Sample Characteristics of an Effective Abuse Prevention Curriculum

1. Whole school, whole child, whole community (WSCC) preventative approach that considers skills, awareness, and services

- Curriculum reinforces and builds self-efficacy and personal and social competencies across grade levels.
- Accurate, reliable and credible information is linked to behavior goals.
- Youth participate in curriculum design that responds to local context and needs including acknowledgement of positive and negative cultural messaging.
- Local data informs core topics that are delivered across the school curriculum in accordance with national laws.

2. Research-informed instructional approaches that go beyond awareness raising

- **Active skills-based learning** with time to practice and meet explicit goals addresses individual learner needs, maturity, current knowledge, values, and beliefs.
- Strategies are relevant and applicable to daily life and include role play, scenarios, small group discussions, interactive technology, and a sequenced approach (breaking skills down into smaller steps).
- **Knowledge acquisition** builds psychosocial traits of confidence, resilience, and self-esteem.
- Content addresses perceived risks and outcomes, and frames ethical/moral decision making.

3. Comprehensive in scope, developmentally appropriate to student maturity and needs, inclusive of difference and socio-culturally relevant

- Behavioral timing of topics is appropriate (before risky behavior occurs) and developmentally appropriate (for example, building refusal skills in cyberbullying before introducing topics such as sexting).
- Students’ current understanding, culture, and experiences are considered.
- Vulnerable moments (transitions, family crisis) and at-risk students (LGBT, ELL, special needs) are identified as opportunities for outreach (such as peer buddy, adult check in, and orientation programs).
- Culture, ethnicity, faith, disability, sexuality, gender, differentiated instruction needs, and youth culture considerations are explored and applied to multiple settings.
4. Well trained, supported teaching staff

- Teachers with personal interest in content who are willing to be role models are knowledgeable, comfortable with content, and supported by the community.
- Teachers are provided with professional development, resources, supervision, and time for preparation.
- Teachers reflect on their own attitudes about diversity education and sexuality as a human right.

5. Research based, theory driven content that is progressive over time and builds on previous knowledge

- Curriculum development process engages content experts or is based on empirical evidence or accepted best practice.
- Curriculum is piloted and subject to ongoing evaluation and updates, especially in context of technological changes.

6. Positive empowering approach to avoid scare tactics and confrontation

- A focus on negative consequences and harsh realities has been shown to be ineffective in changing behavior or avoiding risk.
- Content and delivery promotes solutions and self-advocacy, creative expression, development of critical thinking, and opportunities to accurately assess risk.
- Curriculum corrects misconceptions (avoids normalization of risky behavior, such as sexting), addresses social pressure (peers/social barriers) and influence of media/Internet, and reinforces health and safety enhancing attitudes and beliefs.

7. Clear goals and outcomes stated and effective assessment, monitoring, and evaluation designed

- Clearly mapped goals and objectives linked to learner needs and specific targeted behaviors are communicated to students and the community, including how protective interventions influence behavior.
- Curriculum includes tools to evaluate and monitor student and stakeholder feedback.

8. Supported by school staff, leadership, local authorities, and parent community

- Program engages adult role models and seeks support from entire staff, parents, local and regional authorities, including coaches, community groups (Little League, Scouts, etc.), healthcare professionals and social workers.
- Care should be taken to ensure partner contributions match ethos of curriculum objectives.
9. **Interventions are of sufficient quality and quantity**

- Program provides time for students to practice and receive feedback and reinforcement.
- Sufficient staff preparation and contact time are needed.
- Consideration should be given to needed timetable and resources (such as 1:1 devices like tablets) for optimal delivery.
- The goal of continuous delivery can only be accomplished when caregivers and all staff members share agreed upon values and vocabulary. “Prevention education operates across multiple settings...(and)...beyond school.” (Nation et al., 2003)

Derived and combined with permission by ICMEC from: [Key Principles of Effective Prevention Education (Research Summary by PSHE Association/CEOP, UK) 2016](#) and [School Health Guidelines (CDC) 2011](#). Additional sources: [Global Review of CSE Practice and Scope (UNESCO) 2015](#) and [Standards for Sexuality Education in Europe (WHO) 2010](#).