



RESEARCH REPORT

Ditto's Keep Safe Adventure Show: A Summary Report

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About Bravehearts

Bravehearts has been actively contributing to the provision of child sexual assault services throughout Australia since 1997. As the first and largest registered charity specifically and holistically dedicated to addressing this issue in Australia, Bravehearts exists to protect Australian children against sexual harm.

Our Mission

To prevent child sexual assault in our society.

Our Vision

To make Australia the safest place in the world to raise a child.

Our Guiding Principles

To, at all times, tenaciously pursue our Mission without fear, favour or compromise and to continually ensure that the best interests, human rights and protection of the child are placed before all other considerations.

Our Guiding Values

To at all times, do all things to serve our Mission with uncompromising integrity, respect, energy and empathy ensuring fairness, justice, and hope for all children and those who protect them.

The 3 Piers to Prevention

The work of Bravehearts is based on *3 Piers to Prevention: Educate, Empower, Protect* - Solid Foundations to Make Australia the safest place in the world to raise a child. The 3 Piers are:

Educate Education for children and young people

Empower Specialist counselling and support

Training for adults, professionals, business and community

Risk Management 'ChildPlace Health & Safety' Services

Community engagement and awareness

Protect Lobbying & Legislative Reform

Research

Executive Summary

Ditto's Keep Safe Adventure Show was developed by Bravehearts as an important child sexual assault prevention strategy aimed at children between the ages of 3 to 8. To ensure the effectiveness of the program, Bravehearts engaged an external consulting psychologist to evaluate the impact of the program on the retention of its three primary learning objectives: (1) We all have the right to feel safe with people, (2) It's OK to say 'no' if we feel unsafe or unsure, and (3) Nothing is so yucky that you can't tell someone about it. **Methods:** A range of measures were used to assess the learning outcomes, including a pre and post evaluation questionnaire administered before and after the program was held in the participating pilot schools, recorded observations during the program and surveys conducted with participating teachers. **Results:** Children demonstrated significant improvements in their awareness and understanding of personal safety behaviours and strong evidence that the learning objectives were met was found. Significant differences among children based on variable attributes were found and schools that engaged in follow-up activities demonstrated the most significant improvements. **Conclusion:** Results demonstrated the effectiveness of the program in teaching children the basic principles and tools to keep safe and respond effectively to unsafe situations. The impact of follow-up activities suggests that improved outcomes would result from a more structured approach to reinforcing the program in class.

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Educating Children Against Sexual Assault

Over the last thirty years the collective knowledge on child sexual assault (CSA) has increased substantially. Historical views that children are at risk predominately from strangers have given way to the knowledge that most sexual assault of children occurs at the hands of people the child knows, trusts and often loves. We now know the people who most commonly sexually assault children are usually family members, or individuals close to the family or child. A sample of more than 500 children and young people attending therapeutic programs at Bravehearts Inc (a specialised sexual assault service) over a 5 year period found approximately 40% of offenders were a father or father figure living in the child's primary or secondary residence, 30% were other family members, a further 27% were known to the child and their family, leaving only 3% who were strangers. These figures are consistent with existing research showing the majority of offenders to be either related to or closely affiliated to the child (Kogan, 2004)

Prevalence estimates of CSA have revealed the number of children sexually assaulted each year in Australia to be staggering. Research both here and overseas indicate approximately one in five children will experience some form of sexual assault before they reach the age of 18 years (see Finkelhor, 1994; Goldman & Padayachi, 1997; James, 2000; Queensland Crime Commission, 2000). The most vulnerable ages for children to be exposed to sexual assault appears to be the ages from three to eight years of age, with the majority of onset of abuse happening between these ages (Beitchman, Zucker, Hood & Da Costa, 1991; Browne & Lynch, 1994). Despite impressions gained from media reports of sexual crimes, child sexual assault is most often not violent. Usually it involves a process of grooming and contrived compliance based on trickery, manipulation and secrecy with a child whom the offender usually has a close relationship to (Smallbone & Wortley, 2000). Understanding these offending components, it becomes clearer how easily children can become coerced into silence, or indeed made to feel some responsibility in the offence.

Public awareness of the problem of CSA has grown to a point whereby concerns have emphasised the need for widespread preventative programs to be implemented. Accordingly, school-based personal safety programs have emerged increasingly over the last two decades across the US, Canada, NZ, UK and Australia (Briggs & Hawkins, 1994; Browne & Lynch, 1994; Rispen, Aleman, & Goudena, 1997; Poole & Tomison, 2000). School-based personal safety programs play a vital role in preventing CSA, equipping children with the knowledge and skills they need to identify unsafe or risky situations, and giving them an understanding of their rights to protect themselves and their own body (Briggs & Hawkins 1994; Rispen, Aleman, & Goudena, 1997)

The introduction of personal safety education within schools appears to be a logical progression. Not only do schools have the ability to reach large numbers of children at the one time, but their primary purpose is to be a place of learning. In schools children are taught how to stay safe in traffic, how to stay safe from fire, water and electricity; it was logical that schools should progress to also teach children how to stay safe with people. Generally, personal safety education in schools has been a teacher-facilitated process, whereby teachers are provided with a range of safety topics to cover at their discretion; given the choice, however, many teachers report preferring to discuss 'safe' topics such as road safety over other more difficult topics as domestic violence and sexual assault (Whiteside, 2001). Given the sensitive nature of discussing such topics as sexual assault, it is understandable why teachers can feel apprehensive in talking with their students about these issues

(Briggs & Hawkins, 1996), and why a substantial minority of teachers choose to not cover any protective behaviour material in their classroom (Johnston, 1995).

Some of the main barriers to teacher's confidence in delivering education material around the issue of sexual assault include being uncomfortable with the program content, unsure of how to respond to potential disclosures of harm by their students, and limited training and support on how to deliver the protective behaviour components (Abrahams, Casey & Daro, 1993). Despite the concerns teachers may have in including protecting behaviours into their curriculum, it is clear that teachers recognise the importance of its inclusion (Hazzard, Webb, Kleemeier, Angert & Pohl, 1991), and in order to teach this material effectively and comfortably, teachers acknowledge the need for adequate training, information and support to do this.

In Australia, the majority of personal safety education in schools is also teacher-facilitated, and is based on the widely used and accepted Empowerment model established in the 1980s (Whiteside, 2001). This model is focused on the empowerment of children, helping them to identify and draw on their own personal resources to assist them in protecting themselves, as well as assisting children to identify unsafe situations. Although the basis of this model is theoretically sound, some of the flaws of these programs include that they typically overemphasise the risk of 'stranger adults', ineffectively address the issue of abuse by 'familiar adults' or peers (Sanderson 2004), and fail to acknowledge that sexual touching may feel 'nice' and produce incongruent reactions in children. Further, limited training and support is offered to teachers to effectively use the material, and parents are rarely, if ever, included

In comparison to Australia, the model of personal safety adopted in New Zealand assumes an approach more cognisant with the literature and research on child sexual assault. The NZ program provides teachers with developmentally suitable language and materials that increase knowledge of appropriate and inappropriate behaviours, and provides for the building of knowledge as children progress through each year level. In an evaluation of the program, Briggs and Hawkins (1996) identify the main aspects that underpin the success of the New Zealand model: a program that is highly structured and provides consistency and reliability in its delivery, substantial materials provided for teachers to utilise for each component of the program, and parental involvement in the program delivery.

To address the inadequacy of personal safety education in Australian schools, Bravehearts developed *Ditto's Keep Safe Adventure* (DKSA), an effective, teacher-friendly, engaging live-action show and program tailored to young children from Pre-School to Grade 3. DKSA is based on the principles of Bravehearts successful and widely used *Ditto's Keep Safe Adventure CD*, which came to be from a collaborative effort between child protection advocates, psychologists, Queensland Police, the Commission for Children and Young People (Qld), State and Commonwealth Ministers, Crime and Misconduct Commission (Qld) and marketing and advertising experts.

Ditto's Keep Safe Adventure

The overall objective of the program is to help educate children in the fundamental principles of personal safety in a gentle, non-confronting way, using language and concepts that children, teachers and parents can feel comfortable using. Consisting of a live 30 minute show which uses songs to link in the key show messages, DKSA is fun, non-threatening and focuses on interactively teaching children how to identify a wide-range of potentially unsafe situations, and providing them with the knowledge and skills on how to respond appropriately. The main aims of the program is to provide teachers, children, and parents with appropriate language to discuss the topic of personal safety comfortably, assist children with the development of resiliency and protective factors, and empower children to disclose information on any unsafe situation.

As well as including existing protection principles already working in established prevention programs, DKSA incorporates a set of learning objectives informed by research on disclosure principles and child sexual offender behaviour. DKSA covers: differentiating between 'yes' and 'no' feelings (reinforcing children's natural emotional regulation); recognising 'warning' signs (identifies the emotional and physiological responses to potentially threatening experiences); identifying private parts (the importance of teaching children which parts of their bodies are exclusively theirs has been supported by research, as offenders often exploit children's lack of knowledge {Budin & Johnson, 1989}); distinguishing between 'good' and 'bad' secrets (the inclusion of secrets is considered important as secrecy plays such a fundamental role in child sexual assault); and identifying what to do if they feel unsafe or unsure in situations (gives children the knowledge that they are allowed to tell someone if they are not feeling safe).

Program Objectives

The overall objective of Bravehearts' *Ditto's Keep Safe Adventure* is not to make children solely responsible for their own safety, but to educate them in personal safety. The program aims to educate school-age children to protect themselves from sexual assault and focuses on teaching children to avoid a wide range of potentially unsafe situations.

The individual objectives include:

- Assisting children with the development of resilience skills and protective factors.
- Empowering children to disclose information on any unsafe situation.
- Empowering children and the community to make a significant difference to the overall safety of their community.
- Educating parents, teachers and the community on how to respond positively to a sexual assault disclosure.
- Increasing the knowledge of parents, teachers and the community on how to create a safe environment.

Specifically the program aims to heighten children’s knowledge of sexual assault, increase child disclosures of abuse and improve children’s awareness and ability to protect themselves through three basic rules:

1. We all have the right to feel safe with people.
2. It’s okay to say ‘no’ if you feel unsafe or unsure.
3. Nothing is so yucky that you can’t tell someone about it.

To meet the program objectives, *Ditto’s Keep Safe Adventure* is structured to teach a set of learning objectives, namely:

- Differentiation between ‘yes’ and ‘no’ feelings.
- Recognition of ‘warning’ sign.
- Identification of **private parts**.
- Defining ‘good’ and ‘bad’ secrets.
- Know **what to do** if they feel unsafe or unsure.

Along with these aims, specific behavioural objectives have been set. It is hoped that after participation in the program young people will be able to:

- Recognise and trust their instincts and feelings – to identify when a situation/person gives them a ‘no’ feeling.
- Recognise various physiological responses that help them know when they are feeling unsafe or unsure.
- Recognise the difference between different types of touches.
- Be able to identify their private parts.
- Cope confidently with situations where they feel unsafe or unsure
- Put in place strategies to deal with situations/people who make them feel unsafe or unsure.
- Decide who they can trust and know how to ask these people for help



External Evaluation Summary

In 2007 and 2008 evaluations were prepared by organisational psychologist Nicole Barrett. These external evaluations were based on two studies conducted in 2006 and 2007 by Ms Barrett to assess a number of key aims of *Ditto Keep Safe Adventure*, specifically:

- Measure whether DKSA learning objectives were achieved.
- Identify problem areas and improve the current service deliver.
- Provide valid and reliable data to support future program development.

The following provides a summary of the results of these findings.

The 2007 Study

Participants

Bravehearts contacted a number of local schools via email inviting them to participate in the pilot evaluation of DKSA. Of the schools who expressed interest four were chosen to participate in the study. Each school was provided with a confirmation letter outlining the pilot study requirements and the commencement date of the pre testing, show delivery and post testing.

Consent forms were provided to parents of all students from Prep to Grade 3 across each of the four schools. Of these, only six parents denied consent for their child to participate. One class from each grade was chosen as the representative sample for each school, giving a total of 317 children between the ages of five and nine chosen to participate in the study. From these, a further 50 responses were removed from the data set due to incompleteness, leaving the final sample size as $N = 267$.

Within the sample, 46 children were identified as having learning difficulties or English as second language, and 20 children had known child protection concerns. By school, school 1 had 5.6%, school 2 had 39.5%, school 3 had 10% and school 4 had 8.2% of their sample identified as having learning difficulties.

Materials

All evaluation materials were designed specifically for the current study, including questionnaires, observation sheets, teacher feedback forms, parent survey forms, parent consent forms, and teachers guides on administering the questionnaire. The evaluation questionnaire was developed by Nicole Barrett of N.B. Consulting, including input from Bravehearts representatives across the research, counselling and education departments.

Procedure

Of the schools contacted, six schools expressed an interest to participate in the study and from these, four schools were chosen for the sample. Bravehearts representatives visited each school and provided an overview of the research process including the rationale for the study. Guidelines were provided to

the teachers as to how to administer the pre and post-test questionnaires, with strict instructions to not prompt the child on their responses.

One week prior to the delivery of *Ditto's Keep Safe Adventure*, teacher and parent information sessions were conducted at each of the schools. These sessions allowed for the dissemination of information about the program to teachers and parents, and provided information on how to respond to any disclosures of sexual harm, should they arise, as well as how to report such disclosures. During this week teachers also facilitated the pre-test evaluation with their students. For the older grades this was delivered in a group format, whereas for the younger children this was conducted one-on-one with the students and their teacher.

DKSA was then delivered at each of the schools with groups of children from Prep to Grade 3, with a maximum of 100 students in each setting. Students were provided with a show bag at the end of the show, containing an activity book based on all the messages in the show including the songs, and also containing stickers, pencils and a ruler. During the show teachers were provided with observation forms and asked to rate the level of student engagement and participation during the show delivery.

One week after the delivery of the program, post evaluation was conducted, and as with the pre-tests, teachers from the chosen classes in each grade conducted the completion of the questionnaires. A Bravehearts representative collected the evaluation materials at the end of this process.

Design

A repeated measures design was employed to assess the effectiveness of the program, with repeated measures *t*-tests and ANOVA's run to determine significant differences. All participants completed the same questionnaire before and after program delivery, meaning each child was their own control from pre to post testing.

Results from the 2007 Study

Figure 1 shows increases in average number of items recalled for each of the measured protective behaviours principles, both before and after show delivery among each of the participating schools.

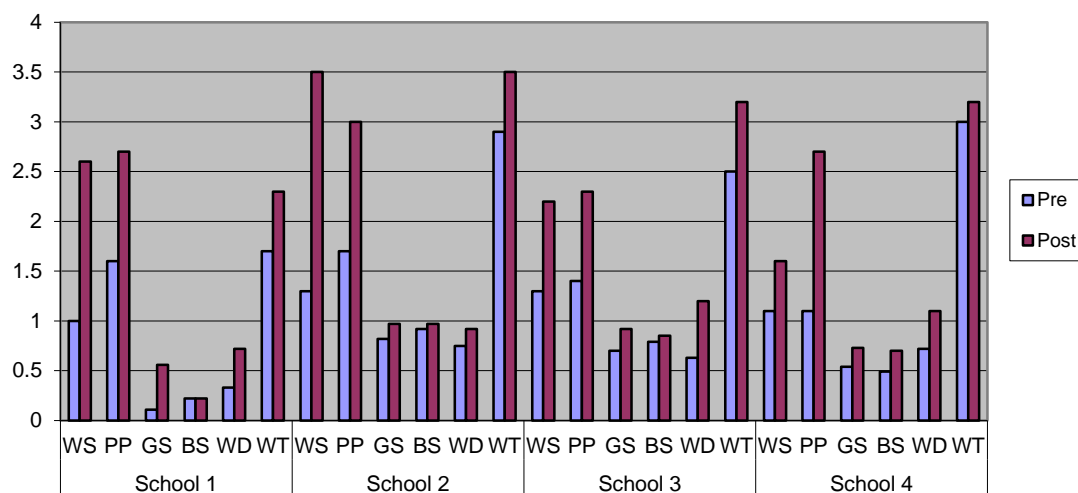


Figure 1: Note WS = warning signs. PP = private parts. GS = good secrets. BS = bad secrets. WD = what to do. WT = who to tell

Yes and No Feelings

Related samples *t*-tests were used to assess significant differences between the pre and post conditions on ability to correctly identify situations that would cause ‘yes’ or ‘no’ feelings. Statistically significant differences were found on all questions: *if someone put their arm around you and it didn't feel right, would that be a yes or no feeling?*, ($t = 4.89$, $df = 266$, $p < .01$), *if a friend invited you to their birthday party, would that be a yes or no feeling?*, ($t = 2.69$, $df = 266$, $p < .01$), and *if your cousin asked you to show them your bottom, would that be a yes or no feeling?*, ($t = 2.88$, $df = 266$, $p < .01$), with the exception of *if your favourite relative gave you a safe hug, would that be a yes or no feeling?*, where no significant differences were found. Importantly, the post condition saw noteworthy increases in children correctly identifying situations that cause ‘no’ feelings.

Warning Signs

Using a body outline, students were asked to circle the body parts that might warn them they were having a ‘no’ feeling. Statistically significant differences were found between the pre and post conditions ($t = -12.6$, $p < .01$). The average number of warning signs identified increased from $M = 1.21$ ($SD = .70$) before seeing the program, to $M = 2.25$ ($SD = 1.37$) after the show delivery. Children with known child protection concerns recalled significantly more warning signs than those who did not ($t = 17.89$, $p < .01$).

Private Parts

Using a picture of a boy and a girl, students were asked to circle the parts of the body that are considered private parts. As expected, students demonstrated a greater knowledge of private parts after the program delivery ($t = -19.98$, $p < .01$), with the average of number of private parts recalled doubling after seeing the show ($M = 2.6$).

Good Secrets

This section required students to write down a secret they considered to be ‘good’. After attending the show, children were better able to demonstrate their understanding of a good secret ($t = -6.58$ $p < .01$).

Bad Secrets

Similarly, students were asked to write down a secret they considered was ‘bad’. Again, after seeing the program children were better able to identify what was considered a bad secret ($t = -3.66$ $p < .01$).

What to do if you know a bad secret?

Students were asked what they would do in the event they knew a bad secret. After participation in the show, children identified significantly more actions about ‘what to do’ than before ($t = -7.68$ $p < .05$). ANOVA’s revealed that children identified as having learning difficulties recalled the least number of responses in terms of what to do with a bad secret ($f(1, 242) = 4.90$ $p < .05$).

Before seeing the program, one in three children failed to answer this question correctly or said they would “*do nothing*” if they knew a bad secret. After participating in the show more than 80% of children could identify one action they could take. A qualitative review of this question revealed that a key message in the Ditto show, “*run and tell someone you can trust*” was the most reported action in the post condition.

Who to talk to?

This section required students to identify people in their lives they could talk to if they needed help. After participation in the program children identified significantly more people who could help them and who they could talk to ($t = 3.92$ $p < .01$).

ANOVA’s between children who were and were not identified as having learning difficulties identified fewer people they could talk to both before ($f(1, 277) = 6.98$, $p < .01$) and after participating in DSKA ($f(1, 242) = 7.31$ $p < .01$).

The 2008 Study

Participants

Of the original four schools who participated in experiment 1, two schools were selected for and agreed to participate in this follow-up study. The two schools chosen were the medium performers from the first evaluation, with the highest and lowest scoring schools in the first study being omitted. This was done in an effort to ensure the least bias results for the follow-up evaluation. These two schools are known in both studies as school 3 and school 4. The remaining two schools had not previously had the DKSA program perform at their school.

Again, consent forms were given to parents of all children in grades Prep, 1, 2, and 3 across all participating schools, to allow for their child to participate in the show and subsequent evaluation. From each grade one class was selected to participate in the evaluation, giving a sample size of 280 children between the ages five to nine.

Of the original two schools participating in both experiment 1 and 2, each had an increase in the number of children who were reported as having learning difficulties. School 3 increased to 17% and school 4 increased to 38%, while the two new schools reported 14% for school 5, and 3% for school 6.

Materials

All materials for the current study, including questionnaires, observation sheets, teacher feedback forms, parent survey forms, parent consent forms, and teacher's guides on administering the questionnaire were identical to Experiment 1.

Procedure

Of the original schools who participated in Experiment 1, the two selected schools were contacted and asked to participate in the current follow-up evaluation, to which they agreed. The two new schools were contacted by a Bravehearts representative via phone and were asked to participate. Bravehearts representatives visited each school and provided an overview of the current research process including the rationale for the study. Guidelines were also provided to teachers as to how to administer the pre and post questionnaires, with strict instructions to not prompt the child on their responses in any way.

One week prior to the delivery of the show, teacher and parent information sessions were conducted at each of the schools. These sessions allowed for the dissemination of information about the program to teachers and parents as well as providing them with information on how to respond to disclosures, as well as who to report such disclosures to.

From the previous evaluation, teachers had expressed difficulty in undertaking the pre and post evaluations in the classrooms by themselves. As a result of this feedback, for the current study volunteers were recruited to gather the pre and post information from the children. This was done by a one-on-one process where the volunteers sat with each child in the selected class rooms. The volunteers were instructed on how to administer the evaluation without assisting the child with their answers. Further, volunteers were not informed on the evaluation goals and had not themselves seen the program.

DKSA was then performed at each of the schools with groups of children from Prep to Grade 3 with a maximum of 100 students in each setting. Students were each given a show bag at the end of the show containing an activity book based on all the messages in the show including the songs, and also containing stickers, pencils and a ruler. During the show teachers were provided with observation forms and asked to rate the level of student engagement and participation during the show delivery.

One week after the delivery of the show post evaluation was conducted, again by the research volunteers in a one-on-one capacity.

Design

To further explore the effectiveness of *Ditto's Keep Safe Adventure* a repeated measures design was implemented for this experiment, replicating the original repeated measures design of Experiment 1. Repeated measures *t*-tests and ANOVA's were run to assess significant differences.

Results from the 2008 Study

Figure 2 displays increases in average number of items recalled for each of the measured protective behaviours principles, both before and after show delivery among each of the schools.

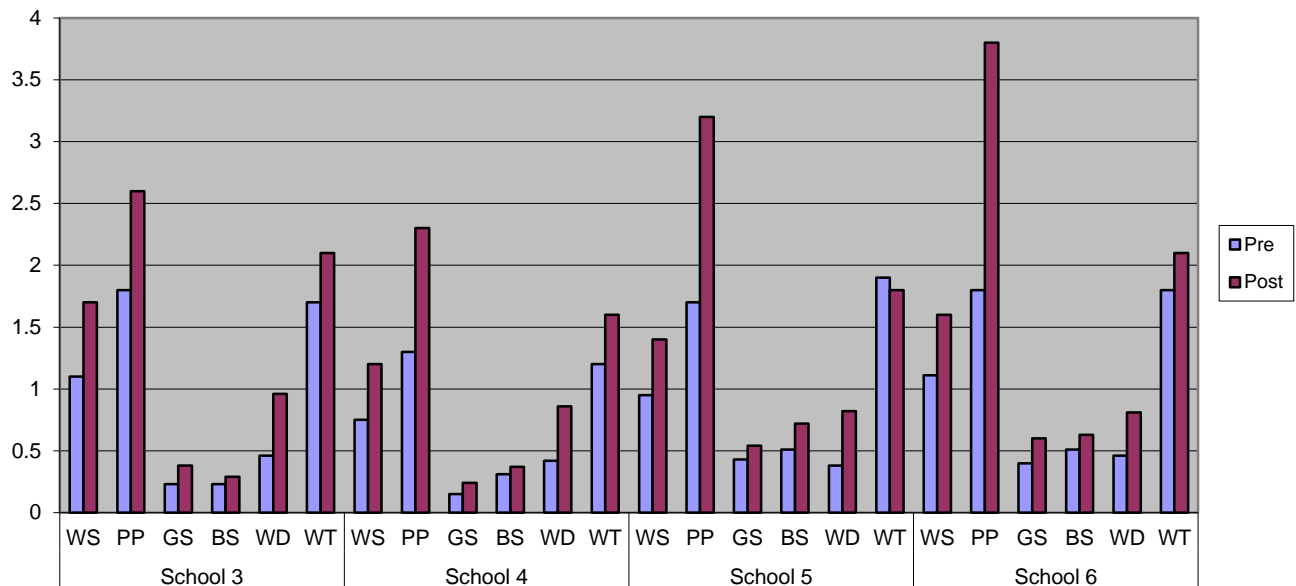


Figure 2: Note - WS = warning signs. PP = private parts. GS = good secrets. BS = bad secrets. WD = what to do. WT = who to tell.

It was expected that schools 3 and 4 would perform better than schools 5 and 6, as they had participated in the show twelve months earlier. Among all the schools across both experiments School 3 was the second best performer overall, while school 2 consistently outperformed all schools. Schools 4, 1, and 5 performed as well as each other.

The individual components have been further explored below:

Yes and No feelings

Related samples *t*-tests showed significant differences on all questions, *if someone put their arm around you and it didn't feel right, would that be a yes or no feeling?*, ($t = -4.29$, $df 246$, $p < .01$), *if a friend invited you to their birthday party, would that be a yes or no feeling?*, ($t = 3.31$, $df 244$, $p < .01$), *if your cousin asked you to show them your bottom, would that be a yes or no feeling?*, ($t = -4.25$, $df 244$, $p < .01$), and *if your favourite relative gave you a safe hug, would that be a yes or no feeling?*, ($t = 2.21$, $df 244$, $p < .05$). As in Experiment 1, the post condition saw substantial increases in numbers of children correctly identifying situations that cause 'no' feelings.

Warning Signs

Significant differences were found before and after program delivery ($t = -7.84$, $p < .01$), with the average number of warning signs identified after participation increasing from $M = .99$ ($SD = .54$) to $M = 1.47$ ($SD = .96$).

Private Parts

As in experiment 1, after participation in the Ditto program students demonstrated a significantly greater ability to identify which parts of the body are private than before the show ($t = -14.82$ $p < .01$).

Good Secrets

Again, after show delivery children were better able to demonstrate their understanding of a good secret ($t = -4.65$ $p < .01$). Children with learning difficulties recalled significantly less good secrets than other children under the post-test conditions ($t = 11.14$, $p < .01$).

Bad Secrets

Similarly, after participation in the Ditto program children were significantly better able to identify a bad secret ($t = -2.05$ $p < .01$).

What to do if you know a bad secret?

Students identified significantly more actions about ‘what to do’ under the post-test conditions ($t = -10.18$ $p < .05$). Prior to the program delivery more than half of all the children across the schools failed to answer the question correctly, or said they would ‘*do nothing*’, and again as in experiment 1, after viewing the show more than 80% could identify one action they could take. Qualitative reviews of this question revealed that again, the key message of “*run and tell someone you can trust*” was the most reported action in the post condition.

Who to talk to?

In reporting on individuals who the students could talk to, the average number of people identified in the pre-test condition was $M = 1.7$ ($SD = .99$). This result significantly increased after participation to $M = 1.86$ ($SD = 1.07$) ($t = -2.26 = p.05$).

Teacher Feedback

Across both studies surveys were distributed to the teachers of participating classes, as well as to all other schools running the program. Questions related to their views of the program’s usefulness, age-appropriateness and whether they saw positive changes in their students.

Sample

Bravehearts has been collecting information from schools on the implementation and appropriateness of *Ditto’s Keep Safe Adventure* since 2006. A total sample of 633 feedback forms have been received from individual teachers attending DKSA, across four program delivery sites:

Table 1: Feedback Received by Program Site

	Team Delivering Program				
Year	South East Qld	Cairns	Shepparton	Sydney	Total
2006	15	0	0	0	15
2007	83	0	0	0	83
2008	126	42	80	0	248
2009	79	27	31	47	184
2010	58	25	9	11	103
Total	361	94	120	58	633

The program is targeted to children from Prep to Grade 3, with a slightly modified version available for child care centres. Teachers from all year levels completed feedback surveys:

Table 2: Feedback Received by Year Level

Year Level	No. of Returned surveys
Child Care	85
Kindy/Prep	156
Kindy/Prep/Year1 combined	10
Year 1	73
Year 1/Year 2 combined	13
Year 2	76
Year 2/Year 3 combined	10
Year 3	71
Year 4	1
All levels	107
Special school	20
Total	622
<i>Not reported</i>	<i>11</i>

Program Implementation

The following table illustrates the level of agreement or otherwise with a series of six questions looking at the appropriateness and impact of the education program.

Table 3: Responses to Questionnaire

Statement	Yes	No	Unsure
Do you feel the program adequately provided the students with tools for personal safety?	619 (97.28%)	5 (0.8%)	9 (1.4%)
Do you feel the areas discussed were age appropriate?	620 (97.9%)	9 (1.4%)	4 (0.4%)
Did you feel that the size of the group was conducive to the children's learning needs?	581 (91.8%)	39 (6.2%)	13 (2.1%)
Have you noticed any positive changes in the behaviour of the students? ¹	260 (41.1%)	216 (34.1%)	157 (24.8%)
Did any of the children have a strong reaction to the program? ²	159 (25.6%)	366 (59.0%)	95 (15.4%)
Would you recommend this program to other schools?	608 (98.1%)	7 (1.1%)	5 (0.8%)

¹ Teachers found this question difficult to respond to as the feedback forms were often completed in a short time frame after the program had been run in the school.

² It was clear from responses that the concept of a 'strong reaction' was ill-defined.

Of these teachers, more than 97% say they feel the program provided students with appropriate language and tools for personal safety and that the material was age appropriate, and 98% said that they would recommend the program to others.

Qualitative Responses

A number of questions provided opportunities for teachers to provide qualitative responses.

A recurrent theme in teachers' comments were on the benefit for further resources to reinforce the messages from the 30 minute live show:

- Does need follow-up in classroom and before the lesson.
- Feel more than one show would be beneficial.
- The language and messages were great – very simple. Would like to hear about any other resources you have for use in the classroom.
- Needs to be revised. A few years back a Bravehearts CD was a good reminder & educational tool.
- Copy of songs and music would help us reinforce learning.
- Great to have more resources for follow-up after the show.
- Needs to be revisited or focussed on e.g. lead up exercises and follow up exercises teachers can use.
- Exercises for classroom beforehand would be beneficial.
- Greater follow-up by teachers, chaplain or yourself. I think at a minimum someone takes the kids through the workbook. This helps facilitate smaller group discussions.
- Resources for teachers to use in classroom for follow-up throughout the year.
- Outline the program before children attend... follow-up activities reinforce appropriate actions & share with family.
- We had good general class discussions & now we're initiated will build on the lessons learned in the classroom.
- We teachers need to plan for follow-up lessons.
- Follow up discussion were essential... later when looking at sample bag showed they have got a lot back about good/bad feelings.
- Followed up with discussion with students, all got the vital messages about personal safety. Further follow-up material would be great (when you get time!).
- Follow up sheets would help us reinforce the messages.
- Would like to see more resources for the classroom. Loved the messages and the language. The majority of our children 'got it'.
- Teachers thought that sample bags should be given to them privately to use as teaching resources... to make most out of it.

Teacher comments also emphasised the positive response the children had to the shows:

- Made students feel comfortable about discussing and learning topics sometimes considered embarrassing to talk about.
- Because children are working through booklet they are using some of the language in class & playground.
- Children openly and positively discussed program.
- Children discussing presentation during breaks & mature conversation about child protection is always positive.
- Children enjoyed talking about what they learnt.
- Children speaking more openly.

- Class discussions where children felt comfortable talking about personal safety.
- More openly talking about good/bad feelings & private parts.
- Opened dialogue.

Comments also emphasised the program's benefits for teachers in approaching child protection issues in the classroom:

- Much discussion generated.
- Gave good base for teachers to now communicate effectively with children.
- Did open the door to discussion.
- Language used was perfectly pitched at our grade level (1).
- Supports existing school/class program.
- Easily supports existing school program.
- Introduces protective behaviours.
- Excellent way to introduce the personal safety messages to children and easy to follow up.
- Gives everybody a common language & reason to talk about it.
- Good to provide everyone with common language.
- Language base was helpful.
- Useful for teachers and children in giving a common language.
- Empowered many mums and staff to have conversations about sensitive topics.

Discussion

The results from both of the evaluations undertaken clearly demonstrate the effectiveness of DKSA in teaching children key personal safety principles. Results from both studies reveal that after children's involvement in the program, their ability to recognise the physiological signs of danger, identify potentially unsafe situations, and identify actions to take to help themselves all increased significantly. This demonstrated increase in knowledge of protective behaviour components was a consistent finding between both of the experiments.

We were expecting to find that the students who had been exposed to the program twice would demonstrate higher retention than other students, however this was only partially supported by school 3. Of the two schools who participated in both studies, only one was in the top three performing schools. Upon investigation of the two remaining top-performing schools it was discovered that after the show the teachers in these schools had reviewed the program material with their students within the class room, including working on the activity book in class. Although expecting to find that repetition was the important factor in knowledge retention, what in fact we found was that this follow-up was the crucial factor in performance. These results are consistent with the reason as to why the New Zealand model is so effective, in that teacher involvement and in-class dissemination of the protective behaviours principles have a much greater impact on children's retention of information in the long term (Briggs & Hawkins, 1996).

A possible contributing factor into the reduced performance of school 4 in the second study could be the substantial number of children within this school who were identified as having learning difficulties. One of the consistent findings across both studies was that schools with higher percentages of children with learning difficulties consistently performed worse than those schools with lower number. The exception to this were the schools who had both high percentages of identified learning difficulty children, and also followed up the material in class. Although in the second study School 3 also had a substantial increase in learning difficulty students, this school also reported conducting substantial follow up of the material in the class room. This was also replicated with school 2, as although overall they had the highest amount of children with learning difficulties of all the schools, this was also the stand out performer overall. This particular school went to extraordinary lengths with their students and followed up the DKSA material every day for a week, including making posters, going over worksheets from the activity book and daily discussions of the material for one week was conducted. What these results appear to suggest is that the most significant factor in retention was the in-class follow up conducted that made the difference to students. In fact, if the students were identified as having a difficulty in the area of learning, then this follow up was particularly pertinent.

Reports from the teachers' evaluations illustrated a high level of support for the program, with the vast majority of teachers reporting the program to be effectively designed and a valuable resource in teaching their students. With what is already known about the challenges to teachers in approaching the topic of personal safety messages to students, the program clearly demonstrated that teachers find the program providing them and their students with the language to discuss potentially difficult subjects, as well as providing them with much needed skills and confidence in approaching this subject with their students.

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