NEXT GEN SAFETY TRAINING



ABUSE AND SELF-HARM AWARENESS AND REPORTING GUIDELINES

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OVERVIEW

As we raise up the next generation of hope carriers, keeping our kids and students safe is our top priority. An important part of that is equipping every adult who serves on our next gen teams to be able to recognize and report abuse, self-harm, and suicidal thoughts. As the adults who love and lead our kids and students, you matter when it comes to keeping them safe!

Statistics show us that 1 in 4 girls and 1 in 6 boys may be sexually abused by the time they are 18. It's estimated that only 1 in 10 minors who have been abused will tell someone. If you picture the Kids room you are serving in or the Students circle that you lead, that's about 4 out of 20 kids who may have experienced sexual abuse, and only 1 (if any) of those 4 who will speak out on their own. As adults who are coming alongside the next gen, we must learn how to identify abusive situations because our kids and students often can't be their own voice. They need someone – you – to step in and be their advocate.

Statistics also tell us that suicide is the second leading cause of death for kids, students, and young adults aged 10-34 years old. Nearly 80% of those kids, students, and young adults cry out in some way before attempting suicide. We must be equipped on how to identify next gen who are struggling and approach these topics with them so we can meet them where they're at and get them the help they need.

When it comes to abuse, self-harm, and suicidal thoughts, learning how to recognize and report is our first step in keeping them safe. So, in this document, you'll learn about things like the types of abuse minors may experience, questions you can ask if you're concerned for a minor, and how to report abuse, self-harm, and suicidal thoughts. Our ask is for you to carefully review each section and take any questions you have to your staff leader.

It's an honor and a privilege to be entrusted with raising up the next generation of hope carriers. Thank you for partnering with us to keep them safe!

- The Next Gen Team

TYPES OF ABUSE

This section specifically covers the different types of abuse minors may experience, including sexual abuse, physical abuse, neglect, emotional abuse, and domestic violence. The goal is for you to be able to recognize each of these types of abuse, be equipped with questions to ask when a minor confides in you, and understand your role in reporting any instances of abuse.

SEXUAL ABUSE

DEFINITION | Sexual abuse is any sexual conduct harmful to a minor's mental, emotional, or physical welfare. This includes conduct that constitutes the offense of indecency with a minor, sexual assault or aggravated sexual assault, failure to make a reasonable effort to prevent sexual conduct harmful to a minor, compelling or encouraging a minor to engage in sexual conduct, and causing, permitting, encouraging, engaging in, or allowing the photographing, filming, or depicting of a minor if the person knew or should have known that the resulting photograph, film, or depiction of the minor is obscene or pornographic.

SIGNS | The following are signs commonly associated with sexual abuse, but they are not absolutes. This list is not a checklist but a guide to help you identify sexual abuse when it's present.

- Pain, swelling, or itching in genital area
- Difficulty walking or sitting
- Excessive seductiveness, inappropriate sex play, or premature understanding of sex
- Overly concerned for siblings
- Significant weight change
- Suicide attempts (especially adolescents)
- Feeling threatened by physical contact or closeness
- Extreme fear of being alone with adults, especially if of a particular gender
- Sexual victimization of other minors
- Major change in normal mood or behavior

GROOMING | Sexual abuse is a unique form of child victimization. It's almost always perpetrated by someone who is in a position of trust – the last person we would expect. Grooming involves building a relationship and trust with the minor. It may include the following:

- Treating the minor as more special than others
- Buying the minor gifts or giving them money
- Making excuses to be alone with the minor
- Tickling and wrestling
- Touching appropriate or inappropriate
- Viewing the minor when nude or exposing the minor to nudity
- Telling the minor about his/her sexual activity with others
- Showing the minor pornography

Grooming makes it difficult to escape the abuse and keeps the minor from telling anyone, as they often trust the person and feel a loyalty to them. It makes them feel that it's their fault. At times, power and authority are used as tools. Perpetrators not only groom minors for abuse; they also groom parents, families, and communities.

PHYSICAL ABUSE

DEFINITION | Physical abuse is injury that results in substantial harm to a minor or the genuine threat of substantial harm from physical injury to a minor. This excludes an accident or reasonable discipline by a parent or guardian that doesn't expose the minor to a substantial risk of harm. Physical abuse also includes failure to make a reasonable effort to prevent an action by another person that results in substantial harm to a minor.

SIGNS | The following are signs commonly associated with physical abuse, but they are not absolutes. This list is not a checklist but a guide to help you identify physical abuse when it's present:

- Frequent injuries that are unexplained and/or inadequately explained by the minor or parent, such as bruises, cuts, black eyes, fractures, burns, etc.
- Burns or bruises in an unusual pattern that may indicate the use of an instrument
- Lack of reaction to pain
- Injuries that appear after the minor has not been seen for several days
- Evidence of delayed or inappropriate treatment for injuries
- Frequent complaints of pain without obvious injury
- Complaints of soreness or discomfort when moving
- Aggressive, disruptive, destructive, or self-destructive behavior
- Passive, withdrawn, or emotionless behavior
- Fear of going home or seeing parents/caregivers
- Injuries that involve the face, backs of hands, buttocks, genital area, abdomen, back, or sides of the body

NEGLECT

DEFINITION | Neglect is failure to provide needed food, clothing, shelter, medical care, or supervision to the extent that a minor's health, safety, and well-being are threatened with harm. Neglect is also the leaving of a minor in a situation where they would be exposed to a substantial risk of physical or mental harm without arranging necessary care for the minor, or the demonstration of an intent not to return by a parent or guardian of the minor.

SIGNS | The following are signs commonly associated with neglect, but they are not absolutes. This list is not a checklist but a guide to help you identify neglect when it's present:

- Obvious malnourishment or inadequate nutrition
- Lack of personal cleanliness
- Torn and/or dirty clothes
- Need for glasses, dental care, or other unattended medical attention
- Regular displays of fatigue or listlessness
- Consistent hunger or stealing or begging for food
- Lack of supervision for long periods of time
- Reports that no caretaker is at home
- Self-destructive behavior
- Extreme loneliness and need for affection

EMOTIONAL ABUSE

DEFINITION | Emotional abuse is inflicting mental or emotional injury to a minor and/or causing or permitting the minor to be in a situation in which they sustain a mental or emotional injury that results in an observable and material impairment in the minor's growth, development, or psychological functioning.

SIGNS | The following are signs commonly associated with emotional abuse, but they are not absolutes. This list is not a checklist but a guide to help you identify emotional abuse when it's present:

- Speech disorders
- Substance abuse
- Ulcers, asthma, or severe allergies
- Habit disorders (sucking, rocking, biting, etc.)
- Antisocial or destructive behavior
- Delinquent behavior (especially adolescents)
- Developmental delays

DOMESTIC VIOLENCE

DEFINITION | Domestic violence is an act by a member of a family or household against another member of the household that's intended to result in physical harm, bodily injury, assault, or sexual assault. Domestic violence can also be a threat that reasonably places the member in fear of imminent physical harm, bodily injury, assault, or sexual assault. This does not include defensive measures to protect oneself.

SIGNS | The following are signs commonly associated with domestic violence, but they are not absolutes. This list is not a checklist but a guide to help you identify domestic violence when it's present:

- Rigid defenses, aloofness, sarcasm, or blaming
- Chaos or difficulty in response to limits
- Confusion love/hate towards the abuser
- Burdened role reversal as the caretaker
- Nervousness, anxiety, or a short attention span
- Difficulty trusting others
- May be excessively social (to stay away from home)

TALKING ABOUT ABUSE

Minors who are victims of abuse have often been sworn to secrecy and may be afraid and ashamed to talk to anyone about it. If you become a safe person who they can trust, you may create an opportunity for them to speak out. Here are some best practices to keep in mind:

- Always believe them. Minors rarely lie about such intense and painful topics.
- Remain calm don't overreact. If they feel they are in trouble, they may stop talking.

- Ask open-ended questions that allow them to tell their story in their own words. If you can't think of questions to ask, you can simply say, "Tell me more about that."
- Reassure them that they have done the right thing by telling you and that any abuse that happened is not their fault.
- Don't criticize the minor (or the abuser).
- Don't make promises you can't keep. Don't promise the minor that you will make things better. In situations of abuse, even if justice is served, things may not always feel "better" to them.
- In all scenarios, it's important to let the minor know that you can't keep this a secret. Tell them that your role is to keep them safe.

QUESTIONS TO ASK

If a kid or student opens up to you or you become aware that they may be experiencing abuse, it's important that you don't interrogate them. It's best to ask simple, open-ended questions. Here are some examples that may help:

SEXUAL ABUSE

- Has anyone done something that makes you feel uncomfortable?
- Are there places on your body where it's not okay for someone to touch?
 - Where are those places?
 - Has anyone ever touched or hurt those places?

PHYSICAL ABUSE

- When you get in trouble at home or school, what happens?
- Does anyone ever leave any marks or bruises?
- Does anyone ever say anything to you about not telling anyone or what will happen if you do?

ALL ABUSE

- Tell me about your family. What do you like or not like?
- Has anyone told you to keep a secret?
- Do you feel safe at home?

REPORTING ABUSE

In the state of Texas, every adult is a mandatory reporter of abuse, which means that you are responsible to report each time you have any concern or suspicion of abuse. These are the steps you need to take if you suspect that a minor has been or is currently being subjected to abuse:

- 1. You must immediately (within 24 hours) report it to the Texas Abuse Hotline at **1-800-252-5400** or report it online at **txabusehotline.org**.
- 2. We also ask that you inform your staff leader as soon as possible so that they can partner with you to keep our next gen safe.

It's important to note that child protection agencies ask you NOT to notify the minor's parents when making a report of abuse to authorities. Even if you don't believe the parents are involved in the abuse, it's important that you don't notify them. When parents have notification that a report has been made, they have time to react by:

- Coaching the minor to say or not say something
- Inflicting further abuse on the minor
- Trying to evade authorities by leaving town or moving

Keep in mind that you don't have to be certain that abuse has occurred in order to make a report. Your legal responsibility is to make the report and allow the authorities to determine whether or not to investigate. The authorities will assess the minor's safety and the family's needs. Oftentimes, a report of suspected abuse results in intervention that supports the whole family and promotes a safe, nurturing environment for the minor(s) involved.

SELF-HARM AND SUICIDAL THOUGHTS

This section specifically covers self-harm and suicidal thoughts. The goal is for you to be able to recognize signs of self-harm and suicidal thoughts, be equipped with questions to ask when a minor confides in you or you identify those signs, and understand your role in reporting self-harm and suicidal thoughts.

SELF-HARM

DEFINITION | Self-harm and self-injury are defined as the purposeful act of hurting oneself by any means. Common forms of self-harm include cutting, scratching, burning, hitting oneself (this includes banging one's head or body against a surface), biting oneself, poking at one's skin with sharp objects, and pulling out one's hair. A minor who is self-harming or thinking about self-harming is experiencing emotional distress, but self-harm isn't the same as a suicide attempt and isn't always indicitive of suicidal ideation.

SIGNS | The following are signs commonly associated with self-harm, but they are not absolutes. This list is not a checklist but a guide to help you identify self-harm when it's occurring:

- Scars
- Fresh cuts, burns, scratches, bite marks, or bruises
- Frequent bandages or bruises
- Rubbing an area excessively to create a burn (often done with an eraser or pen)
- Wearing long sleeves or long pants even in hot weather
- Frequent reports of accidental injury
- Difficulties in interpersonal relationships
- Isolation
- Behavioral and emotional instability and impulsivity

SUICIDAL THOUGHTS

DEFINITION | Suicidal thoughts or suicidal ideation occur when someone is thinking about, considering, or planning suicide. Thoughts can range from creating a detailed plan to having fleeting consideration.

SIGNS | The following are signs commonly associated with suicidal thoughts, but they are not absolutes. This list is not a checklist but a guide to help you identify suicidal thoughts when they're present:

- Talking about wanting to die or disappear
- Feeling empty, hopeless, or purposeless
- Expressing severe guilt and shame
- Feeling like a burden to others
- Experiencing depressive episodes and anxiety attacks
- Withdrawing from peers or family, isolating oneself
- Saying goodbye or giving away prized possessions
- Writing suicide notes

- Displaying extremely risky behavior
- Substance abuse
- Changes in sleeping habits, including sleeping too much or too little
- Self-harming behavior

TALKING ABOUT SELF-HARM AND SUICIDAL THOUGHTS

Minors who are engaging in self-harming behaviors and experiencing suicidal thoughts are experiencing high levels of emotional distress. If a minor opens up to you about self-harm or suicidal thoughts, here are some best practices to keep in mind:

- This should not be seen as a behavior used to seek attention. Someone who is hurting themselves is often trying to cope with distressing or overwhelming feelings and experiences.
- Remain calm. Panic or overreaction may impact how much they open up to you.
- In all scenarios, it's important to let a minor know that you can't keep this a secret. Tell them that your role is to keep them safe.

It's important that we actively listen and ask the appropriate questions when a minor confides in us, as this can save their life. Here are some questions to ask when talking to a minor about self-harm and suicidal thoughts:

- I've noticed the bruises (cuts, scratches, bite-marks, burns, etc.) on you over the last few weeks, and I care about you and want to make sure you're okay. I'm curious if you've been hurting yourself.
 - Have you told your parents/caregiver?
 - When was the last time you self-harmed? When are you planning to self-harm again?
- Have you had any thoughts about harming yourself or taking your own life?

REPORTING SELF-HARM AND SUICIDAL THOUGHTS

If you're concerned that a minor is a danger to themself or suspect that they may be self-harming or experiencing suicidal thoughts, we ask that you immediately tell your staff leader and report it to the safety team so that they can perform an evaluation. If the safety team or your staff leader is not available and you believe the minor is in immediate danger, it's appropriate to call 911.