

# **Dating Matters™: Guidelines for Safety Monitoring**

**DRAFT**

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## Guidelines for Safety Monitoring (DRAFT)

### I. Overview

The purpose of this document is to provide guidance to grantees on safety monitoring related to the planning and implementation of the student and parent curricula for Dating Matters. This guidance will cover the pilot of the newly developed CDC curricula sessions, as well as full implementation of the curricula and the brand ambassador component beginning in Year 2. This guide is intended to be a “living document” that may be updated by CDC as new material becomes available.

Grantees and their partner organizations may have established procedures related to the material covered in this document. This document serves as a guide to assist grantees in developing site-specific protocols in the following four areas: mild and moderate distress, extreme distress, suspected child abuse and neglect, and imminent harm. Grantees can rely directly on these guidelines if desired; however, it is strongly recommended that grantees tailor these guidelines to reflect the needs of their communities, as well as any site-specific requirements and whether formal approval is needed on the protocols. CDC and Technical Assistance (TA) providers are available for assistance and information as these protocols are developed and implemented over the course of Dating Matters. That said, it is critical that all sites have procedures in place for handling these events prior to piloting the curricula.

A key feature of these guidelines is a Pilot Implementation Planning Worksheet (see **Appendix A**), which addresses four key components: Distress Protocol, Suspected Child Abuse or Neglect, Imminent Harm, and Resources. For each component, the worksheet delineates the concrete tasks to be completed by grantees; what is needed to complete each task; the responsible party; and the due date for each task (i.e., internal due date based on grantee’s schedule for pilot implementation). This worksheet will be reviewed during the biweekly TA calls to provide a framework within which grantees and TA providers can jointly discuss program progress, address challenges and barriers, and identify resources needed to complete tasks in a timely manner.

The topics covered in this guidance document include the following:

- Disclosures by participants and requests for referrals (**Section II**)
- Distress: Overview and How to Handle Mild and Moderate Distress (**Section III**)
- Serious Events (**Section IV**)
  - Extreme distress
  - Suspect child abuse or neglect
  - Imminent harm
- Resources (**Section V**)
- Appendices
  - Appendix A Planning Worksheet
  - Appendix B National Resources for Students and Parents
  - Appendix C Template – Documentation of Serious Events

## **II. Disclosures by Participants and Requests for Referrals**

This section discusses participant disclosures and requests for referrals, and includes a recommended approach for handling disclosures and referral requests. It is important to note that some participants who disclose violence victimization or perpetration may exhibit mild or moderate distress (see **Section III**) or extreme distress (see **Section IV**). These reactions are not uncommon when delivering violence prevention programs. Disclosures may also describe suspected child abuse or neglect, or imminent harm (see **Section IV**).

Because implementers cannot predict what disclosures may be made during a given session, or the distress or serious events that may occur, they need to be proactive in describing the limits to confidentiality and privacy to participants. One illustration is the need for implementers to let students and parents know that if they reveal that any individual is in immediate or potential danger, the implementer must report this. It is recommended that implementers cover these issues in introductory ‘housekeeping’ discussions at the beginning of program implementation.

### **A. Disclosures**

Given the focus of the school and parent curricula, it is possible that a participant may disclose violence victimization or perpetration. For example, a student may stay after class to talk with the implementer about her boyfriend saying mean things about her in front of friends, or a mother may describe a previous experience with domestic violence with an ex-husband who is no longer living in the home, and her concerns about how this may affect her son when he begins dating.

It is possible that a participant will be distressed when making a disclosure, or that the participant will disclose suspected child abuse or neglect, or imminent harm. Although these situations are less likely, it is imperative that grantees are fully prepared to handle these occurrences prior to beginning any implementation. Subsequent sections delineate recommended procedures for dealing with disclosures involving mild or moderate distress (**Section III**) and dealing with more serious events, such as extreme distress, suspected child abuse or neglect, or imminent harm (see **Section IV**). Grantees are responsible for developing protocols for each of these situations. In addition, as will be covered in more detail in **Section V**, grantees are also responsible for developing a resource handout that includes both national and local resources prior to program implementation. This handout should be available at all student and parent sessions. **Appendix B** presents lists of national resources for both students and parents, respectively.

It is also possible that a participant will make a disclosure without exhibiting distress, and without disclosing suspected child abuse or neglect or imminent harm. As a check to make sure the implementer is not misreading a lack of apparent distress, the implementer may want to summarize what the participant said and acknowledge his or her feelings (e.g., “You sound like you’re feeling all right about what happened with your girlfriend last weekend”). If distress is not apparent, the recommended approach is for the implementer to provide the participant with a resource handout that contains relevant national and local resources.

### **B. Requests for Referral**

It is also possible that a parent or student will request a referral from the implementer without displaying any type of distress or disclosing suspected child abuse or neglect or imminent harm.

Examples include the following:

- “Can you tell me how I can find out more about dating abuse or helping a friend who has experienced dating abuse?”
- “Who would I talk to if I hear about my son/daughter/friend being in an abusive relationship?”

The recommended approach to handle requests for referrals is for the implementer to provide the student or parent with the resource handout and to indicate an appropriate organization for their question/issue. Again, it is important to note that **Sections III** and **IV** delineate guidelines for handling requests for referrals accompanied by distress or a disclosure of suspected child abuse or neglect or imminent harm.

### III. Distress: Overview and How to Handle Mild and Moderate Types

#### A. Overview

When implementing the Dating Matters curricula with students and parents, it is possible that the discussions may make participants feel uncomfortable and experience distress. Distress can be thought of as the body’s response to discomfort. The onset of distress can be difficult to recognize, and when present, distress can be mild, moderate, or extreme. **Table 1** describes three types of distress and examples of how each can be manifested.

**Table 1. Three Types of Distress: Mild, Moderate, and Extreme**

Type	Characteristics	Example
Mild distress	<ul style="list-style-type: none"> <li>▪ Statement made about being worried, nervous, and/or sad</li> <li>▪ No emotional reaction</li> </ul>	<p>“My girlfriend is tripping. She’s got me all upset.” Or “I wonder if my son is going to follow in my shoes and get into a violent dating relationship because he saw his father and me fighting all the time” But no signs of actually being upset (no tears, no emotional reaction).</p>
Moderate distress	<ul style="list-style-type: none"> <li>▪ May report feeling bad or being sad</li> <li>▪ Shows some emotional reaction, such as being tearful, looking anxious, or having nervous speech</li> <li>▪ Recovers from emotional reaction, able to calm self down</li> </ul>	<p>“I’ve been really sad since my boyfriend broke up with me 3 weeks ago and he spread rumors about me on facebook (tears coming down face, picking at her fingernails). He’s already got a new girlfriend, and it’s all over his facebook page.” Cries but then recovers.</p> <p>(implementer acknowledges that student had been feeling sad) “I’m feeling better now than a few weeks ago. My friends have been really supportive and everyone knew the facebook stuff was just a bunch of lies” (tears slow down and stop).</p>
Extreme	<ul style="list-style-type: none"> <li>▪ Extreme emotional reaction</li> </ul>	<p>“My boyfriend gets so upset when I</p>

distress	<ul style="list-style-type: none"> <li>▪ Statements made indicating concern about unwanted sexual activity or dating violence to the point that the individual is consumed with worry or anxiety</li> <li>▪ Statements including extreme hopelessness, sadness, or depression</li> <li>▪ Participant cannot stop crying or anger does not subside to the point that implementer is worried about the participant; statements about sadness become more severe, volunteers more information about depressive symptoms (e.g., not eating/overeating, not sleeping/sleeping too much, thoughts of suicide/homicide, no interest in anything, loss of affect/functioning at work/school/home)</li> </ul>	<p>hang out with my friends or he can't reach me. He really scares me when he grabs me and won't let me leave to go home. I feel so sad sometimes—I don't know what to do."</p> <p>(Respondent continues to cry, unable to calm down). "I've been sad like this for weeks. My friends are telling me that I'm losing weight, I'm having a hard time waking up in the mornings."</p>
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Prior to implementation of the Dating Matters curricula, it is important that grantees are prepared to handle distressed participants. The following subsection presents steps on how to handle participants who exhibit mild and moderate distress; grantees are expected to develop a protocol for handling these situations. Steps for handling participants with extreme distress are discussed in **Section IV**.

***B. How to Handle Participants Who Exhibit Mild to Moderate Distress***

**Student Implementation**

If a student shows signs of mild or moderate distress during implementation of the student curriculum, the implementer should

- Acknowledge the student's feelings (e.g., "I see that you got upset during the role play we just completed.")
- Ask the student if they would like to take a short break
- Evaluate whether the distress is extreme (see **Table 1**).

If the distress is mild or moderate, the implementer should discuss the situation with the TA provider (for the pilot implementation, this discussion should occur at the debrief meeting that will occur after each session). The implementer also should note any patterns to the distress, or if the distress seems associated with a particular curricula component. As will be discussed in **Section IV**, if the distress is extreme, the grantee needs to contact CDC (Henrietta Kuoh) and the TA provider within 48 hours.

If the distress is not extreme and the student appears to recover quickly, the implementer can provide the student an option to continue with the program or to speak with a school counselor. Although students will receive resource information in one of the sessions, distress may occur prior to that material being covered. This point underscores the importance of the implementer always having the resource handout readily available. In addition, even if that session is already completed, the student can be offered the resource handout as a reminder if they continue to feel distressed. If the distress is extreme, see **Section IV**.

**Parent Implementation**

If a parent shows signs of mild or moderate distress during implementation of the curriculum, the implementer should

- Acknowledge the parent’s feelings (e.g., “I see this discussion is making you feel upset.”)
- Ask the parent if they would like to take a short break, and let the parent know that he or she will be given a resource list at the end of the session if they would like to talk with someone
- Evaluate whether the distress is extreme (see **Table 1**).

If the distress is mild or moderate, the implementer should discuss the situation with the TA provider (for the pilot implementation, this discussion should take place during the debrief discussion that will occur after each session). The implementer also should note any patterns to the distress, or if it seems associated with a particular curricula component.

If the distress is not extreme and the parent wants to continue with the session, the implementer should complete the session and encourage the parent to contact someone on the resource handout for further information. If the distress is extreme, see **Section IV**. Also, if the distress is extreme, CDC (Henrietta Kuoh) and the grantee’s TA provider need to be contacted within 48 hours.

#### **IV. Serious Events**

Although rare, serious events can occur during program implementation. These events include extreme distress, and disclosures about suspected child abuse or neglect, and imminent harm. These events require an immediate response from the implementer. In addition, grantees need to have a detailed protocol in place prior to implementation to address these situations, as well as a first responder for these events should they occur. Each grantee’s site-specific protocol should identify a person who will serve as the first responder at the school/organization where the program is being implemented; a person who will serve as the back-up responder should the first responder not be available; and contact information for both individuals. ***Should a serious event occur, the grantee needs to contact CDC (Henrietta Kuoh) within 48 hours. CDC should not be given identifying information about any participant. In addition, the TA provider should be e-mailed about the event within 48 hours (for the pilot implementation, the implementer should discuss the event with the TA provider during the debrief discussion that will occur after each session).***

**In addition, if a serious event occurs, the Dating Matters director should be contacted as soon as possible.** Depending on the grantee and the implementer, any or all of the following should also be contacted – the master trainer, or the parent site program manager. It is incumbent upon each grantee to identify who this staff member is and to ensure that it is clear to all implementers.

For all serious events, grantees should also maintain written documentation. This documentation should be completed within 48 hours of the event. **Appendix C** contains a suggested template that grantees can tailor and use at their sites. The template contains the following elements:

- Student name (site should determine based on their privacy and security policies)
- Date
- Implementer name
- Curricula—parent or student; session number and name
- School or community-based organization (CBO)/where event took place
- What happened/what was said by participant/what was observed by implementer
- How the situation was handled; implementer response
- Any follow-up needed
- Site program manager review

## **A. Extreme Distress**

There may be times when a participant exhibits an extreme reaction to material in a session. As noted in **Table 1**, examples of extreme reactions include uncontrollable crying or anger outbursts, where the participant does not appear able to calm themselves down. Extreme distress may also occur in relation to personal disclosures (**Section II**), or may be linked with suspected child abuse or neglect or imminent harm (**B** and **C** in this section).

For both the student and the parent curricula, following the session, the implementer should contact his or her site program manager to report what happened. In addition, as with all serious events, documentation of the event must be completed within 48 hours. CDC and the grantee's TA provider should be informed about the situation within 48 hours. In addition, if the implementer assesses that the situation poses the threat of imminent harm, he or she should follow the steps outline below in **Section C**.

### **Student Implementation**

If a student exhibits extreme distress during a session, the implementer should

- Stop the session
- Contact the first responder at the school (e.g., guidance counselor, nurse, as identified in advance by the grantee in coordination with school staff) so that the student can be removed from the classroom and taken to a safe place where he or she can calm down
- Once the student's safety is secured, reassure the class that the student is safe and that there are times when discussions may make someone upset
- Assess the distress level among the other students.

If no distress is present among the other students, the implementer should continue with the session. If other students are exhibiting mild, moderate, or extreme distress, the implementer should follow the appropriate steps as outlined above.

### **Parent Implementation**

If a parent exhibits extreme distress during a session, the implementer should

- Stop the session
- Coordinate with the other implementer to take the distressed parent out of the room and into a private area where he/she can calm down
- Contact the organization's identified first responder. If the first responder is onsite, the other implementer can return to the session once that person arrives to be with the parent. If the first responder is off-site, the other implementer should develop a plan of action with the first responder.

## **B. Suspected Child Abuse or Neglect**

Although the curricula do not specifically address child abuse or neglect, a student or parent may voluntarily disclose such information, or implementation staff may observe an interaction between a parent and child that causes concern. Because the curricula address violence (including sexual violence), and the parent curricula address parenting of teens, there is a chance that students or parents may begin to discuss family violence or neglectful parenting. It is important for implementers to be prepared to identify and respond to suspected child abuse or neglect.

As noted previously, students' and parents' privacy is critical, and any decision to report suspected child abuse or neglect must be made within the context of informing students and parents ahead of time (i.e.,

at the beginning of implementation) of this possibility. Thus, reporting takes place in the service of protecting individuals' safety and only upon careful consideration of the situation. However, it is the responsibility of the grantee to ensure that all protocols developed are in compliance with state mandatory reporting laws governing such events.

In every state, there is a duty for some, if not all, citizens to report suspected child abuse and neglect. The chance of this happening is very small; however, it is an important topic, and one that grantees, implementation staff, and partner agencies should be prepared to address. For this reason, it is important for grantees to develop a protocol to address suspected child abuse and neglect, including disclosures by students or parents and observed parent-child interactions. This section presents some considerations for grantees in developing such a protocol.

The implementer's role is to guide participants through the curricula as written, without encouraging extraneous discussions about family violence or child abuse or neglect. Nevertheless, it is possible that a student or parent will volunteer such information. In this situation, implementers should write down what was said and are obligated to report the situation to their site program manager and to follow the grantee's established protocol.

It will be important for grantees to be familiar with their own state's laws, as there are variations across jurisdictions. Such laws may require all persons to report to a local child welfare agency when they suspect that someone younger than 18 is being abused or neglected by his/her parent, guardian, custodian, or caretaker. State laws specify the definition of **child abuse**, which may mean that a child has been inflicted with physical injury or injuries *other than* by accidental means or is in a condition that is the result of maltreatment, such as malnutrition; sexual molestation or exploitation; deprivation of necessities; or cruel punishment. A state's definition may also include living in an environment injurious to the juvenile's welfare (for example, in a home that is physically deteriorated to the point where it is dangerous, or in a "crack house").

Because the curricula discuss sexual violence, participants may voluntarily disclose information about a minor being sexually abused. It is important for grantees to be familiar with their state's definition of **child sexual abuse**, which may include when a parent or caretaker

- Commits, permits, or encourages
  - sexual acts with a child or
  - the child to participate in the preparation and/or dissemination of obscene material;
- Displays or disseminates obscene material to a child, or encourages the child to participate in a live sex act;
- Promotes prostitution of a child; or
- Allows sibling sexual activity to occur.

Because the program also covers parenting practices, it is important for grantees to be familiar with their state's definition of **child neglect**, which may refer to the failure by the caregiver to provide needed, age-appropriate care for a child, including lack of shelter, food, clothing needed for warmth, or needed medical care and/or inappropriate discipline.

The protocol developed by each grantee should include the following steps to be taken:

- Implementer documents what was said or observed.
- Implementer contacts his or her site program manager.
- If there is suspected child abuse or neglect, a report should be made to the local child welfare agency.

- Implementer notifies the school or organization where the program is being implemented that the report has been made.

Remember, any concern by implementers about a child's well-being should be discussed with a site program manager compared to a review of state statute, and handled according to a protocol developed by the grantee, which may reflect existing protocols in place at schools or partner organizations. For both the student and the parent curricula, the implementer should contact his or her site program manager following the session to report what happened. In addition, as with all serious events, documentation needs to be completed within 48 hours. CDC and the grantee's TA provider should be informed about the situation within 48 hours.

### **C. *Imminent Danger or Harm***

Should a participant verbally disclose to the implementer that he or she is in immediate or potential danger, or others could be in immediate or potential danger, the implementer needs to immediately notify a first responder, such as the school counselor or a designated staff member where the program is being delivered. It will be important for the protocol to include placing a call (possibly a joint call involving the implementer, his or her site program manager, and/or the first responder) to the appropriate authorities. Please note that such action may not be necessary for disclosures about past experiences, only for reports about current or future danger. The disclosure should be described in detail to the implementer's site program manager and the designated first responder. In addition, all information about the disclosure and resulting action should be documented in terms of what happened and/or what was said, and what was done in response by the implementer. It is also important for grantees to discuss incidents of imminent danger or harm (without revealing names or identities) with their CDC project officer and their TA provider. Remember that any concern by implementers about an individual's immediate safety should be reported immediately and handled according to a protocol developed by the grantee, which may reflect existing protocols in place at schools or partner organizations.

## **V. Resources**

During the course of implementing the Dating Matters student and parent programs, participants may need to access local or national resources that provide specialized support for youth and adults. National resources are noted below, and local resources for students and parents should be compiled by grantees before program implementation.

### **A. *What National Resources are Available?***

**Appendix A** provides lists of national resources for students and parents, respectively. CDC has reviewed and approved these resources, and they are current as of January 2012. Although national resources are typically more stable than local ones, grantees should confirm them by visiting each website and calling each hotline number on an annual basis.

### **B. *How Do I Identify Local Resources for Participants?***

It is important for each grantee to identify local resources prior to implementation. Depending on the breadth of available resources, grantees will want to develop either a single local resource list for both students and parents, or one local resource list for parents and another for students. If grantees choose to develop a single resource list for both purposes, be sure to note which organizations serve youth, which serve adults, and which serve both.

Types of organizations to look for include the following:

- Domestic violence shelter
- Rape crisis center
- Boys and Girls Clubs
- YMCA
- Girl Scouts/Boy Scouts
- Youth after-school programs
- Mental health/counseling centers
- Faith-based organizations
- LGBTQ centers
- Local Social Services/Child Welfare office
- Women's centers

In addition, the following websites and hotlines may be helpful in locating relevant resources in your community:

- U.S. Department of Justice, Office on Violence Against Women (local resource page) <http://www.ovw.usdoj.gov/statedomestic.htm>
- National Domestic Violence Hotline (maintains list of local domestic violence resources) 1-800-799-SAFE (7233)
- Rape, Abuse & Incest National Network (generates list or map of crisis centers based on ZIP code). <http://centers.rainn.org/>

### ***C. What Else should Be Considered in Identifying Resources for Dating Matters Participants?***

When considering resources for Dating Matters participants, keep in mind the specific needs of the target population in your community, including characteristics that may be common across your groups (e.g., age group, living in an urban setting) and the diversity that will be evident among your participants (e.g., culture, sexual orientation, physical ability). Identifying organizations with experience serving youth in your community will be essential in preparing local resources for students; however, grantees should also attempt to find out which local organizations have experience providing sensitive, culturally competent services for members of particular populations, such as Spanish speakers; Lesbian, Gay, Bi-sexual, Transgender and Questioning (LGBTQ) persons; or deaf and hearing-impaired participants.

Grantees are responsible for creating a resource list that includes both national and local resources. The resource lists should be printed and carried by all implementers (ideally on colored card stock to make it stand out from other materials). In addition to the name and contact information of each local organization, it is useful to also provide some information that will help students and parents identify the resources that are most appropriate to their needs, as well as help implementers provide participants with appropriate referrals. The format of the national resource lists found in **Appendix A** can be used as an example, as they provide the organization's name, contact information, a brief description of the kinds of services offered and audiences served. It is recommended that students receive a resource list for students, and that parents receive both the student resource list and a parent resource list. In this way, parents will have information about resources to share with their middle-school child, as well as to access to resources that serve their own needs.

Finally, as with the national resources, it is very important to check that local organizations still exist and to confirm contact information before being included on a local resource list. The landscape of local services is often rapidly changing, and persons in need of these services may not have opportunity or energy for multiple help-seeking attempts. For this reason, it is essential that students and parents who are in need of assistance be referred only to resources that can be confirmed as current.

## **Appendices**

**Appendix A. National Resources for Students and Parents**

**Appendix B. Grantee Worksheets**

**Appendix C. Template – Documentation of Serious Events**

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## Appendix A

As noted in the text, it is recommended that students receive the resource list for students, and that parents receive both student and parent resource lists. In this way, parents will have information about resources to share with their middle-school child, as well as access to resources that serve their own needs.

### National Resources for Students

#### Websites

##### **Love is Respect**

<http://www.loveisrespect.org/>  
1-866-331-9474

This website has lots of information to help prevent unhealthy and unsafe relationships, and resources to help if you or someone you know is in an unhealthy or unsafe dating relationship. It includes a 24/7 anonymous online chat with a peer advocate and a text chat - text "loveis" to 77054.

##### **Safe Space**

<http://www.thesafespace.org/ayuda/> (Español)

This website has much of the information from Love is Respect (above) in Spanish.

##### **Stop Bullying**

<http://www.stopbullying.gov>

This website has tips for dealing with all kinds of bullying, including how to get help.

##### **A Thin Line**

<http://www.athinline.org/>

This website provides information on digital abuse, including topics like sexting, digital disrespect, and constant messaging.

##### **The Trevor Project**

[www.thetrevorproject.org](http://www.thetrevorproject.org)

This organization provides crisis intervention and suicide prevention services to LGBTQ pre-teens and teens. It includes an online chat with a counselor.

##### **Half of Us**

<http://www.halfofus.com>

This MTV website provides support and resources for a wide range of issues that teens may face, including ways to feel better if you're feeling sad, anxious, or dealing with some tough stuff.

##### **Choose Respect**

<http://www.chooserrespect.org>

This is the website for the national Choose Respect initiative, which helps teens form healthy relationships to prevent dating violence before it starts. It includes lots of information on teen dating violence and healthy relationships.

### **That's Not Cool**

<http://www.thatsnotcool.com/>

That's Not Cool provides tools to help teens draw a digital line about what is, or is not, okay in their relationships, with a focus on what happens on their cell phones, instant messaging, and online profiles.

### **Break the Cycle**

<http://www.breakthecycle.org>

Break the Cycle aims to empower teens to end the cycle of domestic violence. The website includes links for legal resources, as well as youth leadership development and education.

### **National Institute for Drug Abuse (NIDA) for Teens**

<http://teens.drugabuse.gov>

This website provides information for teens on drug abuse and includes links to resources for help with drug abuse.

## **Hotlines**

### **Love is Respect, National Dating Abuse Helpline**

1-866-331-9474

This hotline provides 24/7 support and help if you or someone you know is in an unhealthy or unsafe dating relationship, no matter how casual.

### **Suicide Prevention Lifeline**

1-800-273-TALK (8255)

This hotline provides 24/7 support and help if you are feeling depressed and/or thinking about suicide.

### **Boys Town National Hotline**

1-800-488-3000

This hotline provides 24/7 support and help for a wide range of issues that teens may face, such as drugs/alcohol, having been hurt by someone, depression, and much more.

### **Trevor Lifeline**

1-866-488-7386

This hotline provides 24/7 support and help for LGBTQ pre-teens and teens.

## **National Resources for Parents**

### **Websites**

#### **Love is Respect**

<http://www.loveisrespect.org/>

This website has information to help prevent unhealthy and unsafe relationships, and resources to help if you or someone you know is in an unhealthy or unsafe dating relationship. It includes a 24/7 anonymous online chat with a peer advocate and a text chat. Text "loveis" to 77054.

**Safe Space**

<http://www.thesafespace.org/ayuda/> (Español)

This website has much of the information from Love is Respect (above) in Spanish.

**RAINN Online Referral Link**

<http://apps.rainn.org/ohl-bridge/>

The Rape, Abuse, Incest National Network (RAINN) is a partnership of more than 1,100 local rape treatment hotlines that maintains an online referral resource directing you to local rape crisis centers nationwide.

**A Thin Line**

<http://www.athinline.org/>

This website provides information on digital abuse, including topics like sexting, digital disrespect, and constant messaging.

**Hopeline**

<http://www.hopeline.com/>

This is the website for the Kristin Brooks Hope Center, which provides suicide prevention, awareness and education, including an online crisis chat.

**Hotlines****Love is Respect National Dating Abuse Helpline**

1-866-331-9474

This 24/7 hotline provides support and help if you or someone you know is in an unhealthy or unsafe dating relationship, no matter how casual.

**Suicide Prevention Lifeline**

1-800-273-TALK (8255)

This hotline provides 24/7 support and help if you are feeling depressed and/or thinking about suicide.

**National Domestic Violence Hotline**

1-800-799-SAFE (7233) or TTY 1-800-787-3224

This hotline provides 24/7 help for victims of domestic violence and anyone calling on their behalf to provide crisis intervention, safety planning, information, and referrals. Help is available in English and Spanish, with access to more than 140 languages through interpreter services.

**National Sexual Assault Hotline**

1-800-656-HOPE(4673)

This 24/7 hotline will automatically transfer the caller to the nearest rape crisis center.

**Hopeline**

1-800-784-2433

This hotline provides 24/7 phone support for suicide prevention, awareness, and education.

**Boys Town National Hotline**

1-800-488-3000

This hotline 24/7 hotline provides support and help for a wide range of issues that parents of teens may face.

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## Appendix B

### Dating Matters Pilot Implementation Planning Worksheet - Draft

Below is a recommended worksheet that delineates specific tasks to be completed for topics covered in the Implementation Guide. This worksheet also identifies the responsible party and the due date. Given varying start dates for the pilot implementation, each grantee will work with their TA provider to establish due dates. The grantee will also identify what is needed to meet the due dates. This worksheet will be reviewed on regular TA calls.

<b>DISTRESS PROTOCOL</b>		
<b>What's the task?</b>	<b>Who's responsible for this?</b>	<b>When is it due? (internal due date)</b>
<b>Identify if there are existing, relevant existing protocols (grantee, organizations for school and parent programs)</b> <i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Ascertain if formal approval of protocols will be necessary</b> <i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Tailor guidelines to develop a site-specific protocol for mild/moderate and extreme distress</b> <i>What will we need to do to meet this due date? (included key activities, responsible person(s), and due date)</i>		
<b>Coordinate with local school/organization for school and parent programs to identify a first responder and a back-up staff member in each agency</b> <i>What will we need to do to meet this due date? (included key activities, responsible person(s), and due date)</i>		
<b>Obtain formal approval if needed; review distress protocol with the school/organization and these staff members</b> <i>What will we need to do to meet this due date? (included key activities, responsible person(s), and due date)</i>		
<b>SUSPECTED CHILD ABUSE OR NEGLECT</b>		

What's the task?	Who's responsible for this?	When is it due?
<b>Obtain state guidelines about child abuse and neglect, including becoming familiar with state definitions of child abuse, child sexual abuse, and child neglect, and identifying state requirements for mandatory reporters.</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Identify existing, relevant existing protocols (grantee, organizations for school and parent programs)</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Develop a protocol for identifying and addressing suspected child abuse and neglect, including the following components:</b> <ul style="list-style-type: none"> <li>• Identify the first responder and back-up staff member and contact information at the school/organization where the student and parent programs are being implemented</li> <li>• Identify timeframe for notifying site program manager, including contact information for after business hours</li> <li>• Identify the local child welfare agency responsible for receiving reports of suspected child abuse and neglect, as well as their contact information during regular business hours and after hours</li> <li>• Notify CDC project officer (without revealing names or identifying information)</li> </ul>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Determine format for documentation of suspected child abuse and neglect, as well as confidentiality guidelines for storing and handling such documentation. Considerations include:</b> <ul style="list-style-type: none"> <li>• Possibly identify existing formats for documentation</li> <li>• Adapt or create a form for documentation that includes fields for all information grantees and partner organizations will want documented</li> <li>• Determine whether identifying information should appear on the form</li> <li>• If identifying information will appear, address storage and confidential handling of written documentation</li> </ul>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Train implementers on the protocol before implementation begins</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Inform participants at the beginning of implementation about being required to report if someone is in danger or a minor is not being properly cared for. Consider possibly developing a simple script for implementers to share with participants</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		

<b>IMMINENT HARM</b>		
<b>What's the task?</b>	<b>Who's responsible for this?</b>	<b>When is it due?</b>
<b>Identify relevant existing protocols (grantee, organizations for school and parent programs)</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Develop a protocol for identifying and responding to imminent harm or danger, to include:</b> <ul style="list-style-type: none"> <li>• Identify the first responder and back-up staff member and contact information at the school/organization where the student and parent programs are being implemented</li> <li>• Identify timeframe for notifying site program manager, including contact information for after business hours</li> <li>• Identify the appropriate authorities for receiving reports of imminent harm or danger, including contact information for after-hours reports (calling 911 may be appropriate)</li> <li>• Notify CDC project officer (without revealing names or identifying information)</li> </ul>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Determine format for documentation of imminent harm or danger , as well as confidentiality guidelines for storing and handling such documentation, with consideration to:</b> <ul style="list-style-type: none"> <li>• Possibly identify existing formats for documentation</li> <li>• Adapt or create a form for documentation that includes fields for all information grantees and partner organizations will want documented</li> <li>• Determine whether identifying information should appear on the form</li> </ul> If identifying information will appear, address storage and confidential handling of written documentation		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Train implementation staff on the protocol before implementation begins</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		

<b>Inform participants at the beginning of implementation about being required to report if someone is in danger, including consideration of possibly developing simple script for implementers to share with participants</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>RESOURCES</b>		
<b>What's the task?</b>	<b>Who's responsible for this?</b>	<b>When is it due?</b>
<b>Identify local resources for student and parent programs and develop local resource handouts</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		
<b>Print local and national resource handouts for students and parents</b>		
<i>What will we need to do to meet this due date? (included key activities, responsible person(s) and due date)</i>		

DRAFT

# Appendix C

Template – Documentation of Serious Events

Date \_\_\_\_\_ Implementer name \_\_\_\_\_

Curricula (parent/student; session name and #) \_\_\_\_\_

Where event took place \_\_\_\_\_

Describe the event: what happened, specific statements by participant, how handled by implementer

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Any follow-up needed \_\_\_\_\_

\_\_\_\_\_

Review by site program manager and date of review \_\_\_\_\_