

Educator Sexual Misconduct in Schools: Guidelines for School Staff, Volunteers, and Community Partners

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Webinar Content

- **Sexual Abuse by an Educator: Composite Case Description**
 - Judith Cohen, M.D.
- **Educator Sexual Misconduct in Schools: Guidelines for School Staff, Volunteers, Community Partners**
 - Holly Priebe Sotelo, MSW, PPSC
- **Sexual Abuse by an Educator: Mental Health Perspective**
 - Ruthlyn Webster, LCSW, ACSW
- **WHAT IF: Examining Child Protection Strategies That Can Prevent Educator Sexual Misconduct**
 - Tonje M. Molyneux, M. Ed.

“Jane”

- 12 years old, well-adjusted, good student, many friends, popular
- Was very good athlete
- Financial issues in family, father’s job loss
- Moved from small parochial school to large public High School in 9th grade

Increased Vulnerability

- 13 years: struggled to make friends in HS—bullied, started to have eating problems
- Did well in cross country but 1 month later asked to quit—mom insisted she continue
- Became irritable, withdrawn
- Asked to be home schooled—mom refused
- Became angry, defiant at home, cut school, grades declined

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Disclosure

- 6 months later (April): ran away, found with cuts on arms
- MH evaluation→ D/C sexual abuse by cross country coach (who was also her English teacher) X 8 months,
- Grooming started in school, rescued from bullying
- Sexual abuse before/after cross country, in teacher's classroom behind locked door
- Believed “mom knew but made me return to school/cross country anyway”
- Diagnosis: PTSD; mother also extremely distressed

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Aftermath

- Police and school investigated, other teachers told about investigation, disbelieved and were unsupportive
- Another English teacher called on Jane to repeat allegations in front of class
- Peers called her “ho” on social media → Jane attempted suicide after this episode
- Referred to treatment and online schooling
- Jane and mother responded very well to Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
- Legal issues with school ongoing

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Responding to Allegations of Sexual Misconduct

- Child Abuse Report – Mandated Reporters
 - Penal Code 11165.7 – Virtually every school employee is a mandated reported.
 - Exception: volunteers
 - Must report to law enforcement if allegations are non-family members
 - Must report to CPS if alleged abuse is in the home

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Responding to Allegations of Sexual Misconduct

- Time line of reporting
 - Immediately
 - Written report within 36 hours
- Rules
 - Can not delegate someone else to report it
 - Insufficient to report it to a supervisor

Child Abuse Reporting

- Mandated reporter must provide their names, but will be confidential
- No civil liability for reporting in good faith
- Failure to report
 - Misdemeanor
 - 6 months in county jail
 - \$1000 fine
- Refer to district policy

Response to Child Abuse Allegations

- Investigation (outside or inside)
 - If law enforcement says – “Handle it administratively; need more information”, District **MUST** continue investigation!
- Intervention
 - Stop the conduct
 - Protect the victim
 - Discipline the perpetrators

Response to Child Abuse

- **IMPORTANT – NOTIFICATION OF CREDENTIALING DEPARTMENT:**
 - If the alleged perpetrator is removed from the school, either for an arrest or work related suspension, refer to your local state credentialing department to report the incident.
- *In California, the California Teaching Credential (CTC) must be notified within 10 days of the removal from the school.*

Do you know the rules in your state?

Responding (continued)

- Supporting the victim
 - Use caution when referring to counseling
 - Not to interfere with criminal investigation
 - Refer to local social worker or case worker
 - Support child from retaliation
 - Monitor social media
 - Reinforce pro-social and anti-bullying messaging throughout the school

Responding (continued)

- Notification to staff
 - Refer to Human Resources
- Notification to parents and community
 - Refer to law enforcement and district policy
- Media Spokesperson – defer to your local district Communications Office

What is Child Sexual Abuse?

Child sexual abuse is widespread and is known to lead to a multitude of adverse outcomes, such as self-destructive behaviors, educational underachievement, difficulties with concentration, high risk behaviors and interpersonal problems (e.g., failure to trust)

The Journal of Pediatric Health Care highlights both the short-term and long-term consequences of sexual abuse and the need for practitioners to understand the consequences of sexual abuse in order to anticipate the physical and mental health needs of the victim and family.

Considerations

- Sexual abuse typically does not occur in isolation. The child who experiences sexual abuse is at high risk for other negative childhood experiences.
- The child who experiences sexual abuse by a trusted school employee experiences boundary violation in the inequality of relationship.
- The experience leaves the victim-child vulnerable, confused, betrayed and angry.

Predictable Patterns

- The school personnel who violates his or her student trust is identified by Shoop (2004) as having “predictable patterns.”
 - Selection of a vulnerable student
 - Followed by a period of testing (accidental touching)
 - Conversations of sexual issues and jokes
 - Grooming behaviors

Predictable Patterns

- The child who unwittingly responds to the special attention or does not respond negatively is further exposed to grooming across boundaries into clearly inappropriate behaviors.
- A 17-year-old left vulnerable because of the sudden death of a parent is taken advantage of, by school personnel violating trust.

Effects of Educator Sexual Misconduct

- A child who is sexually abused by a school personnel faces constant trauma reminders and if expected to attend the same school can be re-traumatized.
- Effects on targeted students includes the suffering of emotional, educational and developmental or health difficulties
- Leading to behaviors that would negatively impact their academic achievements.

Child Effects

- After a child experiences sexual abuse by an educator, typical responses include:
 - Avoiding the teacher and other educators
 - Not wanting to attend school
 - Trouble paying attention in class
 - Staying home from school or cutting classes
 - Having difficulty studying
 - With subsequent negative academic repercussions:
 - lower grades on test or assignments
 - lower grades in class
 - trouble with school authorities
 - cannot learn
 - negative internalizing and externalizing behaviors
 - loses interest in school

Child Effects

- **Health** effects include:
 - Sleep disorders
 - Appetite loss
 - Negative feelings of self worth
- **Mental health** effects can include:
 - Symptoms of attention deficit hyperactivity disorder (ADHD) which can develop as a result of sexual abuse, leading to misdiagnosis
 - Post-traumatic stress disorder (PTSD)
 - Anxiety
 - Depression
 - Suicide
 - Substance abuse
 - Obesity
- A history of sexual abuse also places an individual at increase risk of re-victimization
- Sexual abuse by school personnel engenders a feeling of betrayal and vulnerability.

Effects on Parents

- Most parents, like their child, experience a sense of betrayal, “The very person who is expected to protect ‘my child’ is the abuser.”
- Some parents, as in the case of the 17-year-old, suffers job lost because of excessive absences to attend court hearings and address emotional needs stemming from the abuse.
- All causing further guilt and sadness on the victim child.

Effects on Parents

- Parents are often left feeling helpless, hopeless and vulnerable when school authorities take a neutral stand or the school district is not supportive, responsive and or protective.
- Parent can become hyper-vigilant
- Every effort should be taken to provide legal advocacy to the family.

What Can We Do?

Mental health professionals are asked to:

- Evaluate the child and family trauma needs through a trauma lens and provide trauma-informed care because sexual trauma can interrupt normal coping skills and interfere with victims' life trajectories
- Provide evidence supported treatment (e.g. Trauma-Focused Cognitive Behavior Therapy (TF-CBT) to address maladaptive cognition/responses
- Build positive therapeutic relationship-trust
- Help affect regulation

What Can We Do?

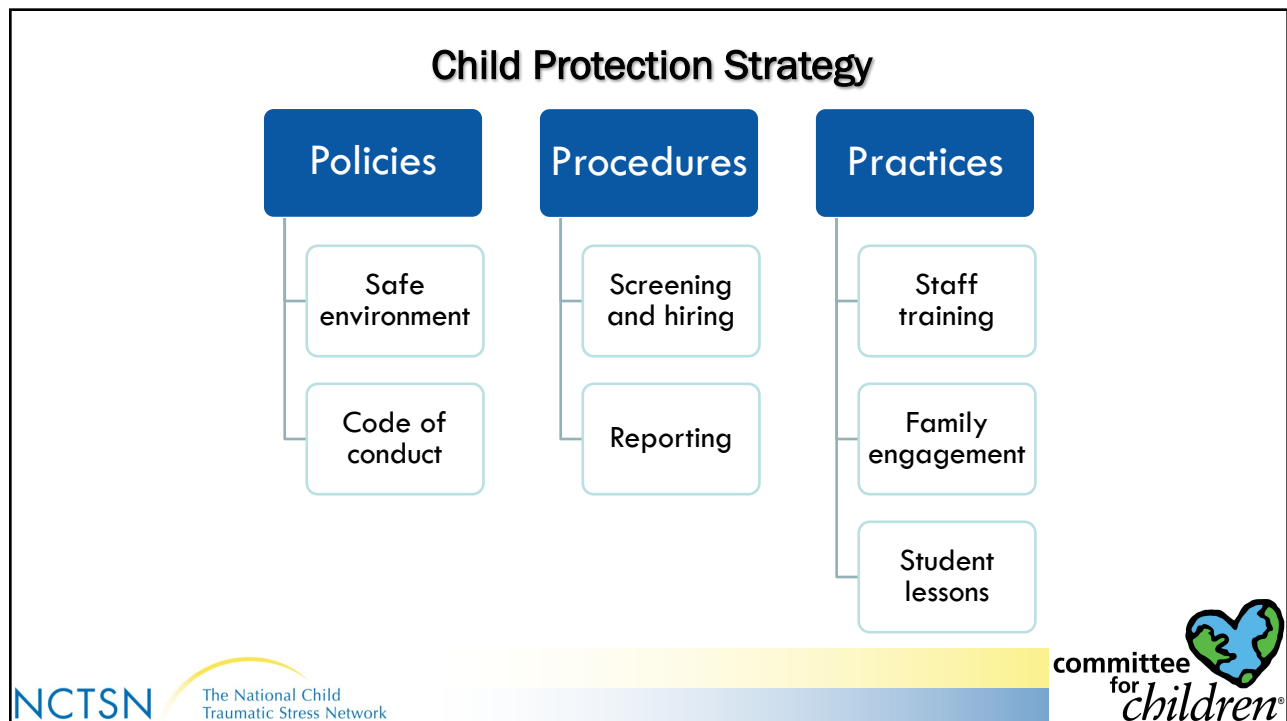
- When a child does disclose, every effort should be made to protect him or her from public humiliation/bullying (for disclosing the abuse of a favorite teacher).
- If school or school district are not supportive, every effort should be made to provide MH treatment for child and parent(s)/caregivers in a community mental health setting.

What If?

Examining Child Protection Strategies That
Can Prevent Educator Sexual Misconduct

Tonje M. Molyneux, M. Ed.
Senior Program Developer
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What if what happened to “Jane” could have been prevented?



Safe Environment Policy

Visibility

Supervision

Access



Prevents Jane being:

- Alone with coach
- In a room with no visibility into it

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Staff Code of Conduct Policy

Physical behavior

Communication

General conduct



Prevents:

- Inappropriate/abusive touching
- Inappropriate communication
- Grooming behaviors

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Screening and Hiring Procedures

Written application

Policy statement of receipt and agreement

Reference check

Background checks



Prevents:

- Coach/teacher being hired
- Coach/teacher applying for position

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Reporting Procedures

Who reports?

When is a report made?

To whom do you report?

How is a report made?

How is documentation stored?



Prevents:

- Reports being made incorrectly
- Reports that can't help prosecute accused

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Staff Training

Recognize indicators of sexual abuse

Respond to direct and indirect disclosures

Report when there's reasonable cause to suspect abuse or when there's a disclosure



Prevents:

- Duration of abuse
- Extent of detrimental mental health outcomes
- Negative staff response to allegations

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Family Engagement and Education

Need to *know* about child sexual abuse, child protection strategy, resources available to help them

Need to *be able to* talk to their child, talk to other adults, reinforce personal safety skills, respond to disclosure, report abuse



Prevents:

Abuse or duration of abuse at multiple time points

Jane had indicators of mental health issues before the abuse started – bullying and eating problems.

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Personal Safety Skills Training

Recognize, report, and **refuse** unsafe and abusive situations, including sexual abuse



Prevents:

- Grooming
- Risk
- Abuse

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Second Step Child Protection Unit



- Staff training
- Student lessons
- Family materials

cfchildren.org/child-protection

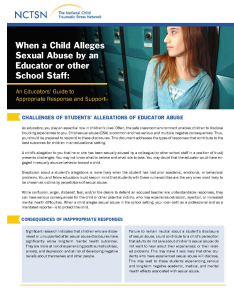
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Resources



When a Child Alleges Sexual Abuse by an Educator or Other School Staff

www.nctsn.org/sites/default/files/assets/pdfs/sexualabusebyeducator.pdf



For schools: Child Protection Unit –
www.cfchildren.org/child-protection

For families: Early, Open, Often –
www.earlyopenoften.org

In Spanish: www.abiertoyamenudo.org