk of

physical and sexual abuse for children with mental retardation was 3 to 10 times higher than that for nonretarded children. Availability of statistics on the incidence of sexual abuse for persons with developmental disabilities is limited. According to data compiled by the Seattle Rape Relief and the Sexual Assault Center from 1977 through 1983, there were over 700 reported cases of sexual abuse of children and adults with developmental disabilities residing in the Seattle-King County Area (Ryerson, 1984). Estimates suggest that only 20% of all adult rape cases, of both disabled and nondisabled persons are actually reported (Ryerson & Sundem, 1981). The actual number of abuse cases far exceeds those that are actually reported. Blomberg (1987) stated that recent estimates from The California Committee on Sexuality, Advocating For Persons with Developmental Disabilities indicated that 90% of individuals with developmental disabilities residing in California have been or will become victims of sexual abuse, assault, or exploitation during their lifetime. There is no reason to believe the incidence rate is very different in other parts of the country.

Teaching Self-Protection

Students must learn that one's body belongs to oneself and that every person has the right to choose not to be touched by someone else. Many children and adults with disabilities have never been taught to distinguish appropriate affectionate behavior from sexually exploitive behavior and can easily be convinced that touching is "secret" or "special" (Ryerson, 1984). Dreyer and Haseltine (1986) developed a sexual abuse curriculum for persons with developmental disabilities entitled The Woodrow Project. The curricular content is based on the concept that students must be taught self-protection skills in order to decrease their vulnerability. Information concerning inappropriate sexual behavior and techniques for self-protection must be presented in a manner appropriate for students' levels of functioning.

Components of The Woodrow Project curriculum include: (a) identification of specific body parts and self awareness; (b) identification of "OK" and "NOT OK" touches; (c) application of the three part skill sequence, say "NO!", get away, and tell someone; (d) assertiveness training; and (e) identification of who can be involved in support systems or whom to tell. Haseltine and Miltenberger (1990) evaluated the curriculum with eight adults with mild developmental disabilities. The researchers presented the curriculum in a small group format across nine 25-30 minute sessions. Self-protection skills were assessed in simulations involving solicitations from adults. Results indicated five of the eight subjects achieved criterion performance following self-protection training. Two subjects required further training beyond the classroom training procedures to achieve criterion. Although the evaluation results seem positive, the evaluation was not designed for adolescents with more severe developmental disabilities.

In addition to the components utilized in the Woodrow Project curriculum, curricular content must go beyond the over-simplified emphasis in many public schools of "Don't talk to strangers." Ryerson and Sundem (1981) reported that according to data of the Seattle Rape Relief project, an alarming 99% of the sexual abusers of handicapped persons were people well known to the victim. Hard and Plumb (cited in "Documenting," 1987) validated this finding in their research involving the case records of 95 adults with developmental disabilities enrolled at a work activity center between 1975 and 1986. The researchers interviewed 65 of the individuals using a questionnaire developed to obtain more detailed information. The results revealed that 83% of the females and 32% of the males had experienced sexual abuse, with 99% of the abuse perpetrated by someone known to the victim. This suggests that an important focus must be to educate students about inappropriate touching by all kinds of adults including

relatives. Only 64% of the victimized women and 40% of the victimized men reported the incidents. It is important to note that of those who reported the abuse, 55% of the females were not believed, compared to the fact that 100% of the males were believed. Fewer than 30% of the study sample had received sex education of any kind prior to entering the work activity center. An increase in education and skill level will increase the chances of persons with developmental disabilities being credible witnesses.

Taylor (1985) reported an increase in programs designed to teach issues related to sexuality to persons with disabilities. A recent study in North Carolina surveyed 32 county agencies that serve special populations. Results showed that 61% of these agencies had at least some social-sexual education program in operation. Information is available from a variety of programs concerning the content of sexuality and abuse prevention curricula (Dreyer & Haseltine, 1986; Kempton, 1988; Kempton & Stiggall, 1989). Information on the effectiveness of such programs, however, as well as on skill acquisition and generalization capabilities of participants is limited.

Blomberg (1987) conducted a study designed to reduce the risk of sexual exploitation of adults with mild and moderate mental retardation. The 72 subjects (35 women, 37 men) were regional center clients and had been referred by their case workers to a 16 week Planned Parenthood Prevention of Sexual Exploitation Training Program. The researcher determined experimental group (38 members) or control group (34 members) placement by geographical location. The measurement instrument used for both the pretest and posttest was constructed by the evaluator and included an objective test, projective questions using illustrations, and projective questions using anatomically correct dolls. The treatment consisted of a 16 week training program on topics such as social-sexual skills, self-protection and assertiveness skills. Individuals in the experimental group showed significant gains from pretest to posttest in

comparison with the control group. This research supports the concept that individuals with disabilities, including moderate mental retardation, are able to acquire skills in the area of social-sexual education.

Summary

The literature and current statistics reveal the alarming prevalence of sexual abuse among the population of persons with developmental disabilities (Baladerian, 1990; Blomberg, 1987; The G. Allan Roehrer Institute, 1988; Ryerson, 1984). For a variety of reasons, the school setting is an appropriate place for teaching abuse prevention and social-sexual education. Although there are curricula available for teaching these concepts, there is little information in the literature on the generalization and maintenance of the acquired social-sexual skills. There does not seem to be current research data available on acquisition of abuse prevention skills or generalizability of these skills for adolescents with developmental disabilities. The purpose of this study, therefore, was to examine the results of teaching a social skills and abuse prevention curriculum to adolescents diagnosed as developmentally disabled. The research focused on determining whether or not students learned the appropriate social and self-protection skills in the classroom setting, and if these skills generalized to community environments.

CHAPTER III

Methodology

The vulnerability of persons with disabilities places them at high risk for becoming sexually abused or exploited. Current statistics and research support the conclusion that sexual abuse and exploitation are pervasive problems affecting individuals with developmental disabilities from childhood to adulthood. Opportunities to gain information about abuse prevention and social skill development are critical for all students. Students who are developmentally disabled need systematic instruction to learn skills and generalize them to home and community settings. The purpose of this study was to examine skill development gained through teaching a social skills and abuse prevention curriculum to adolescents with developmental disabilities. The following research questions were addressed in this study:

1. Given the abuse prevention curriculum, will students learn the appropriate social and self-protection skills in the classroom setting?
2. Given the abuse prevention curriculum, will students generalize social and self-protection skills to community based settings?

Subjects

The four subjects in this study were placed in classrooms based primarily on educational needs. All subjects attended a private, nonprofit school for children with developmental disabilities and were diagnosed accordingly.

Subject A: This student is a fifteen year old, Hispanic male. He resides in a residential group home affiliated with the school he attends, yet spends one overnight visit most weekends with his family. He is currently not taking any medication. Socioeconomic

status of this family is at the middle income level. Subject A is primarily independent in the personal maintenance area, including independent dressing, eating, and toileting. He is able to complete vocational tasks in community-based settings with ongoing supervision. Depending upon the task, supervision may be minimal. Academically related skills include an understanding of some number concepts, such as numeral recognition, counting, and one-to-one correspondence. Student A does not demonstrate skills in operations of addition, subtraction, multiplication, or division. Subject A has a sight word vocabulary of approximately 70-100 words consisting primarily of functional or commonly used words, for example grocery item words, simple direction words, color words and number words. His primary means of communication is verbal, however prompting is often necessary for assistance in speaking more slowly and clearly, for assistance with word recall, or assistance in appropriate communication of needs and desires. Behavioral difficulties include episodes of silly, immature behavior, verbal outbursts including swearing occasionally combined with aggressive outbursts resulting in property destruction or self-injury.

Subject B: This student is a thirteen year old, Hispanic male who resides with his family. He is currently not taking any medication. Socioeconomic status of this family is at the middle income level. Subject B requires frequent prompting for initiation and thoroughness in completing personal maintenance tasks. He independently cares for toileting needs and is able to prepare simple meals, such as sandwiches and prepared foods using stove or microwave with minimal assistance. Community vocational tasks are completed with continuous supervision, primarily for remaining on task. This student writes his first and last name in upper case letters using a written model. He consistently identifies his name within a group of other words, yet has a limited sight word vocabulary consisting primarily of those words accompanied with symbols, for

example the words and symbols for "men" and "women" on restroom doors, and the word "stop" on a stop sign. Consistently maintaining appropriate social interactions is challenging for Subject B. He often approaches unfamiliar persons to initiate conversation and conversational topics are frequently inappropriate. Distinguishing between reality and fantasy is quite difficult, therefore he frequently reports inaccurate information. Other behavioral difficulties include taking items that do not belong to him, inappropriate verbalizations including swearing, occasionally combined with physically aggressive or destructive episodes.

Subject C: This student is a fourteen year old, Puerto Rican-American male who resides with his family. He currently is on medication for behavioral difficulties.

Socioeconomic status of this family is at the low income level. Subject C is independent in terms of dressing, toileting, and eating. He prepares simple meals using a microwave, stove, and oven with minimal assistance primarily for appropriate cooking times. Participation in community environments, especially new environments seems to be fear provoking, therefore participation is inconsistent due to occasionally refusing to attend. Subject C reads with comprehension at approximately a 2nd grade level. Mathematic skills include counting, numeral recognition, one-to-one correspondence, and calculator skills. He is unable to perform basic numeric operations of addition, subtraction, multiplication, or division. Writing is legible utilizing upper and lower case letters. This student is quite social and has many conversational skills. However, conversational topics are often inappropriate and dominated by perseverative statements or questions. Behavioral difficulties include obsessive/compulsive behaviors, episodes of extreme silliness, often in combination with periods of non-compliance, or physically aggressive or destructive outbursts.

Subject D: This student is a thirteen year old, Caucasian male who resides with his family. He is currently not taking any medication. Socioeconomic status of this family is at the upper-middle income area. Subject D is primarily independent in caring for his personal needs including dressing, grooming, and toileting. Assistance is most often necessary for initiation and thoroughness of tasks. He is able to prepare a variety of sandwiches, simple meals and snacks with little prompting. He is able to write his first and last name in all capital letters with slight physical assistance and a written model. Numeral recognition, counting skills, and word identification is limited. Participation in community environments is quite reinforcing for this subject. However due to his social nature, he frequently initiates interactions with unfamiliar people. Other social skills needs include, choosing appropriate conversation topics, remaining on topic, and word recall. Subject D exhibits inappropriate behaviors including socially offensive behaviors, inappropriate verbalizations including swearing, and occasional aggressive and destructive behaviors.

Research Design

This research project can be described as a quasi-experimental, case study. The design includes baseline, treatment, withdrawal of treatment, and delayed posttesting (ABAC) (McMillan & Schumacher, 1989). Figure 1 illustrates the design sequence of delivery.

Figure 1

<u>Research Design</u>											
<u>Classroom Tests</u>	Pretest	I	II	III	IV	V	VI	VII	VIII		Posttest
<u>Weeks</u>	1	2	3	4	5	6	7	8	9	10	11
<u>Community Tests</u>			I			II		III			Posttest

The design utilizes both classroom and community based testing. Parental permission for participation of each student was obtained prior to onset of the study. The researcher developed a classroom based testing instrument covering curricular content as well as a field based assessment. Prior to implementation, the classroom assessment instrument was evaluated by a panel of three experts in the fields of special and social-sexual education. Areas of expertise represented include severely handicapped, sensory impaired, and social-sexual education. One panel member was a co-author of the social skills and abuse prevention curriculum used in the study. All panel members agreed the instrument was appropriate for the target population. Pilot testing of the pretest was not an option due to limited subject availability. Therefore, slight alterations in scoring procedures were necessary after analysis of audiotape recordings of student pretest responses.

Data Collection

The classroom based pretesting consisted of a teacher made test covering curriculum content and containing 20 questions. The test items were presented to the students in an interview format (see Appendices A and B). Items include questions such as: "What would you do if a stranger wanted you to take a walk with him or her?" and "What would you do if someone you knew wanted to hug you and you did not want him or her to?" Students responded orally to the open-ended questions. If a student was non-responsive or an answer indicated he did not understand a question, the researcher repeated the question, asked for more information, or asked for clarification. All classroom pretest and posttest sessions were audiotaped to allow for further analysis of responses and comparisons from pretest to posttest. The classroom based interview was conducted by the teacher on an individual basis during the school day.

The baseline community based testing occurred in the environment surrounding the school, including places frequently visited by the student such as grocery stores and restaurants. This testing consisted of real life situations in which an unknown person acting as a perpetrator approached the student in a community environment. The stranger offered something generally reinforcing to adolescents, such as money or seeing a new car, or pet, in an attempt to persuade the student to come with him or her. This provided students with the opportunity to demonstrate appropriate self-protection skills.

Students scored credit or no credit on each of the six skills measured during the community assessment. Therefore, possible scores range from 0 to 6. The community based skills to be generalized were: 1. Not talk to an unfamiliar person. The student must say "STOP" or "NO" immediately to be considered an appropriate response. 2. When the stranger encourages the student to come with him, the student must go away immediately to find a person to report the incident to. No credit was given if the student finished the task he was working on before going away. 3. The student does not tell his name to stranger upon request. 4. Given a variety of reasons to encourage the student to come with a stranger, the student does not go with stranger. 5. The student gives appropriate responses to inappropriate touching of holding hand, arm around student, or hug by unfamiliar person. Appropriate responses include saying "STOP" or "NO", moving away, or not being close enough to allow the stranger to touch. 6. After being approached by a stranger, the student tells a "safe person" about the incident. Credit was given for student reporting to another "safe person" after being prompted to tell someone during the teaching sessions. Students who reported that an incident had occurred were given credit, even if the information reported was exaggerated. Reporting untrue information, such as the stranger being a friend, was not considered a correct response.

Each enactment provided the opportunity for all skills to be demonstrated. The enactments were audiorecorded for further analysis of responses. In preparation for the testing, the persons acting as perpetrators were given scripts of the enactments and were trained by the teacher without student knowledge (see Appendix C). The "perpetrators/strangers" could add to the script words of encouragement such as "come on," "it will be fun" and "please." The volunteers who acted as strangers were representative of individuals students are likely to encounter in their day to day interactions in regard to age, gender, and general character roles (professional adult, student, casually dressed, etc.). Teacher and "stranger" observations of individual student responses were recorded in narrative format (see Appendix D).

Classroom Treatment

The treatment consisted of presenting the curriculum in group format for a period of seven weeks. Instructional sessions taught by the teacher occurred three times per week for thirty minutes per session (see Appendix E). Each student was assessed weekly by completing a teacher made test consisting of three to twelve questions. These questions measured acquisition of weekly lesson content (see Appendix F). Weekly assessment was conducted individually by the teacher.

Community Treatment

Students participated in community based enactments as the community based training portion every two weeks in the same fashion as was described for the community based pretesting. An enactment and student response was discussed with the student utilizing verbal feedback, modeling, role playing, and reinforcement. If a student responded appropriately to the stranger during the enactment, the teacher verbally reinforced appropriate behavior. If a student responded inappropriately, the teacher gave immediate verbal feedback, such as "Are you going to go with this person?"

"Do you know him?" "Is he a stranger?" The teacher provided modeling and prompting to assist the student in responding correctly; "A stranger is in the red circle." "You do not touch or go with strangers and they do not touch or go with you." "Let's try this again." Next, the enactment was repeated and the teacher assisted the student in role playing the appropriate response. So the stranger's anonymity could be maintained, he or she was not present during role playing of correct responses. The student was then prompted by the researcher to report the incident to a safe person.

Withdrawal of Treatment, Delayed Posttest

At the completion of the eighth week of lessons, the treatment was withdrawn and the final community and classroom assessments were completed. Delayed posttesting consisted of an exact duplication of the classroom and community based pretesting described in the data collection section. The delayed posttesting occurred three weeks after completion of the treatment.

Curriculum Description

The curriculum that comprised the treatment was Circles, programs one and two in the Circles series, published by James Stanfield and Co. The Circles programs are based upon proven special education techniques and principles of behavioral psychology and were developed for students with mild to severe levels of mental retardation. This curriculum is particularly appropriate for individuals with developmental disabilities because it uses the three modalities of verbal, visual, and gross motor to associate specific behaviors to areas of general information.

The Circles programs use six colored concentric circles to teach social distance and categorize behaviors commonly associated with differing degrees of intimacy. The Self is the center circle and each different colored circle represents behaviors and levels of familiarity appropriate to the distance from the center or self. For example, the Blue

Hug Circle contains persons you could hug and kiss, such as mother, father, boyfriend or girlfriend. A neighbor may be categorized in the Orange Wave Circle or perhaps the Yellow Handshake Circle if they are more familiar. The following is a description of each circle from the center, most familiar, outward to least familiar:

PURPLE PRIVATE CIRCLE - This is the center of the six concentric circles and contains only oneself. Basic concepts include:

- You are the most important person in your world. You are the center of your circles.
- No one touches you unless you want to be touched.
- You do not touch anyone unless she/he wants to be touched.

BLUE HUG CIRCLE - This circle surrounds the purple and includes those persons closest to the self in a physical and emotional sense. Basic concepts include:

- There are very few people who hug you, such as your mother/father, boyfriend/girlfriend.

GREEN BIG/FAR AWAY HUG CIRCLE - This circle surrounds the blue and generally includes less physical contact of shorter duration than in the blue hug circle. Basic concepts include:

- There are a few more people to whom you give far away hugs, such as your best friends on special occasions.

YELLOW HANDSHAKE CIRCLE - This circle surrounds the green and includes acquaintances. There is little emotional attachment and only limited physical contact. Basic concepts include:

- You shake hands with acquaintances once you know their names.

ORANGE WAVE CIRCLE - This circle surrounds the yellow and typically includes casual

acquaintances, neighbors and children. No physical or emotional closeness is involved.

Basic concepts include:

- You wave to children when you know their names.
- You wave to your friends when you see them if it is not convenient to be closer to them.
- You wave to your friends when it would be wrong to interrupt them, such as at work.

RED STRANGER SPACE - This circle surrounds the orange and includes two categories, the community helper and strangers. The community helper is not known on a personal basis. Interaction is not emotional and relates directly to the job of the community helper. Strangers are unknown and there is no cause for interaction or touch. Basic concepts include:

- You talk to community helpers about business.
- You do not touch strangers.
- Strangers do not touch you.

For Circle relationships to change, both people have to agree to the change.

Teaching methodologies and materials included the use of slides which illustrate relationships and portray common community experiences that students must learn to deal with effectively. Audio tapes and written scripts are utilized in correspondence with the slides. A life-size Circle Floor Graph and photographs of characters in slides are used in role-playing and practice activities. Behaviors are taught through several different teaching modalities: verbal (naming the Circles), modeling (seeing the slides), motoric (learning the signs), and visual (color coding the Circles). The slides utilized in Circles: Stop Abuse consist of twelve stories told by students which dramatize situations where another person exhibits behavior which the student feels is

exploitative. The stories assist in illustrating in a non-threatening manner that abuse occurs when there is a non-mutual change in a relationship by force, threat, trickery, and/or with secrecy. The Circles: Stop Abuse program specifically describes under what conditions an event should be reported. This study utilized the alternative strategy offered by the authors describing that under any condition one should always tell his or her safe person of an incident. The Circles: Intimacy and Relationships provides a framework for establishing relationships. Circles: Stop Abuse concentrates on teaching persons with developmental disabilities to recognize and consequently avoid sexually threatening or abusive situations.

Data Analysis

Analysis of results consisted of examining changes in data collected during baseline, treatment, and delayed posttest phases. Classroom and community based pretest and posttest results, as well as responses to community based enactments and weekly content assessments, are presented in graphic, numeric, and narrative formats.

Strengths and Weaknesses in Design

The practice effect of the written pretest possibly threatened the internal validity of the study. The classroom based pretest may have also provided recall of prior learning which may have affected community based pretest results. The population validity of this study, as is the case for most studies involving persons with disabilities, is an area of difficulty. The ability to generalize findings to the population at large is limited, since each student is unique in his or her ability to attend to tasks, comprehend information, and transfer knowledge to different environments. Due to the utilization of both classroom and community environments, the ecological validity was strengthened. Efforts to strengthen the external validity of operations were made in the community enactments by varying age, gender, character type of persons acting as strangers.

CHAPTER IV

Results

The purpose of this study was to examine the results of teaching a social skills and abuse prevention curriculum to adolescents with developmental disabilities. The research focused on determining if students learned the appropriate social and self-protection skills in the classroom setting and if these skills generalized to community environments. Results from both classroom based testing and community enactments are presented for each subject. Data which summarize group performance are also presented for the classroom and community environments.

Subject A

This student utilizes verbal communication and independently cares for most personal maintenance tasks. Subject A has a functional sight word vocabulary of approximately 70-100 words. He demonstrates an understanding of one to one correspondence, identifies numerals to 100, and counts objects to approximately 50. Behavioral difficulties consist primarily of immature and verbally abusive behavior.

Subject A completed the classroom based pretest and posttest covering curriculum content. The results presented show the percentage of correct responses out of twenty possible. During the intervention phase, Subject A completed assessments measuring weekly lesson content once per week for eight weeks.

Figure 2 illustrates Subject A's performance on assessments conducted in the classroom setting.

Figure 2

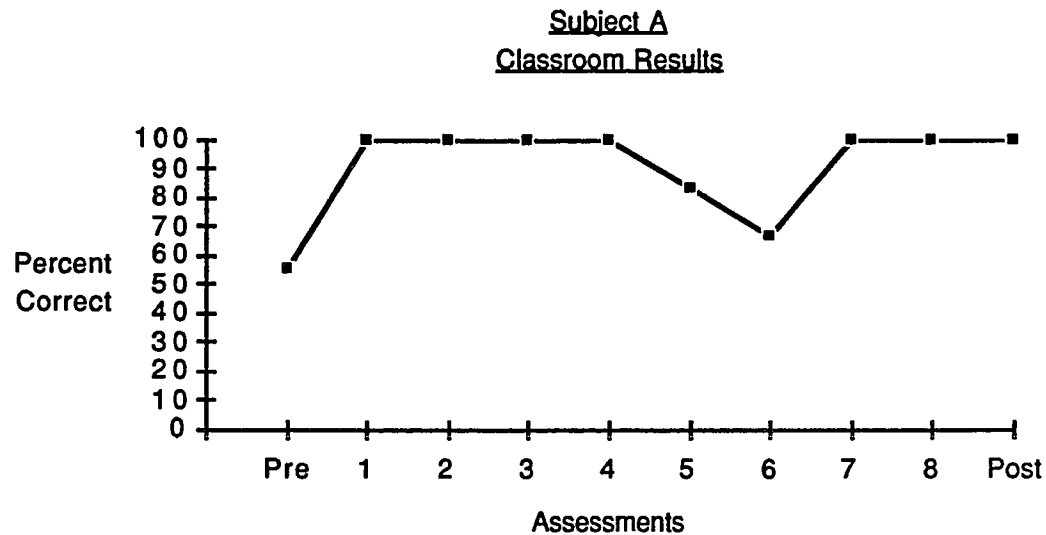


Figure 2. Classroom results (Pre = pretest, 1-8 = weekly tests, Post = posttest).

Pretest results indicate Subject A correctly responded 55% of opportunities during the classroom pretest. Scores during the intervention phase ranged from 67% to 100%. Subject A scored 100% on the classroom posttest.

To measure the generalization of skills learned in classroom teaching sessions, the community based pretest occurred in the first week of the study. The delayed posttest took place during the 11th week. Figure 3 illustrates the percentage of appropriate behaviors demonstrated by Subject A during the community based pretest and posttest as well as during three community training sessions. Subjects received credit for the demonstrating appropriate behaviors of: (a) not talking to the stranger, (b) going away from the stranger immediately, (c) not telling his name, (d) not going with the stranger, (e) not touching or being touched by the stranger, and (f) telling someone about the incident. Prior to the community based pretest, the researcher did not realize the importance of withholding one's name as an indicator of self-protection behavior. Therefore, student performance on the indicator "name" was unable to be

measured during the pretest.

Figure 3

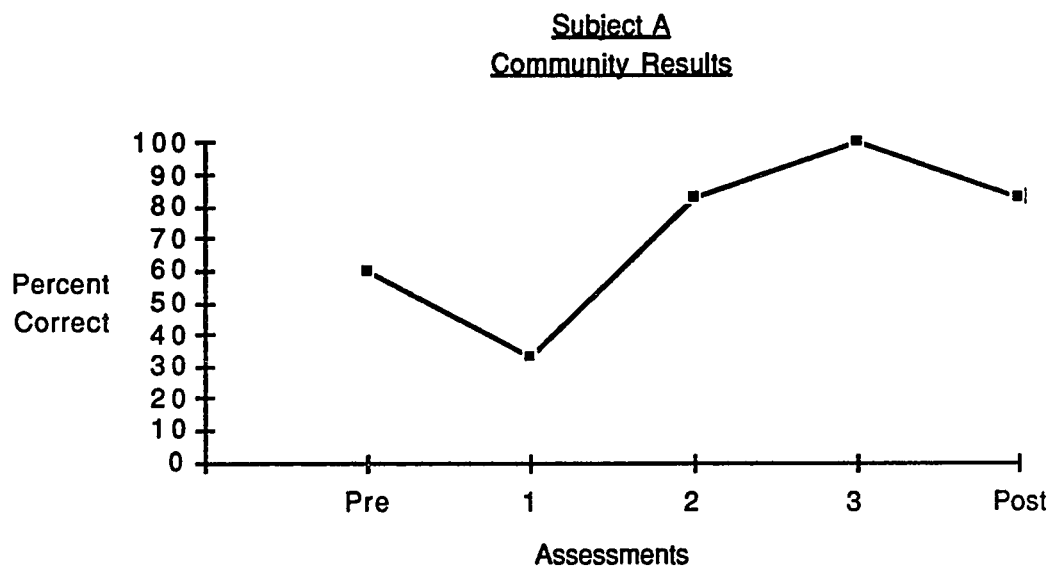


Figure 3. Community results (Pre = pretest, 1-3 = training, Post = posttest).

Data indicate Subject A scored 60% on the community pretest. Community training session scores consistently increased from 33% to 100%. Subject A demonstrated 83% of appropriate behaviors on the community posttest.

Subject B

Subject B requires assistance in completing personal maintenance and domestic tasks. Using a model, he writes his first and last name in uppercase letters. Skills in word recognition and number concepts are limited. Subject B communicates verbally needing assistance in maintaining appropriate social interactions with others. Behavioral difficulties consist mainly of reporting inaccurate information, stealing, and verbal abuse.

The pretest and posttest scores presented for Subject B represent the percentage of correct responses out of twenty. The results of Subject B's performance on the eight weekly assessments measuring lesson content are presented.

Figure 4 illustrates Subject B's performance on assessments conducted in the classroom setting.

Figure 4

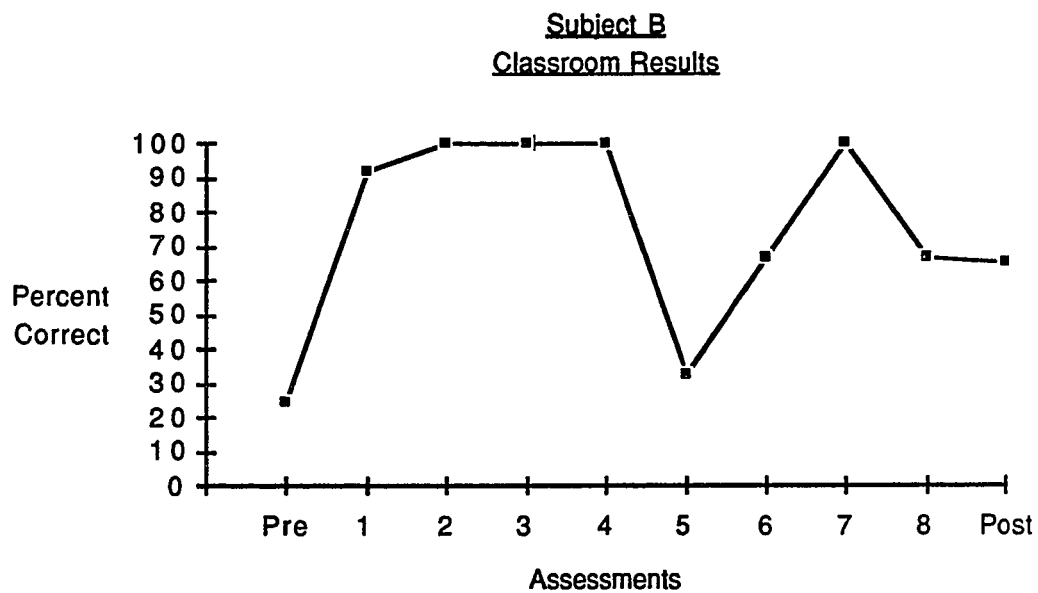


Figure 4. Classroom results (Pre = pretest, 1-8 = weekly tests, Post = posttest).

Results indicate Subject B correctly responded to 25% of the items on the classroom pretest. Scores on the weekly assessments ranged from 33% to 100% correct. Posttest results indicate Subject B earned a score of 65%.

Figure 5 illustrates the percentage of appropriate behaviors demonstrated by Subject B during the community based assessments

Figure 5

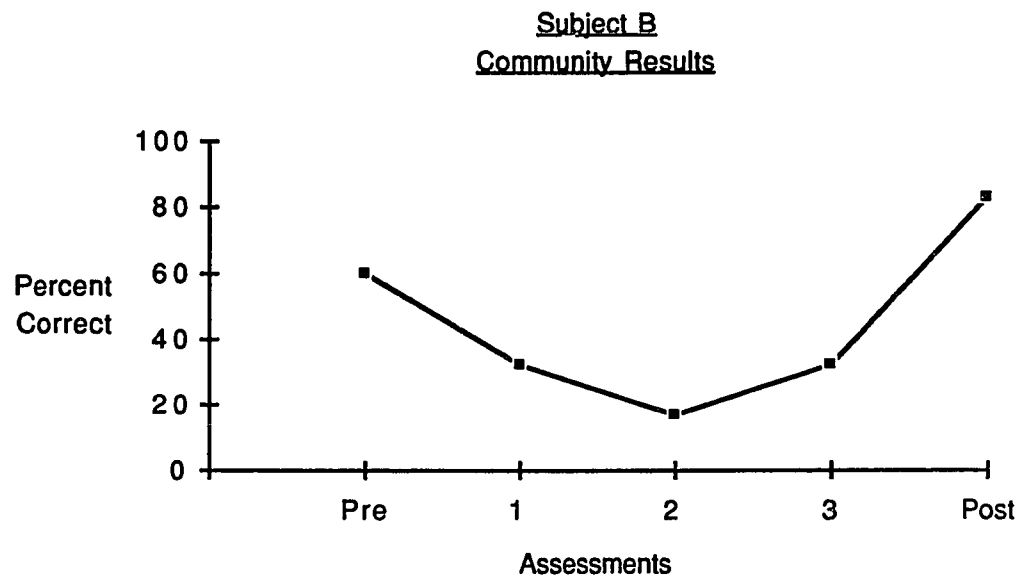


Figure 5. Community results (Pre = pretest, 1-3 = training, Post = posttest).

Results indicate Subject B correctly responded to 60% of the indicators during the community based pretest. Performance during the intervention phase ranges from 17% to 33%. Results indicate Subject B scored 83% on the community based posttest.

Subject C

This student independently cares for most personal needs, such as dressing, toileting, and simple meal preparation. He reads at approximately a 2nd grade level and understands some number concepts. Communication is primarily verbal. Subject C takes medication for behavioral difficulties including of obsessive/compulsive behaviors, extreme silliness, and noncompliance.

Subject C completed the classroom based pretest and posttest covering curriculum content. The results presented represent the percentage of correct responses out of twenty. During the intervention phase, Subject C completed assessments measuring weekly lesson content once per week for eight weeks.

Figure 6 illustrates Subject C's performance on assessments conducted in the classroom setting.

Figure 6

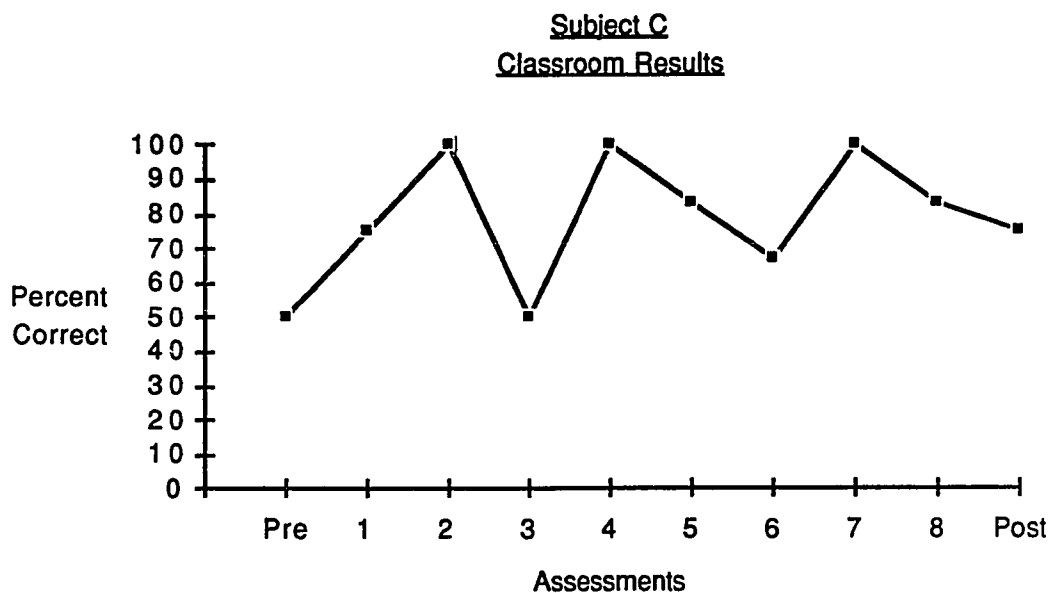


Figure 6. Classroom results (Pre = pretest, 1-8 = weekly tests, Post = posttest).

Data indicate Subject C scored 50% on the classroom based pretest. Weekly assessment scores ranged from 50% to 100%. Posttest results suggest Subject C earned a score of 75%.

Figure 7 represents the percentage of appropriate behaviors demonstrated by Subject C during pretest, intervention, and posttest phases.

Figure 7

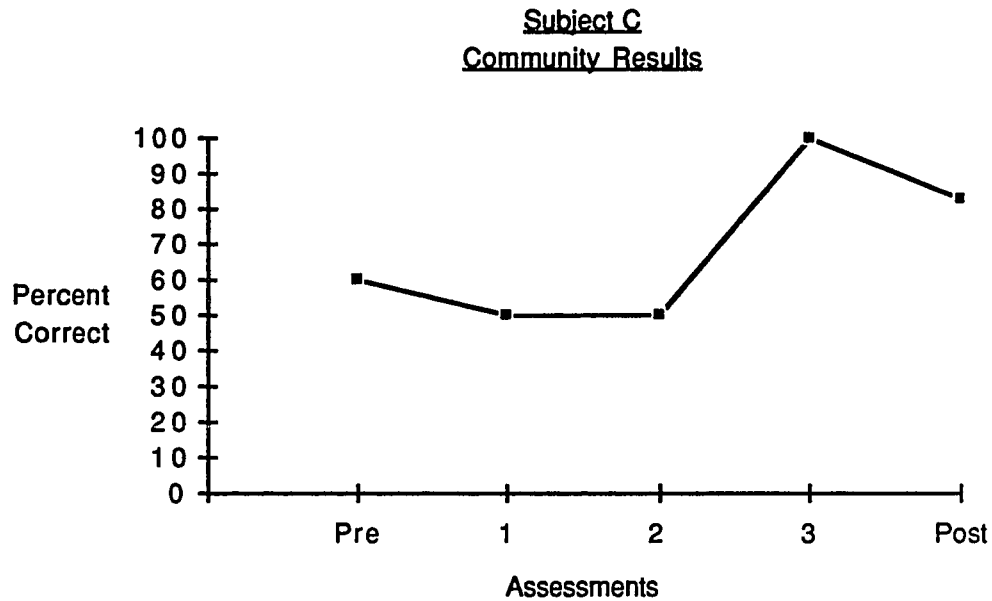


Figure 7. Community results (Pre = pretest, 1-3 = training, Post = posttest).

According to pretest results, Subject C scored 60% on the community based pretest. Community training session scores ranged from 50% to 100%. Subject C demonstrated 83% of appropriate behaviors on the community posttest.

Subject D

Subject D independently cares for most of personal maintenance needs with assistance primarily for thoroughness. He is able to write his name with a model and slight physical assistance. Numeral recognition, counting, and word identification skills are limited. This student verbally communicates and is quite social. He exhibits some inappropriate behaviors including those which are socially offensive and verbally abusive.

Figure 8 illustrates the performance of Subject D on classroom based assessments.

Figure 8

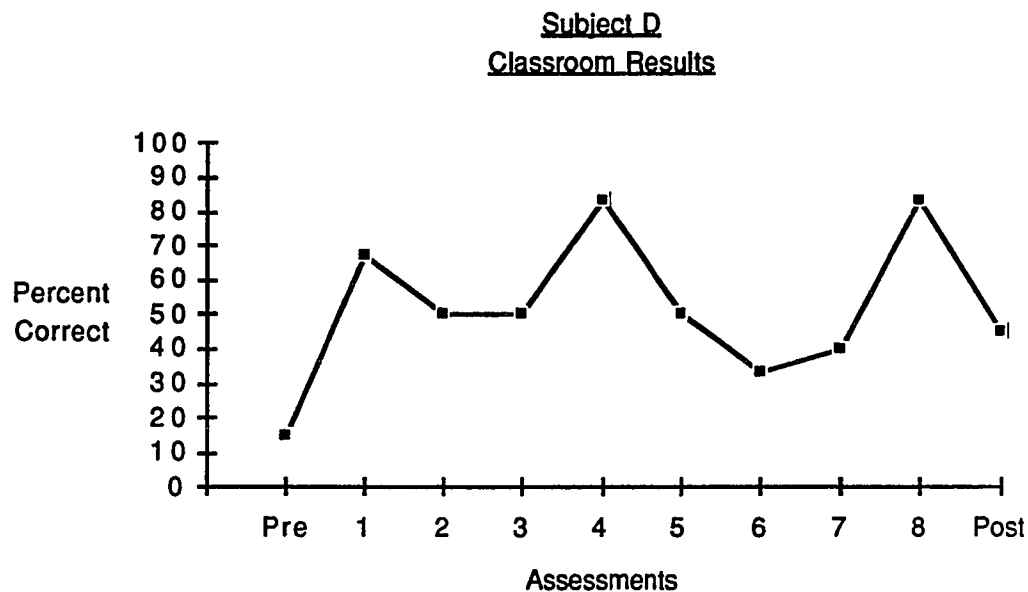


Figure 8. Classroom results (Pre = pretest, 1-8 = weekly tests, Post = posttest).

Subject D's performance resulted in a score of 15% on the classroom pretest. Scores during the intervention phase ranged from 33% to 83%. Subject D scored 45% on the classroom based posttest.

Subject D was absent during the third teaching session, therefore data is only presented for pretest, two teaching sessions and posttest. Figure 9 illustrates Subject D's performance during these community based assessments.

Figure 9

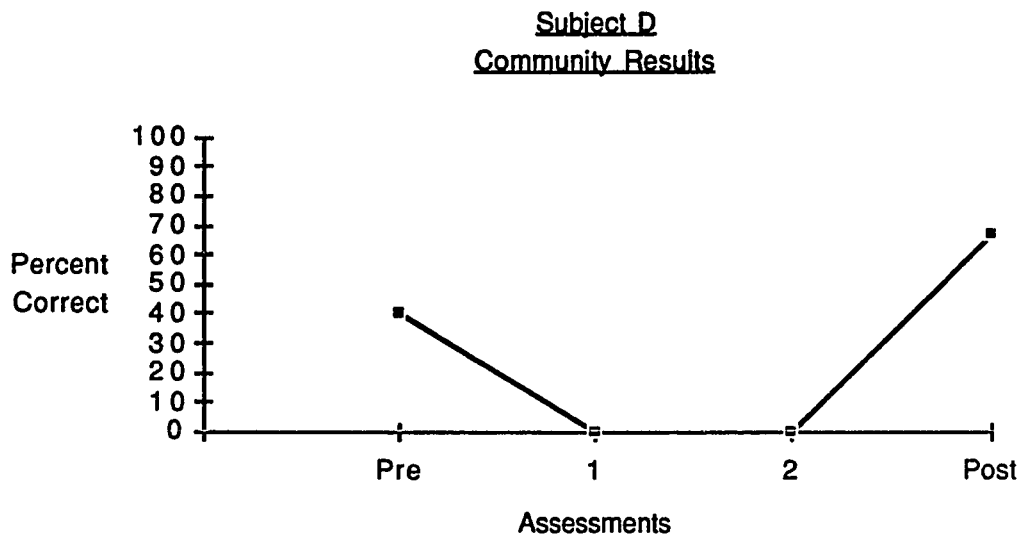


Figure 9. Community results (Pre = pretest, 1-2 = training, Post = posttest).

Pretest data suggest Subject D scored 40% on the community based pretest. Subject D scored 0% on the two community training sessions he participated in. On the community posttest, subject D earned a score of 67%.

Group Classroom Based Testing Results

The four subjects completed the classroom based pretest and posttest covering curriculum content. The results presented show the percentage of correct responses out of twenty possible for each student. All four students scores increased from pretest to posttest with an average increase of 35%.

Table 1
Scores on Classroom Pretest and Posttest

Subject	Pretest	Posttest	Increase
A	55%	100%	45%
B	25%	65%	40%
C	50%	75%	25%
D	<u>15%</u>	<u>45%</u>	<u>30%</u>
Average	36%	71%	35%

Group Community Enactment Results

The community based pretest and the delayed posttest were conducted to measure the generalization of skills learned in classroom teaching sessions. Table 2 illustrates the percentage of appropriate behaviors demonstrated by each student during the community based pretest and posttest phases. Subjects received credit for demonstrating appropriate behavior in the areas of: (a) talk, (b) go away, (c) name, (d) go with, (e) touch, and (f) tell. Student performance on the indicator "name" was unable to be measured during the pretest. All four students scores increased from pretest to posttest with a mean score increase of 24%.

Table 2
Scores on Community Pretest and Posttest

Subject	Pretest	Posttest	Increase
A	60%	83%	23%
B	60%	83%	23%
C	60%	83%	23%
D	<u>40%</u>	<u>67%</u>	<u>27%</u>
Average	55%	79%	24%

Results clearly indicate all students improved in content knowledge and in ability to perform over the course of the 11 week study.

CHAPTER V

Discussion and Summary

The purpose of this research was to examine the results of teaching a social skills and abuse prevention program to adolescents with developmental disabilities. The research questions focused on student acquisition of social and self-protection skills in the classroom settings and the generalization of those skills to community based settings. Discussion of each subject's performance and of results for the group as a whole in both classroom and community based settings were presented in detail in the previous chapter.

The classroom based assessment consisted of a pretest, a posttest, and weekly achievement tests. A teacher made test covering the curriculum content and containing 20 questions was used as the pretest and posttest. Students verbally responded to open-ended questions such as "What would you do if a stranger wanted you to take a walk with him or her?" (see Appendix A). The weekly assessments each involved three to twelve questions covering weekly lesson content.

The curriculum that comprised the treatment was Circles, programs one and two in the Circles series. The Circles programs were designed especially for adolescents with developmental disabilities and use six colored concentric circles to teach social distance and categorize behaviors commonly associated with differing degrees of intimacy.

The community based assessment included a pretest, posttest, and three intermediate training sessions. During the community trials, persons posed as "strangers" or "perpetrators" and approached students in community environments to allow for the assessment of skill generalization. Students were taught to: (a) not talk to the stranger, (b) go away from the stranger immediately, (c) not give his name, (d) not

go anywhere with the stranger, (e) not touch or allow themselves to be touched by the stranger, and (f) tell someone about the incident. Data were collected on each of these skills for each student.

Subject A

Subject A learned the basic content assessed by the classroom based posttest, scoring 55% on the pretest and 100% on the posttest. The weekly assessment data suggest Subject A learned most all of the lesson content, scoring 100% on six of the eight assessments. On weekly assessment five, he correctly responded to five out of six questions. He incorrectly stated that a doctor may touch you when you do not want to be touched. Subject A correctly responded to two out of three questions during the week six testing. The incorrect response here may have been due to a misunderstanding of the question; "If you want to play a game with young children, what should you do?". The correct response should indicate an understanding that you do not play with young children, you only wave to them as children are in the Orange Wave circle. Subject A said that he would play with them.

During the community based pretest, Subject A talked continuously with the stranger rather than leaving immediately. When the perpetrator approached him, Subject A said, "You scared me" and continued to carry on a conversation. He had difficulty reporting details of what actually happened, but did report the incident to a teacher when the conversation ended. He continued with the task of walking to a Stop and Go store, yet frequently watched behind him and seemed afraid that he might be approached again. Upon returning to school, he also reported the incident to the researcher. Through the course of the conversation, Subject A seemed to become confused and decided that maybe he imagined the incident and maybe it really did not happen. This confusion between reality and fantasy supports Kempton's description of

characteristics of students with developmental disabilities and characteristics related to abuse (Kempton, 1973, 1988).

Although Subject A consistently reported being approached during the intermediate trials, he often added untrue information. For example, during the community posttesting, he reported that the stranger offered him cigarettes which was not true. Subject A scored the lowest on the first training session, 33%. This may be due partially to the fact that the stranger was a well-dressed female and perhaps less threatening. Subject A showed continuous improvement in demonstrating appropriate behaviors during community enactments. Data from enactments three (83%), four (100%) and the posttest (83%) suggest that Subject A did generalize learned skills and could demonstrate these skills in community environments.

Subject B

Subject B also gained content knowledge from pretest to posttest, scoring 25% at pretest and 65% at posttest. The weekly assessment data suggest he learned most of the lesson content, scoring above 90% on five out of eight assessments. Subject B consistently scored low on questions concerning who are safe people to tell about an incident and to who one can give personal information. These incorrect responses contribute to the lower scores on assessments five and eight. On weekly assessment six, Subject B correctly responded to two out of three questions. The incorrect response indicated he would play with young children. The Circles curriculum teaches students that one should only wave to children.

During the community based pretest, Subject B talked with the stranger and did not leave immediately. However, he avoided touching by moving his arm away and loudly saying "NO". Subject B demonstrated appropriate behaviors on the posttest, scoring 83%. The only incorrect behavior demonstrated was finishing the task he was working

on instead of going away immediately. Not actually talking to the stranger during the posttest showed great progress as this was challenging for Subject B.

During the community training phase, Subject B had difficulty reporting details of being approached by the stranger. He added untrue statements when reporting on all enactments except the posttest. Untrue statements included information about the conversation, such as the stranger wanted to sell him a Corvette and that he actually saw the car. Other aspects of inaccurate information concerned the student's relationship with the perpetrator. Subject B reported that the stranger was his friend, a friend from a different school, or his mother's friend.

Johnson (1990) described students with developmental disabilities as having difficulty recognizing dangerous and threatening situations. This was particularly evident in Subject B's performance during the community enactments. At times, it seemed he knew how to respond, yet preferred to interact with the stranger anyway. The person acting as perpetrator during enactment two felt that Subject B could probably have been persuaded to go with her if there had been more time.

Subject B had particular difficulty during the fourth training session. The perpetrator was a teenage male who encouraged students to come listen to his new cassette tape of a popular rock group. When approached by the researcher to train in responding correctly, Subject B insisted that the stranger was his friend and that it was O.K. to talk strangers. Instead of reporting the incident to a safe person, he told the staff person that the researcher was rude to not let him talk to his friend.

This strong desire to interact regardless of how familiar the person may be could perhaps be a consequence of limited social opportunities. Assessment of Subject B's skill generalization is difficult due to the fact that he seemed to choose to respond inappropriately. However, due to the gain in scores from pretest to posttest, one may

conclude that some skill generalization did, in fact, occur.

Subject C

Subject C also gained content knowledge from pretest to posttest as measured by the classroom based assessments, scoring 50% on the pretest and 75% on the posttest. Data indicate he learned most of the lesson content, scoring 83% or above on five out of eight weekly assessments. Subject C scored lowest on the week three test, correctly responding to two out of four questions. Most of his incorrect responses concerned the names, colors, and gestures for each circle and who belonged in each one.

Subject C consistently exhibited the appropriate behaviors of not going with the stranger, not allowing the stranger to touch him, and taking four out of the five opportunities for telling a safe person about what had occurred. During the first three enactments he continued to talk with the stranger and did not go away immediately.

The most challenging behavior for this student was to go away immediately and find a safe person to tell. Subject C frequently stood still or walked a short distance away ignoring the perpetrator. It seemed as if he expected the stranger to go away instead of his having to go away himself. Not saying "NO" and not going away immediately portray a lack of assertiveness which increases vulnerability. This supports the findings of Dreyer and Haseltine (1986) in identifying assertiveness training as necessary for developing self-protection skills.

Community based pretest and posttest results (60% and 83% respectively) suggest Subject C gained knowledge and demonstrated appropriate behaviors in community environments.

Subject D

Classroom based pretest and posttest data (15% and 45%, respectively) indicate Subject D acquired some skills. This student's relatively low performance on the pretest and posttest may be due in part to difficulty in understanding some of the test questions. Subject D more frequently responded correctly to questions involving simply recall of specific information, such as "Name the private parts for a girl or woman." He did not seem to understand the higher level questions involving information processing, such as, "What would you do...?" and "How would you...?".

Subject D scored 83% on two out of the eight weekly assessments. He scored below 67% on the other six assessments. Performance on these tests may be related to his absence during two of the classroom lessons. Question format may have also contributed to poor performance on the weekly assessments.

The ability of the researcher to take advantage of teachable moments was constrained as Subject D was in a different classroom. Opportunities for incidental teaching to occur were limited to the half hour lessons three times per week. Learning is enhanced when these opportunities are available and utilized in instruction.

Subject D seemed to gain an understanding of the names and gestures of the circles as well as who belongs in his circles. Information concerning the movement within and among circles as relationships change appeared to be confusing to him.

Subject D participated in the community based pretest, posttest, and two intermediate community training sessions. He was absent during enactment four. During the community based pretest, Subject D seemed comfortable with and continuously talked to the perpetrator. However, he began to appear nervous when attempts were made to touch him. He responded appropriately to the touching and did not go with the stranger.

In the second enactment, Subject D was willing to go with the perpetrator and was walking away with her when the researcher intervened. It seems that the gender, or appearance of the perpetrator and the way in which the student is encouraged may be factors in the student's decision to go with the stranger. Subject D did not go with the male perpetrator to see his new car in the first enactment, nor with the male during the posttest. He did go with the female stranger to see puppies in enactment two and with the female to get some candy in enactment three. During the enactments that he went with the stranger, he incorrectly responded to all of the other indicators, talk, go away, name, touch, and tell.

Subject D demonstrated appropriate behavior in four of the six areas during the community based posttest (talk, name, go with, and touch). He finished the task he was involved with before going away and did not report the incident. Subject D's posttest performance showed great progress in not talking to the stranger. When the stranger approached him, the student smiled and said "thank you" when told he was doing a good job. This politeness reflects a lack of assertiveness which increases vulnerability. However, when the stranger asked Subject D to stop he replied "NO". The gain in scores from pretest (40%) to posttest (67%) indicates Subject D was able to generalize some skills.

Group Classroom Based Testing Results

All four students' scores increased from pretest to posttest with a mean score increase of 35%. Through observation of student performance, mainly during community training sessions, it became evident that the classroom lesson content needed to focus more specifically in some areas. For example, Students learned to say "STOP", go away, and tell someone when approached by an unfamiliar person and role played such scenarios in the classroom. Yet, it became evident that "go away" needed further

explanation of one goes away in search of a safe person to tell. The students also needed instruction in the specifics of what exactly to tell that safe person.

Group Community Enactment Results

All four subjects scores increased from pretest to posttest with a mean score increase of 24%. All four students also learned not to talk to the perpetrators, responding incorrectly at the time of the pretest and correctly on the posttest.

Initially, Subjects A and C became extremely fearful and did not want to participate in familiar off campus activities. This resistance to participate was apparently a result of being approached during the community enactments. Staff made continuous efforts to emphasize the fact that students can now feel more safe because they know how to protect themselves. Teaching students to recognize threatening situations without becoming phobic is challenging. Increasing students' skills in independence and decreasing dependence on staff should enhance development of self-protection skills. Students' fearfulness was reduced with increased exposure and experience.

Study results reveal that students lack assertiveness in responding to advances of persons unfamiliar to them. Students must continue to develop self-protection skills including saying "STOP" when approached, going away immediately to find a safe person to tell and reporting accurate information. Assertiveness training should be an ongoing aspect of instruction, along with increasing students' skills in independence.

Conclusions

This study was conducted in a single classroom involving students from two classrooms. Opportunities to enhance incidental learning were limited, especially for Subject D who was from the other classroom. Involving more teachers and other school personnel would most likely enhance student skill acquisition and generalization to other

environments.

The level of independence skills each student demonstrated seemed to be an area which affected the assessment process. Some students were staff dependent and unaccustomed to being even a short distance away from some familiar person. Therefore, setting up a testing situation in which a student was alone was difficult with some students. Additional emphasis on increasing students' skills in independence prior to study implementation might strengthen the assessment process and improve student performance.

During the classroom assessment, it became evident that students had difficulty understanding some of the test questions. Most students performed better on questions involving information recall and had more difficulty with the higher level questions requiring information processing, such as, "What would you do...?" and "How would you...?". Perhaps it would be beneficial to reword some questions on the pretest and posttest as well as the weekly tests for more accurate assessment of student knowledge.

After previewing the pretest, the panel member who is co-author of the Circles curriculum expressed some concern with the "leading" nature of some of the test questions, particularly question number three ("How would you ask a stranger in the store to walk home with you?"). Through discussion of the other assessment and nature of training involved, she came to the conclusion that this type of questioning is appropriate. Therefore, it would be important for this type of questioning to be included if test items are revised.

The weekly assessment of lesson content contained three to eight questions on each test. Increasing the number of items on each weekly test to a minimum of ten would improve reliability, and perhaps show student progress more clearly. For example, Subject B responded incorrectly to only one test item on the sixth week test, yet received

a score of 67% since there were only three questions on that weekly test. Similarly, during week five, he incorrectly responded to one question out of six and consequently earned a score of 83%.

The community based testing and training involved persons acting as perpetrators approaching students for the purpose of assessing skill generalization to community environments. Interactions between students and perpetrators always occurred while walking to or from locations familiar to the students and within close proximity of the school students attended. Varying the perpetrator's mode of transportation to include approaching the student while driving a car or riding a bicycle, as well as approaching as a pedestrian might provide opportunities for further skill development.

During the community enactments, the researcher frequently prompted students to return to school and report the incident to a safe person. The staff members who were considered safe people needed additional training in prompting students to elicit accurate reporting. The interaction between the student and the safe person during the reporting of the enactment is an opportunity for incidental teaching and further skill development to occur and should be utilized as such.

The Circles curriculum teaches students that waving is the only appropriate social response when interacting with children. Depending on the functioning level of a student, slight modification or expansion of this rule statement may be appropriate. For students who work with children through employment or plan to have a family of their own, other social responses might be considered suitable.

Research results indicate students lack assertiveness and need additional skill development in this area. Incorporating more assertiveness training into the weekly lessons and community training most likely would have a positive effect on students'

skill acquisition.

Limitations

Generalizability of this research is limited in that it dealt only with interactions with people unfamiliar to the subjects. Ethical considerations must be taken into account if we are to consider students' reactions to perpetration by familiar persons. Similar difficulties arise when trying to study students' responses to inappropriate touching. For obvious reasons, students cannot actually be touched in a sexually abusive way. Therefore, for this study, inappropriate touching consisted of holding the student's hand, placing an arm around his shoulders or hugging. One must hope that student knowledge concerning this type of touching will generalize to touching of a more explicit nature if such an incident should occur. This research was also limited in that all subjects were males. Program implementation with females could provide additional information as well as increase the extent to which the results can be generalized to the larger population.

Implications for Further Research

This study determined that students with developmental disabilities were able to learn the skills identified in the Circles curriculum and generalized these skills to community settings. Further longitudinal research to determine if learned skills are maintained over a period of time would be useful. Implementation of the Circles programs with younger students could provide useful information to determine applicability for this population and perhaps suggest appropriate modifications for instruction at a younger age.

Results of this research indicated that students may respond differently to perpetrators depending on their appearance, gender, or method of encouragement. Future research testing the effects of these and other factors as influences in student

responses could provide relevant information for abuse prevention curricula and program development.

Students need help in developing appropriate social behaviors and would benefit from information which provides insight into factors relating to social and self-protective behavior. Subject B often appeared to choose to interact with the stranger although he knew the appropriate responses. Future studies should be developed to determine how opportunities for social interaction relate to the consistent demonstration of self-protection procedures.

Professionals need assistance in how to further involve parents in the learning process and in the development of their child's social and self-protection skills. Researchers should conduct studies to determine student skill generalization and maintenance in other environments including the home.

Summary

Individuals with developmental disabilities are at a high risk for becoming sexually abused or exploited. There is little research available on adolescents with developmental disabilities and their acquisition of abuse prevention skills or the generalization of these skills to other environments. The purpose of this study, therefore, was to examine the results of teaching a social skills and abuse prevention curriculum to adolescents with developmental disabilities.

Four students were selected and taught curriculum content in group format in the classroom. Students demonstrated learned skills in community environments through enactments with persons acting as perpetrators. Results were presented in narrative, numerical and graphic forms.

The research questions identified at the beginning of this study were: (a) given the abuse prevention curriculum, will students learn about appropriate social and self-

protection skills in the classroom setting, and (b) given the abuse prevention curriculum, will students generalize social and self-protection skills to community based settings? In response to these research questions, data from this study indicate that all four subjects did, in fact, learn the appropriate social and self-protection skills in the classroom setting and generalized most of these skills to community based settings. Generalization of results is difficult due to the uniqueness of each student's demonstration of abilities. However, this research indicates that it is appropriate to generalize the results to adolescent boys with developmental disabilities.

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APPENDIX A

Appendix A

Student Name
Examiner Name

Student Age
Date

Instructions:

1. Explain to student purpose of testing. Ex. "I am going to ask you some questions before and after we learn about relationships. That way we can tell what you knew before and how much you learned from the lessons."
2. Explain to student purpose of tape recording. Ex. "I will tape record the testing so that I can listen again later and better understand the answers."
3. Start tape recorder, read each question, and record responses on this sheet.

CLASSROOM PRETEST/POSTTEST

Acceptable Responses

1. Who is the most important person in the world? Me
2. If a person you like told you he or she did not want to be your friend, what would you do? Statements which would reflect and understanding of both people have to want to be friends. Ex. stay away from them, ask someone else, find a new friend.
3. How would you ask a stranger in the store to walk home with you? Statements which would reflect and understanding of you should not talk to strangers. Ex. Say stop, go away, say no.
4. What would you do if a stranger wanted you to take a walk with him or her? Statements which would reflect and understanding of you should not go away with strangers. Ex. Say stop, go away, say no.
5. Who can touch you even if you do not want them to? No one.
- 6.- Name private parts for boy or man. Penis, testes, buttocks or bottom.
- 8.
- 9.- Name private parts for girl or woman.
11. Breasts, vagina, buttocks or bottom.
- 12.- What would you do if a stranger touched your private parts?
14. Say "Stop". Go away. Tell safe person.
- 15.- What would you do if an adult relative touched your private parts?
17. Say "Stop". Go away. Tell safe person.

- 18.- What would you do if a friend touched your private parts and you did not want
20. him or her to? Say "Stop". Go away. Tell safe person.

APPENDIX B

Appendix B

Student Name
Examiner Name

Student Age
Date

Instructions:

1. Explain to student purpose of testing. Ex. "I am going to ask you some questions before and after we learn about relationships. That way we can tell what you knew before and how much you learned from the lessons."
2. Explain to student purpose of tape recording. Ex. "I will tape record the testing so that I can listen again later and better understand the answers."
3. Start tape recorder, read each question, and record responses on this sheet.

CLASSROOM PRETEST/POSTTEST

1. Who is the most important person in the world?
2. If a person you like told you he or she did not want to be your friend, what would you do?
3. How would you ask a stranger in the store to walk home with you?
4. What would you do if a stranger wanted you to take a walk with him or her.
5. Who can touch you even if you do not want them to?
- 6.- Name private parts for boy or man.
- 8.
- 9.- Name private parts for girl or woman.
- 11.
- 12.- What would you do if a stranger touched you private parts?
- 14.
- 15.- What would you do if an adult relative touched your private parts?
- 17.
- 18.- What would you do if a friend touched your private parts and you did not want him or her to?
- 20.

APPENDIX C

Appendix C

ENACTMENT SCRIPTS FOR STRANGERS

Enactment 1- Pretest (adult male-mid 20's)

"Hey, What's happening?"

Waits for response, "Come see my new Corvette."

Waits for response, "It has a great stereo"

Grabs students hand and begins walking with student.

Enactment 2 (adult female)

"Hi, What's your name?"

Waits for response, puts arm around student

"Come see my new puppies." Begins walking with arm around student.

Enactment 3 (adult female)

"Hi. I know you. I saw you at the park."

Grabs students hand.

"Let me buy you a soda."

Enactment 4 (teenage male)

"Hey, what's going on?"

Waits for response. "I've got some tapes I'm giving away. Want one?"

"Come over here, they are in my car."

Places hand on students shoulder

"What's your name?"

Enactment 5 (adult professional male)

"Excuse me. Will you help me get something out of my car?"

"I'll pay you."

Waits for response. Holds student arm or elbow.

"My car is this way."

Enactment 6 - Delayed posttest (older adult male)

"Hello son."

"Come over here. I want to give you a present."

Waits for response. Puts arm around student.

"The present is this way."

APPENDIX D

Appendix D

ENACTMENT DATA SHEET

Enactment # _____
Date _____

Student _____

NARRATIVE DESCRIPTION OF BEHAVIOR:

Teacher observations-
Go with stranger:

"Stranger" observations-
Go with stranger:

Touching:

Touching:

Other:

Other:

Enactment # _____
Date _____

Student _____

NARRATIVE DESCRIPTION OF BEHAVIOR:

Teacher observations-
Go with stranger:

"Stranger" observations-
Go with stranger:

Touching:

Touching:

Other:

Other:

APPENDIX E

Appendix E
LESSON FORMAT

Circles I: Program 1. Social Distance

Week 1

- Lesson 1. Ground rules, overview of Circles concepts**
- Lesson 2. Purple Private Circle, Blue Hug Circle**
- Lesson 3. Green Big Hug Circle, Yellow Handshake Circle**

Week 2

- Lesson 4. Orange Wave Circle, Red Stranger Circle**
- Lesson 5. Teaching Pictures, construct Joyce's circle graph**
- Lesson 6. Construct own circle graphs**

Circles I: Program 2. Relationship Building

Week 3

- Lesson 7. Purple Private Circle, Blue Hug Circle**
- Lesson 8. Green Big Hug Circle, Yellow Handshake Circle**
- Lesson 9. Orange Wave Circle, Red Stranger Circle**

Circles I: Related Topic. Puberty Changes

Week 4

- Lesson 10. Understanding ourselves as males and females**
- Lesson 11. Growth process, baby-teenager-adult**
- Lesson 12. Feelings**

Circles II: Stop Abuse

Week 5

- Lesson 13. Review Circles I, define "Safe Person", Purple Private Story**
- Lesson 14. Blue Hug Story 1, role play**
- Lesson 15. Green Big Hug Story 1, role play**

Week 6

- Lesson 16. Green Big Hug Story 2, role play**
- Lesson 17. Yellow Handshake Story 1, role play**
- Lesson 18. Orange Wave Story 1 & 2, role play**

Week 7

- Lesson 19. Red Stranger (community helper) Story 1, role play**
- Lesson 20. Red Stranger Story 1, role play**
- Lesson 21. Red Stranger Story 2, role play**

Week 8

- Review and Evaluation**

APPENDIX F

Appendix F
LESSON CONTENT
WEEKLY ASSESSMENTS

Students are assessed on an individual basis. Evaluator reads question to student and student answers verbally. Assessments are tape recorded.

Week 1.

Given a colored, line drawing of the concentric circles, evaluator points to circle and asks, "What circle is this?" Student verbalizes color and name. Evaluator then asks, "Show me the sign for the _____ circle." and repeats procedure with the following circles:

Questions:

- 1.-3. Purple private circle, color, name, and gesture
- 4.-6. Blue hug circle, color, name, and gesture
- 7.-9. Green big or far away hug circle (either term acceptable), color, name, and gesture
- 10.-12. Yellow handshake circle (yellow shake hands circle acceptable), color, name, and gesture

Note: Must name both color and name of circle for correct answer. If verbalizes color only, prompt once with "What does the _____ circle mean?" If verbalizes name only, prompt once with "What color is the _____ circle?"

Week 2.

Given a colored, line drawing of the concentric circles, evaluator points to circle and asks, "What circle is this?" Student verbalizes color and name. Evaluator then asks, "Show me the sign for the _____ circle." and repeats procedure with the following circles:

Questions:

- 1.-3. Orange wave circle, color, name, and gesture
- 4.-6. Red stranger circle, color, name, and gesture

Note: Must name both color and name of circle for correct answer. If verbalizes color only, prompt once with "What does the _____ circle mean?" If verbalizes name only, prompt once with "What color is the _____ circle?"

Week 3.

Use colored, line drawing of concentric circles as reference.

Questions:

- 1. Who is in your purple private circle? me
- 2.&3. Can you move into a persons green big hug circle if they do not want you to? Why? no, both people have to want to change circle. or both people have to agree
- 4. What circle are children in ? orange wave circle. must verbalize both names

Week 4.

Use line drawings of unclothed adult male and female showing one drawing at a time.

Questions:

(male drawing)

1. Point to the penis.
2. Point to the testes.
3. Point to the bottom.

(female drawing)

4. Point to the bottom.
5. Point to the vagina.
6. Point to the breasts.

Week 5.

- Questions:
- 1.&2. Name two people who are "safe people" to tell if someone touches you and you do not want to be touched. mother, father, older brother, older sister, teacher, staff person, policeman.
 3. Who can touch you even if you do not want to be touched? no one
 4. What three things do you do if a person touches you and you do not want to be touched? say "Stop", go away, tell safe person.
 - 5.&6

Week 6.

- Questions:
1. Can your very good friend touch your private parts if you do not want him or her to? no
 2. If a person in your yellow handshake circle wants to move to your green far away hug circle, what should he or she do? statements which reflect an understanding of the fact that both people have to agree, such as ask you, tell you, talk about it.
 3. If you want to play a game with young children, what should you do? statements which reflect an understanding of the fact that children are in the Orange Wave circle and it is best to wave to children, such as not O.K., just wave, children in orange wave circle.

Week 7.

- Questions:
- 1.&2. If you hug a person in your orange wave circle, do you move to their green big hug circle? Why? statements which would reflect an understanding of both people must agree for a circles relationship to change, such as no, only if both people agree.

3. What do you talk to community helpers about?
only business
4. What circle is a community helper in? Red
Stranger circle
5. Should you tell your safe person if a stranger shows you his private parts but does not touch you.
yes, always tell safe person.

Week 8.

Questions:

1. If you are walking home and are really tired, should you let someone you do not know drive you home if it is not very far? no, never go with strangers
2. Can you give your name and address to a community helper? no, only talk about business

(use floor graph)

3. Stand in big/far away hug circle. green
4. Stand in stranger circle. red
- 5.&6. Name two people who can be your "safe people" to tell. whichever is applicable to individual student-mother, father, older brother, older sister, teacher, staff person.

APPENDIX G

Appendix G

Lesson Content Weekly Assessments
Data SheetStudent Name
Examiner NameStudent Age
Dates

Instructions: Record a check for correct answer or write response for open ended questions. See Appendix F for assessment questions, acceptable responses and more information.

Week 1

	Color	Name	Gesture
Purple	Private		
Blue	Hug		
Green	Big Hug		
Yellow	Handshake		

Week 2

	Color	Name	Gesture
Orange	Wave		
Red	Stranger		

Week 3

- Who is in you purple private circle?
- & 3. Can you move into a persons green big hug circle if they do not want you to? Why?
- What circle are children in?

Week 4.

Points to:

Penis	Testes	Bottom	Bottom	Vagina	Breasts
-------	--------	--------	--------	--------	---------

Week 5.

Name two people who are "safe people" to tell if someone touches you and you do not want to be touched.

- 1.
- 2.
3. Who can touch you even if you do not want to be touched?

What three things do you do if a person touches you and you do not want to be touched?

- 4.
- 5.
- 6.

Week 6.

1. Can your very good friend touch your private parts if you do not want him or her to?
2. If a person in your yellow handshake circle wants to move to your green far away hug circle, what should he or she do?
3. If you want to play a game with young children, what should you do?

Week 7.

- 1.&2. If you hug a person in your orange wave circle, do you move to their green big hug circle? Why?
3. What do you talk to community helpers about?
4. What circle is a community helper in?
5. Should you tell your safe person if a stranger shows you his private parts but does not touch you?

Week 8.

1. If you are walking home and are really tired, should you let someone you do not know drive you home if it is not very far?
2. Can you give your name and address to a community helper?

Stand in:

3. Big/far away hug circle
4. Stranger circle

Name two people who can be your "safe people" to tell.

- 5.
- 6.

APPENDIX H

Appendix H

Circles:

