Building a Girls' Movement for the Next Decade:
V-Girls Pilot Program

Facilitator's Guide

Care and Nurture of V-Girls

Introduction:

Emotional Creatures

I Am an Emotional Creature explores the experiences of girls across the planet. The monologues included in the work connect girls to communities, cultures, economic realities, and everyday concerns and feelings that may be outside their own realm of experience, or grappled with silently. *I Am an Emotional Creature* and the accompanying curriculum seek to help girls break through this silence by encouraging them "to question rather than please," and to resist the pressure to "make everything okay rather than real." When girls feel their power (as V-Girls intends that they do), they use their voices. They talk. They "get emotional," which, while often seen by adults and male peers as a sign of weakness, is actually healthy and positive. They unapologetically proclaim themselves as "Emotional Creatures".

Seeing the Opportunities: Being Prepared for Personal Disclosures about Sensitive Topics

Approximately 1 in 4 girls and 1 in 6 boys is sexually abused by the age of 18.[i] *1 in 5 high school girls have seriously considered suicide in the past year and 1 in 11 has attempted suicide.*[ii] *3 in 10 teenage girls (31%) become pregnant at once before they reach the age of 20.*[iii] *1 in 10 students report having been physically hurt on purpose by their boyfriend or girlfriend in the past year.*[iv]*1 in 6 girls report having not eaten for 24 hrs or more and 1 in 15 report having vomited or taken laxatives to control their weight in the last month.*[v]

In writing this curriculum, we anticipate that some girls may find the feeling of community that the V-Girls programs provides as a safe place to talk about, for the very first time, their sexual orientation, their sexual experiences, their thoughts of suicide, their experiences of sexual abuse, and/or their experiences with violence in their own homes or neighborhoods. Others may not talk about their issues, but rather keep silent about them. Perhaps a girl in your group will begin to "listen to the voice inside that might want something different." Maybe the "something different" is a safe home or a better way of coping with emotional pain. When a girl chooses to share a traumatic event in her past or reveal difficult circumstances of her present

you have an opportunity to promote personal growth, self-awareness, and self-respect, and also to serve as a bridge to safety interventions, formal health or mental health services, and other resources. It is a rare opportunity to help her achieve that "something different."

The sensitive topics addressed in *I Am an Emotional Creature* present specific challenges and opportunities for teachers and adult leaders with regard to maintaining youth safety and facilitating healthy discussion. Recognizing that it is often difficult for adults to know how to act and how to help when youth reveal that they are not safe in their own lives, we have designed this Empowerment Guide to help support you through this process, providing you with guidelines and recommendations about specific topics. We have also taken care to direct you to additional resources that we believe will be helpful to you in facilitating your group.

Consulting With School or Organizational Personnel

It is essential that teachers consult with their principal and appropriate mental health staff (school psychologist or counselor) prior to initiating the V-Girls program to ensure that everyone is familiar with relevant school and organizational policies, district protocols, and state laws, as well as the content and objectives of the V-Girls program. Facilitators should co-develop, with school or organizational staff, a clear action plan and chain of communication in the event of any incidents that concern the safety and wellbeing of program participants or other youth.

If the school or agency does not have policies or procedures to help guide decision-making, it is strongly recommended that one be developed and/or that the adult leader formally consult with a local community mental health agency. Also consider engaging a mental health practitioner as a co-leader.

Being Prepared to Respond to Disclosures Before: Knowing Your Legal and Ethical Responsibilities and Limitations and Clarifying Your Personal Values

Prior to the start of the group, consider how you would respond to a range of challenges and disclosures in the group. For example:

- A youth reports that she has current and persistent significant thoughts of suicide. She often contemplates overdosing. She has ready access to prescription medications at home.
- A youth reveals that a male family member sexually abused her over a period of several years when she was younger and she is now concerned that he is abusing her little sister.
- A youth discloses she is pregnant and intends to keep the baby but has not told anyone or sought prenatal care.
- A youth appears to have a significant mental health concern (e.g., depression, eating disorder, substance abuse) but reports that her parents will not obtain mental health treatment for her.
- A youth discloses that she is HIV+ and is engaging in unprotected sex with another youth at the school.
- You observe linear marks on a girl's forearms. Some of the marks appear fresh and others are at various stages of healing and scarring.
- A youth discloses that she witnessed an unsolved violent crime but has not informed the police. She knows the perpetrator and fears retaliation.
- A youth reports that she is LGBTQ and is in danger of being kicked out of her home.
- A youth accuses another student in the group of bullying.
- A youth describes an emotionally hostile home environment characterized by gender-related degrading language and threats of violence.

In some situations, a safe, ethical, and legal response will be clear. For example, in all 50 states teachers are mandated reporters and are required to report disclosures of abuse. Make sure that you know the abuse statutes and reporting laws in your state as well as the procedures for reporting abuse in your community. Likewise, indicators of suicidal thoughts and actions warrant immediate action to ensure a youth's safety. Take time to familiarize yourself with the community mental health and emergency response system in your area.

Other situations that do not involve a clear disclosure of abuse or imminent risk of harm may be less straightforward. You may have concerns for a youth but be uncertain how best to help her. There may be additional laws, ethical principles, or school/agency policies that either mandate or prohibit certain actions or notifications. These laws and policies may be at odds with your personal values or beliefs.

To further complicate thoughtful response, teachers and adult leaders are often troubled by how to balance trust and confidentiality when a youth shares something personal. These adults recognize their unique role in the girls' lives, as non-familial mentors and confidantes. They may be the only adult with whom that youth has a positive, trusting relationship and they fear the irreparable harm to the relationship that may come from action perceived by the youth as a violation of that trust.

Consider a range of possible responses to most effectively act on your best instincts to assist a youth in your group. You may find it helpful to:

- Provide a youth with referrals to organizations that connect her to services and support.
- Consult with school personnel regarding possible involvement of school mental health staff with youth.
- Meet with the school nurse or public health official regarding physical health concerns and notification requirements.
- Consult with child protective services to determine if a situation falls within the abuse statutes (particularly with regard to some "atypical" domains of abuse and neglect that may present in the group such as medical neglect, emotional abuse, exposure to violence, educational neglect, exposure to drug use, failure to provide access to mental health care).
- Encourage or facilitate communication with parents about concerning behavior or situations so that parents can take action in the best interest of their children.

Given the many factors to consider, it is important to take time to clarify personal values, ethical obligations, and legal rights and responsibilities before the group begins. Although you cannot anticipate or prepare ahead of time for all possible situations that may develop in the group, you are encouraged to review the issues presented in the monologues, discuss them with others, and develop a readily accessible system of consultation and response.

Creating an Emotionally Safe Environment

Create an environment that promotes healthy discussion of complex themes and responds with care and concern to personal disclosures. Community begins at the start of the group:

- Actively develop a peer climate of respect and support.
- Establish ground-rules for respectful group behavior and make them visible in writing in the educational setting so they can be reinforced.
- Inform participants that material will be challenging and provide opportunities for???.
- Encourage healthy emotional expression.
- Openly discuss conflict management.
- Specify means for participants to access additional support and resources as needed.
- Carefully explain privacy and confidentiality--communicate the importance of respecting and protecting each other by not sharing disclosures made in the group to those outside the group and encourage teens to speak with a mentor about anything that is troubling them.
- Clarify your ethical and legal responsibilities for ensuring youth safety that may require you to set aside the privacy rules of the group. Teens need to understand exactly what your obligations are if they should disclose something which is a concern for their or someone else's safety.
- Consider structuring group time to include discussion of emotional reactions to monologue content and themes.
- Consider incorporating an activity at the end of each group session to facilitate transition from the group to other activities (e.g., relaxation or sharing activity)

Educating Yourself

The best way to prepare for the challenging themes of *I Am an Emotional Creature* is to educate yourself about them. The better you understand the broader issues in which specific youth reflections are embedded, the more confident you will be in managing group discussion and the more effective you will be in responding to sensitive disclosures by group participants. At the conclusion of this chapter are a series of brief overviews of several topics addressed in *I Am an Emotional Creature*. These overviews are intended as an introduction to each topic:

- Suicide
- Cutting/Self-injury
- Pregnancy
- Abortion
- Sexual Abuse
- Physical Abuse
- Teen Dating Abuse
- Female Genital Mutilation (FGM)
- Bullying
- Sexual Harassment
- Eating Disorders

Accompanying each overview is a list of resources for obtaining additional information. You are encouraged to access these additional resources to further develop your understanding of these sensitive topics.

Paying Attention to Your Qwn Reactions and Acknowledging Personal Challenges

If there is an issue that evokes particular discomfort for you, it is important to acknowledge it, seek to understand the foundation for your discomfort, and take steps to address it. For example, some difficulties may stem from limited awareness of certain issues (e.g., female genital mutilation). Other reactions may be associated with strong or conflicting personal beliefs or political views (e.g. sexual and reproductive health). Regarding themes that evoke discomfort due to limited knowledge, an appropriate step is to become better educated about these issues.

Similarly, discomfort associated with personal beliefs or political perspectives may be alleviated by increasing one's sensitivity to multiple alternate viewpoints. Doing so may also help you to promote balanced discussion in the class and facilitate a safe environment for students to express diverse opinions.

In contrast to challenges stemming from limited knowledge or personal experience, some difficult responses to monologue themes may be associated with very intimate knowledge and deeply personal experiences (e.g., suicide of an intimate partner, witnessing violence in one's family of origin, or a personal history of sexual assault, abortion, or eating disorder). If the theme is challenging due to personal experience, there are several important considerations. First, consider how your personal history may impact the group. If you have addressed your personal history in a manner that helped you to gain valuable insight, understanding and self-reflection, then your personal history will most likely be an asset to the group, whether you choose to directly disclose your experiences or not. In contrast, unresolved personal experiences may be potentially harmful both to you and the group. Regarding the group, your ability to lead healthy discussion may be compromised. For example, if you have never spoken with anyone else about a history of sexual abuse or the suicide of a loved one, consider how your own silence and the underlying reasons for it may be communicated, directly or indirectly, to the group. Likewise, carefully consider the consequences for *you* in leading a classroom discussion about such a deeply personal topic.

Considering the Impact of Self-disclosure

In general, leaders will have different styles and levels of comfort with personal disclosure, even with regard to relatively "safe" themes. For more controversial or challenging themes, it is recommended that leaders carefully consider in advance of the introduction of the theme the potential impact, both positive and negative, of self-disclosure on the group.

Recognizing and Acknowledge "Secondary Distress"

Empathy, compassion, and community are powerful elements of the V-Girls experience. Some students (and adult leaders) may experience significant emotional distress as a result of

connecting deeply with the characters and experiences of the monologues, or from hearing the stories of their peers. Ensure these students are provided sufficient opportunity in the group to identify and express these feelings in a healthy way. Also be mindful of participants who require additional private time to reflect further with an adult group leader or who would benefit from the involvement of a mental health resource to further facilitate healthy coping with difficult emotions.

Practicing and Modeling Good Self-care

The V-Girls program seeks to enlighten, uplift, challenge, and ultimately transform both adolescent participants and adult group facilitators. However, such transformation can, at times, be physically and emotionally depleting. As the leader, it is essential that you take conscious action to ensure your own wellbeing through this process and also promote good self-care within the group.

Begin by identifying healthy and accessible adult interpersonal support for yourself. Such support may come from family, intimate partners, friends, or close colleagues who can serve as a resource for sharing your feelings about the group experience.* Good self-care also involves balance. Balance group experience (and perhaps other similarly demanding professional obligations) with time and energy dedicated to other pursuits. Make time for family and friends. Carefully protect exercise and relaxation time. Listen to music. Dance. Laugh.

Likewise, model good self-care to the group. Acknowledge that the content is challenging and will have an emotional impact, identify strategies and resources for coping with difficult emotions, assist youth in honest reflection and self-evaluation as the group progresses, and guide implementation of appropriate self-care skills.

**Note: Whenever discussing the group experience, it is important to be particularly mindful of the privacy agreement within the group. That is, it is acceptable to talk to others outside the group about your own feelings and reactions to the material and to discuss challenges of*

leadership in this setting in broad terms, but it is not acceptable to speak about individual adolescents or situations (THAT IS ACTUALLY NOT TRUE LEGALLY. TEACHERS DISCUSS STUDENTS ALL THE TIME IN CASE REVIEWS). For this reason, your co-leader, if you have one, may be the best person with whom to process the group experience.

Responding to Personal Disclosures

As this section has emphasized, there are a number of challenging topics in *I am an Emotional Creature*. Discussion of these topics is likely to lead to group participants sharing their own experiences. Some of these personal experiences will be about sensitive topics and may include disclosures of abuse, experiences of violence, dangerous or harmful behaviors, unsafe actions or situations, or personally troubling thoughts. When a group participant shares a personal experience, whether in the group setting or in private conversation, you may chose to respond by employing the following techniques:

- **Remain calm**. Avoid overreacting or asking too many questions. Allow the person sharing her experience to set the pace and emotional tone. Permit the youth to freely and spontaneously disclose what they are comfortable sharing. Avoid interrupting or censoring, but also limit detailed follow-up questioning about events.

- **Show empathy**. Demonstrate active listening, acceptance, and understanding. Thank young person for sharing and let them know they are courageous for doing so.

- **If offered, facilitate supportive input from peers.** Youth are sensitive not only to reactions of caring adults but to the perceptions of their peers. Acceptance and active support from peers can be very affirming to the individual and also contributes to group cohesiveness.

- **Avoid communicating disbelief or blame**. Adolescents are exceptionally sensitive to blame and perceptions that others think that they are lying. Children and teens often do not tell

others about their thoughts and experiences because they do not think they will be believed or understood.

- **Avoid vilifying the perpetrator (if there is one)**. Vilification of the perpetrator may be a natural response to the anger harmful acts evoke and is sometimes expressed in a well-meaning effort to show support. Nevertheless, the perpetrator is often someone known to the youth and may be someone to whom the youth is very strongly attached, perhaps a parent or sibling or boyfriend. They may have withheld disclosing events out of loyalty and may fear exactly the judgment that underlies a negative angry characterization of the perpetrator.

- **Provide an opportunity for private discussion**. If the youth makes a disclosure to the group, be sensitive to the value at that moment of continued group discussion versus private follow-up. For some youth, the group setting will be a powerful and comforting place for sharing their experiences. Others may begin to disclose their experiences in the group setting but subsequent emotional and behavioral indicators may suggest that the youth would be better served by continuing her disclosure in a more private setting. Extend an invitation to private conversation so that the youth is clear she has the option to continue in the group or speak privately with an adult facilitator. In addition to extending an offer of private follow-up to the person disclosing abuse, it would also be beneficial to extend a similar offer of private conversation to other group members as well, who may wish to disclose their own related experiences privately or who may wish to privately discuss difficult emotional reactions to a peer's disclosure.

- **Communicate anticipated subsequent actions**. Inform the child to the best of your ability what you will be doing in response to her disclosure. If it requires communication with someone else, review your obligation to ensure youth safety and your intention to consult with a school or agency administrator.

- **Avoid promises you can't keep and reassurances of outcomes you do not control.** For example, do not promise a youth that you will not tell others, as you have legal and ethical obligations that may supersede such a promise. Likewise do not promise outcomes you do not control. For example, in the case of a disclosure of abuse, do not provide an assurance that she will not be removed from her home or, conversely, that she will be separated and protected from an alleged perpetrator. You cannot control what actions will be taken by Child Protective Services or law enforcement, when they might act, or what will happen after an investigation takes place.

- **Make appropriate and mandated notifications immediately**. Do not wait until the next day to do so as this may place the child at risk and likely violates reporting laws. Also, do not attempt to investigate or gather additional information on your own prior to notification (beyond what is necessary to make the report). This delays the involvement of other professionals who are trained to interview and investigate these disclosures, compromises their work, and jeopardizes any subsequent justice system response (repeated interviewing has a detrimental affect on the investigative and information-gathering process).

- **Take notes**. It is often helpful to take notes soon after disclosures and follow-up responses in order to record statements and document actions taken.

Teen Dating Abuse

One in 3 US teens reports experiencing verbal, emotional and/or physical abuse in a dating relationship, although many never tell anyone about their abuse experiences. Teen dating abuse is a type of domestic violence characterized by a pattern of controlling and sometimes violent behavior. One of the biggest warning signs is extreme jealousy, which many teens confuse with caring or loving feelings. Also, teens often only associate physical violence with abuse thus ignoring the other types of abuse, yet verbal and emotional abuse often lead to physical violence.

Teens usually ask if dating abuse affects only girls. In fact, teen dating abuse affects males and females and people of all races, classes, and sexual orientations. In the majority of reported cases, teen dating violence is perpetrated against females by males; however dating violence is also perpetrated by females against males and occurs in same-sex relationships, where both individuals are male or both are female.

People are often confused about why people stay in unhealthy or abusive relationships. There are many reasons including self-blame, embarrassment, fear of harm or death, and love for the other person. Teens, especially, have a difficult time leaving these relationships because there are fewer resources for help available to them. Sometimes they are in the same school or the same neighborhood as the abuser, making it harder to avoid a confrontation or escape danger at the hands of that abuser if they try to leave the relationship. They may fear letting down those around them if the relationship ends. Many teens feel like they are the only ones having these experiences. They feel isolated and are uncertain to whom they can turn for help. They also tend to mistrust authority like police and school personnel. Often these first adult resources are not trained properly to handle these cases, resulting in further trauma to the teen who is seeking intervention. Some teens who experience teen dating abuse might feel confused, helpless, angry and at fault; however, survivors of dating violence cope with their feeling and experiences in different ways. Some teens may become more withdrawn from others or show

other signs of emotional difficulties, but other teens may not show overt indicators of their difficulties. In fact, some have become better students, for example, because their grades are something they may still feel they have some control over, as opposed to their relationships.

Adult leaders can provide support to teens in abusive relationships by listening to them and believing them. Since abusers often isolate their partners and keep them away from their friends, it is a great idea to encourage a teen to become more involved in peer activities. We can also encourage any teens in abusive relationships to seek help. For some cases, an Order of Protection might be a good option; orders are free and there is no age limit to obtain one. It may also be necessary to report the abuse to law enforcement or child protective services. Also investigate community resources and hotlines that will allow teens to confidentially discuss their circumstances and further explore their options.

Female Genital Mutilation

Female Genital Mutilation (FGM), a human rights violation, includes procedures that intentionally alter or injure female genital organs for non-medical reasons and are most commonly carried out on girls between the age of infancy and about 15 years. An estimated 100 to 140 million girls and women worldwide are currently living with the consequences of FGM, and, in Africa, close to three million girls are at risk for FGM annually. FGM is harmful to girls, causing excessive bleeding, problems and pain during urination and menstruation, childbirth complications and newborn deaths[1]. There are three forms of cutting: the partial or total removal of the clitoris (clitoridectomy), the removal of the entire clitoris and the cutting of the labia minora (excision), or the removal of all external genitalia and the stitching together of the two sides of the vulva (infibulation).[2]

The are multiple reasons FGM is carried out. In some cultures, a girl cannot be married unless she is cut and in others, the power of tradition takes precedence. There is also an economic element to the cutting. For example, women circumscisors make a living by performing the cut. Also, in many cultures, a family will gain a dowry when a young girl is forced into child marriage, providing an incentive to have her married off (and therefore an incentive to have her cut so she can be married). Cutting girls also ensures that she will not find pleasure in sex, hence it becomes a way for the culture to "control" her.

While long-held traditions have kept FGM alive, local grassroots activists in places like Egypt and Kenya are working to stop FGM and replace it with alternative rites of passage for girls.

Additional Resources:

http://www.who.int/mediacentre/factsheets/fs241/en/

---

1 http://www.who.int/mediacentre/factsheets/fs241/en/

2 http://www.equalitynow.org/english/campaigns/fgm/fgm-campaign_en.html

http://www.vday.org/news-alerts/cry-of-a-girl

http://www.equalitynow.org/english/campaigns/fgm/fgm-campaign_en.html

Efua Dorkenoo – Cutting the Rose - http://www.amazon.com/Cutting-Rose-Mutilation-Prevention-Publications/dp/1873194951 - [A native of Ghana, Efua Dorkenoo was the first World Health Organization technical expert on FGM and played a pioneering role in having the procedure recognized as a human rights issue and introducing it onto the agenda of governments.

The clitoris is pure in purpose. It is the only organ in the body designed purely for pleasure. The clitoris is simply a bundle of nerves: 8,000 nerve fibers, to be precise. That's a higher concentration of nerve fibers than is found anywhere else in the body, including the fingertips, lips, and tongue, and it is twice… twice….twice the number in the penis. *– from Woman: An Intimate Geography, by Natalie Angier*

Guiding Questions:

How would it feel to be powerless over losing a body part?

Why might traditions like FGM develop in cultures?

Sexual Harassment

Sexual harassment is defined as being intimidated, harassed, or bullied in a sexual way or being similarly coerced into engaging in unwanted sexual behaviors or experiences. Sexual harassment can be verbal or physical. It may involve being spoken to in a sexual way, being spoken about in a sexual way, or being touched in a sexual way that is uncomfortable, upsetting or even violent. Often, but not always, the harasser is in some kind of position of power over the target of harassment. For girls, both young and teenaged, sexual harassment is most often (though not always) something that happens at school or in organized activities.

By U.S. law, all students have the right to a safe school climate, which means that sexual harassment is neither ethical nor legal in schools. However, teachers and administrators can be slow to recognize, acknowledge and take action against sexual harassment. Adults in schools have a responsibility to ensure that students do not experience sexual harassment in any part of the school, including the halls, classes, cafeteria, library, computer room, bathrooms, locker rooms, anywhere. Part of the solution is also helping young people to recognize sexual violence so that they can speak out against it.

Sexual harassment has both legal and social/interpersonal dimensions. For most girls, it is the social rather than the legal dimension that is most important. Nevertheless, because there can be situations in which legal action may be taken, it is helpful to know the legal definition so that you can help a girl determine if, in fact, she is being sexually harassed.

The difference between sexual attention and sexual harassment is in how the individual who is the target of it experiences and feels about it. The intentions of the harasser are not what counts. The person who is being harassed has the right to say that what they are experiencing is harassment. That is the law. It can be very confusing because it is very common for boys and men to treat girls and women in a sexual manner even in nonsexual situations. Such interactions come to be seen as "normal" or "the way things are." It can also be confusing, because girls and women learn to want and even to encourage sexual attention. But we all have the right to be

free of being bullied, pushed around, kept down or even terrorized by threats, comments and actions that constitute unwanted sexual attention. To determine if an experience is sexual harassment, a girl must be in touch with what she wants and does not want, because "unwanted" is what makes such words and actions sexual harassment.

Suicide

In rehearsal or discussions, many young women might tell stories about times when they felt suicidal, or felt like they wanted a difficult time to be over. Suicide and suicidal thoughts are more common than many people realize. In fact, suicide is the third leading cause of death for young people, age 15-19 and 15-24. A common myth about suicide is that talking about it will give someone the idea to do it. In fact, openly discussing the subject shows that you care and are willing to help. It allows a person to bring forward painful feelings that already exist. When discussing suicide and suicidal thoughts, it is vital to be direct and willing to listen. Do not lecture about the value of life, or debate whether suicide is right or wrong. Another way to avoid judgment is to use the language "died by suicide" instead of "committed suicide."

Young women might also reveal that they are suicide loss survivors - people who have lost a loved one to suicide. Suicide loss survivors often need to talk about their feelings of loss, anger, and grief, and can be at slightly higher risk themselves. You might also hear young women talk about "cutting," which is an act of self-harm, but is not always related to suicide. That is, its intent is typically not to end life but rather can sometimes be a way to relieve tension and cope with difficult emotions. It is nevertheless also true that girls who self-harm are also at higher risk of suicide.

The most important thing to know is that **suicide is preventable**. Most suicidal people want their pain to end, not their lives. Suicidal thinking is typically associated with treatable problems, like depression, chemical dependency, and other disorders. Warning signs of acute risk for suicide include: threatening to or talking about wanting to hurt or kill herself, seeking access to deadly means, talking or writing unexpectedly about death, dying, or suicide. Also pay attention to concerning messages distributed via social networking sites (like status updates or comments on profiles) that may reflect suicide risk. If you observe these warning signs, seek help as soon as possible by contacting a mental health professional or calling 1-800-273-TALK (8255) (the National Suicide Prevention Lifeline) for a referral. Research shows that up to 80% of people who die by suicide mention their intention to other people, in hopes that someone will

recognize their signal as a cry for help. Never ignore statements like, "I wish I were dead," or "I just want the pain to stop," even if said casually, and even if you think the person is "just looking for attention." This may be the only way they can reach out, so it is important to ensure they receive professional help.

Additional Resources:

National Suicide Prevention Lifeline:

1-800-273-TALK (8255)

www.suicidepreventionlifeline.org

If you, or someone you know, is in suicidal crisis or emotional distress please call **1-800-273-TALK (8255)**. For Spanish, call **1-888-628-9454.**

Link to Warning Signs: http://www.suicidology.org/web/guest/stats-and-tools/warning-signs

The Trevor Project:

1-866-4-U-TREVOR (488-7386)

http://www.thetrevorproject.org/

The *Trevor Project* operates the nation's only 24/7 suicide & crisis prevention helpline for gay and questioning youth.

Guiding Questions:

Have you gone through times when you felt hopeless?

Have you ever lost anyone to suicide?

Have you ever thought about or attempted suicide? If so, what helped you get through the crisis?

Eating Disorders and Body Image

Chances are that you have already observed and been concerned about girls who have eating disorders in your school or organization. You are observing a phenomenon that is epidemic in our culture: disordered eating and body image distortion. Disordered eating (skipping meals and/or binging) and body image distortion are precursors to the more serious and potentially life-threatening eating disorders: Anorexia, Bulimia, Exercise Disorders (Exercise Bulimia) and Binge Eating Disorder. Of further concern to educators is that some girls that have a serious problem, as with bulimia, may not look like they have a problem. No matter what a girl with an eating disorder is suffering from, be it food restriction, emotional overeating or binging and purging; you can be certain that it is occupying almost all of her thoughts and feelings.

In the safe and intimate environment of this project, some girls in the group will probably share that they -- or a friend or loved one -- are suffering from an eating disorder. The feelings that might come up are feelings of sadness, anger and fear. There are also likely to be feelings of relief that this taboo subject is out in the open and that help could be on the way. Bear in mind that emotions and feelings always "live" beneath the surface of eating disorder symptoms because an eating disorder is one "strategy" that girls use in our culture to try to get help and express what is very wrong in their lives.

The good news is that there is treatment available for eating disorders and that the prognosis can be good, especially if a girl gets help quickly with a treatment team that specializes in eating disorders. A team with a medical practitioner, nutritionist and psychotherapist has proven to be the most effective for treatment. Family therapy is also extremely helpful. Consult with your school nurse about local resources.

Guiding Questions:

- What is an eating disorder?
- Do you know someone with an eating disorder?
- What are the signs and symptoms of an eating disorder?

- What causes an eating disorder?
- Why are eating disorders so prevalent in our culture?
- What can I do to help a friend who has an eating disorder?
- Are there ways to prevent an eating disorder?
- How does the media contribute to the prevalence of eating disorders in our culture?
- How can I get help if I have an eating disorder?
- Can boys have eating disorders?
- What is the treatment for an eating disorder?
- Can an eating disorder be life threatening?

Teenage Pregnancy

Let's begin with the question kids ask, "Where do babies come from?" The fact is we do not do a very good job talking about our bodies, or sex and all the complications of friendships and relationships. What happens all too often is that adults pretend there is nothing to talk about and teens act like they already know everything. This lack of knowledge leaves many young people on their own to figure out how to manage their curiosity about sex, an approach that is quite common but also very risky. As a result, in the U.S. alone, 750,000 teens become pregnant each year, most of whom never intended to be. Conversations about teenage pregnancy often focus on sexual activity – intercourse and birth control, risks and consequences. What is equally important, if not more so, is to explore sexuality through gender roles, emotions, intimacy, body image and relationships. In discussing romantic relationships, girls might tend to focus on "being liked, feeling loved." Try talking about the six qualities of a healthy relationship – honesty, trust, respect, fairness, equality, and good communication.

Despite the abundance of information about sex that is available in magazines, television and the Internet, there are a lot of myths that still serve as the source of what many young people rely upon for sexual health information. A "truth or fiction" quiz is an effective tool for opening up discussion (www.advocatesforyouth.org). Family Life Education curriculum has an excellent quiz about intercourse, contraceptives, and even legal rights of minors to access care. In discussing pregnancy prevention, the most important point is that the only sure way to avoid becoming pregnant is by not having intercourse. Once you are sexually active, it is very important to use birth control consistently and accurately. Counseling and information on the best method should be obtained from a doctor, or health professionals at places like Planned Parenthood or public health family planning clinics.

There are myriad of questions and concerns that teens might be dealing with or be thinking about when it comes to sex and pregnancy. Coercive sex is a reality for some teenage girls. This can be in a dating relationship or situations within families. One out of 3 high school relationships involves violence or rape. When this happens, girls can feel self-doubt and may

second-guess their own response to being forced into a sexual encounter. Girls who appear withdrawn or are very uncomfortable participating in discussion may be showing signs of depression or stress related to such situations. Find an appropriate time and place for a one-on-one conversation with the girl. If she reveals an incident, speak with the school nurse, social worker or guidance counselor. Additional help is available at the **Rape, Abuse, and Incest National Network (RAINN), 1-800-656-HOPE.**

Additional Resources:

Information on pregnancy, contraception and accurate sexual health information:

www.plannedparenthood.org.

http://answer.rutgers.edu

www.goaskalice.columbia.edu

www.iwannaknow.org

www.etr.org/recapp

www.thenationalcampaign.org

Rape, Abuse, and Incest National Network (RAINN), 1-800-656-HOPE.

Guiding Questions:

What makes a healthy relationship?

What does sexuality mean to you?

What have your parents said about sexuality?

What have you seen or heard in the media about sexuality?

Does your partner make you feel bad about yourself most of the time?

Do you ever feel afraid of saying what you really think or feel?

Abortion

Each year, 750,000 teenagers become pregnant in the United States. Approximately 70 percent of these are unplanned and unintended. When a young person becomes pregnant, she has three choices – become a parent, give the baby up for adoption, or terminate the pregnancy. Abortion means ending a pregnancy. This can be done through a medical procedure in a clinic or by taking a pill called RU-486, which is used up to 63 days since the woman's last period. The clinic-based medical abortion is typically conducted within the first 3 months of pregnancy.

In cases where there is unprotected sexual intercourse, or the condom breaks, Emergency Contraception, commonly known as "the morning after pill", is effective in preventing pregnancy. It can be used up to 120 hours after intercourse. Emergency contraceptive pill delays ovulation and may prevent fertilization. The emergency contraceptive pill is not the same as RU-486. It does **NOT** affect a pregnancy and does **NOT** cause an abortion. You have to be 17 years old or older to buy emergency contraceptives over the counter. Younger teens need a prescription from their doctor. Two weeks after using an emergency contraceptive, it is important to go for a check up to make sure pregnancy did not occur and to discuss plans for an effective birth control method.

Teens may have a number of questions and concerns about abortion, such as: If I have an abortion, will I be able to get pregnant again? Will my partner be able to tell if I've had an abortion? How will I tell my parents about this when I couldn't even tell them I was having sex? How is confidentiality really protected?

The decision to end a pregnancy is very, very personal. It is helpful to talk with someone who will be supportive - a trusted friend, family member, or partner. It is most important to seek help from professionals trained to provide options for counseling and abortion services. In some states, minors are required to have parental consent for abortion. Others require parental notification. This means when a teen seeks abortion services, the doctor or clinic is required to inform the parents or legal guardian.

Abortion and access to emergency contraception continue to be hotly debated issues in the United States. There are many negative messages in the media about this issue. Young people faced with having to make this decision need the nonjudgmental support of adult mentors. Choosing to bring a pregnancy to term or not is a decision that stays with a woman throughout her life.

Additional Resources:

www.plannedparenthood.org

www.answer.rutgers.edu

www.advocatesforyouth.org

www.sexetc.org

www.teenwire.org

www.pregnancyoptions.info

Guiding questions:

Should a teen under 18 need a parent's permission to have an abortion?

What if your boyfriend doesn't agree with your decision to have an abortion?

If you miss your period and have a positive pregnancy test, what would be some of the things you would consider in making a decision to having an abortion?

Physical Abuse

Physical abuse involves contact intended to cause feelings of intimidation, pain, injury, suffering or harm. It can include physical acts such as hitting, slapping, pushing, kicking, striking with objects, as well other actions intended to cause physical harm such as misuse of medication or refusal of food. There is no one face of abuse, it can happen anywhere. There are no protective barriers to abuse, not social or economic status, race, religion, gender, or age. Abuse happens everywhere, yet is often hidden. Some abusers know where to hit or pinch or slap so that bruises are not visible. They also know exactly the right words to use to control their victims; "You know you deserve this", "I told you you're not smart, pretty, clever enough," "Why can't you just follow the rules?" Young women who are abused learn how to mask abuse with long sleeves, turtlenecks and pants. There are sometimes other indicators, however; withdrawal, low self-esteem and extreme acting out may be symptoms of abuse. Teachers are often the first to notice when a student begins to withdraw or shies away from personal contact. With careful observation and discreet inquires a teacher can initiate a process that leads to a student becoming safe from abuse.

It takes time and skill to help a person who has experienced abuse. To begin with, she may not even know she is a victim; many young women will state, "I thought every family was like mine." Or you may hear, "He won't love me anymore," from a girl who fears the loss of her abuser and may have a distorted understanding of love and other powerful emotions which keeps her vulnerable to further abuse. Many young women allow their abusers to continue to hurt them thinking they are saving their younger siblings from harm.

Teachers, counselors and peers often form the bridge that allows teens to escape from abuse. It takes an enormous amount of strength to step away and begin to heal. It requires trust on the part of the person who has been abused, yet trust mat be particularly difficult to achieve because of the person's abuse experiences. It is nevertheless necessary for others - teachers, counselors, and peers - to cultivate that trust in order to break the cycle of violence and begin the healing.

Guiding Questions:

What would you do if you were physically abused by someone you know or loved?

Where would you go? Who would you tell? Would you keep it a secret? Why?

Do you think it would ever happen to you? Why?

Do you know anyone who has been abused? Are you sure no one you know has ever been abused?

If a friend came to you with a story of abuse, what would you do? Would you believe her? Would you keep her secret? Who would you tell? How would you help her?

Do you have a safe place or a safe person to go to just in case you were the victim of physical abuse?

Sexual Abuse

"Child sexual abuse is any sexual act between an adult and a minor or between two minors when one exerts power over the other."[vi] Although sexual abuse typically involves sexual touching, it can also include other acts such as photographing a minor for sexual purposes, showing pornography, exhibitionism, voyeurism, and compelling a minor to engage in a sexual act with someone else. Sexual abuse can be a single event or it can occur and often escalate over time. Sexual abuse may involve physical force and overt threats or may result from more subtle forms of coercion, deception, and manipulation (e.g. colluding with the victim in other transgressions in order to ensure their secrecy, granting special privileges, undermining the youth's credibility, telling they will be removed from their family, etc.).

Sexual abuse happens to both boys and girls and is also perpetrated by both males and females. It occurs across the spectrum of racial, ethnic and socioeconomic groups. Contrary to the common misconception that perpetrators of sexual abuse are usually strangers, most perpetrators are known to the child or adolescent. In fact, it is estimated that only about 10% of sexual abuse is perpetrated by a person unknown to the victim whereas the perpetrator is a biological relative approximately 30-40% of the time and a non-biological acquaintance approximately 50% of the time.[vii]

For those that experience sexual abuse, few disclose their abuse experiences to others and fewer still report their abuse to law enforcement. It is estimated that 1 in 6 girls and 1 in 7 boys is sexually abused before the age of 18.[viii]

It is sometimes difficult for adults to understand why victims of sexual abuse do not tell someone about their abuse. There are many reasons youth do not tell of their abuse or do not tell right away. Fear of harm, fear of loss, fear of disbelief, shame, self-blame, poor self-concept, distorted awareness and isolation are factors that inhibit disclosure of abuse. Some youth fear that they or their loved ones will be harmed if they tell (perhaps the perpetrator has threatened them or harmed others in their presence). Others are afraid that if they tell they will be taken

from their family. Some worry the perpetrator will get into trouble or be arrested (perhaps it is someone they love, their only parent, or the person who is the nicest to them on a regular basis). Many feel great shame because of their sexual abuse. They believe that they somehow are to blame for the abuse or should have done more to stop it. They wonder if there was something wrong with them that made them a target of abuse. Or they worry that others will view them as damaged goods if they know of the abuse. Many worry that they will not be believed. Sometimes the abuse happened when the youth was doing something they were not supposed to be doing so they do not tell because they are afraid they will get into trouble. Or if some time has passed since the abuse began, they fear they will get into trouble for not having told sooner (and are therefore trapped into further victimization). Recognizing factors that inhibit disclosure suggests that counteracting forces facilitate disclosure. That is, contexts, relationships, and interactions that reduce fear, diminish shame, communicate trust, enhance self-concept, promote knowledge, and develop community may tip the balance in favor of disclosure.

Children and adolescents who have been sexually abused often have subsequent emotional and behavioral difficulties. There is, however, no single set of behaviors that are specific to sexual abuse. Furthermore, some children and adolescents who have experienced sexual abuse do not manifest any significant emotional or behavioral concerns.[ix] For those who do have difficulties, some of the commonly reported and observed emotional and behavioral problems include anxiety, depression, problems with regulation of emotion, poor self-concept, withdrawal, aggression, sexual behavior problems, PTSD symptoms, substance abuse problems, and sleep disturbance.[x] Circumstances and conditions that appear to result in greater emotional and behavioral difficulties include the closeness of the relationship to the perpetrator (e.g., father or stepfather), the use of physical force by the perpetrator, the invasiveness of the sexual contact (e.g., penetration), a younger age when the abuse began, a longer period of time of abuse, and delay in disclosure.[xi]

One of the most crucial determinants of a child's subsequent functioning is the response of others to the initial disclosure of abuse[xii]. See additional resources in the Introduction to this guide for suggestions.

Additional Resources:

Childhelp USA National Child Abuse Hotline

1-800-4-A-CHILD

Children's Advocacy Centers

To find a CAC near you, contact the National Children's Alliance.

1-800-239-9950

www.nca-online.org.

Darkness to Light

Child Abuse Prevention

Helpline: 1-866-FOR-LGHT

www.darkness2light.org

National Child Traumatic Stress Network

www.nctsn.org

The National Children's Advocacy Center (NCAC)

(256) 533-KIDS (5437)

www.nationalcac.org

Prevent Child Abuse America

www.childabuse.org

312-663-3520

Rape, Abuse & Incest National Network (RAINN)

1-800-656-HOPE

www.rainn.org

Stop it Now!

Sexual Abuse Prevention

1-888-PREVENT

www.stopitnow.com

Sexual Identity

Social-emotional development is an essential piece of transitioning into adulthood. An important part of this process includes sexual identity development and integration. Sexual Identity is how a person self-identifies with regard to their sexual/romantic interest and attraction to others. Sexual identity is determined by the person and cannot be known by how a person dresses or the activities they pursue. For some young women sexual identity is established early on in development and changes little over time, but not so for everyone. Some young women prefer not to stay fixed on one identity but experiment with various identities. Such explorations are healthy and facilitate transition into adulthood. Upon assuming an identity, a young woman may go through a further process of development and integration of their identity. This process may include finding adult role models and other people who identify as they do.

Sexual identity is not to be confused with sexual behavior. Sexual behavior is defined as sexual acts or activity. A person may choose to engage in sexual activity with someone, but that activity may or may not be consistent with their sexual identity. That is, some young women may choose to engage in sexual behavior with another young woman but not identify as lesbian or bisexual. Conversely, they may engage in sexual activity with someone of the opposite sex but not identify as heterosexual. Sexual Identity is distinct from Gender Identity which refers to a person's self-identification as male or female. Transgendered youth have a Gender Identity that is different from their biological sex at birth.

While there is growing societal acceptance of lesbian and bisexual women, this has not been fully achieved. Identifying as other than heterosexual is not always acceptable in some communities or in some families and doing so may create anxiety and mental health issues as well as safety concerns for youth. A decision to disclose one's sexual identity to others ("come out") is something that should be weighed carefully, especially for young people. When a teen decides to come out to someone she must think about all the potential reactions that person may have. If she is coming out to a parent, will she be thrown out of her home or be subjected

to physical or verbal abuse? Many lesbian and bisexual teens are thrown out of their homes because of their sexual identity every year. In the United States 40% of homeless youth are lesbian, gay, bisexual or transgender. Coming out to friends and classmates may not be safe either. 90% of LGBT youth experience some sort of harassment in schools. Adults are advised to help girls learn to assess to whom it is safe to come out and also to help them learn how to develop safety plans for negative reactions to their coming out. No matter the risks of publically sharing one's sexual orientation, it is an important step in the life of a teenage to be open about who they are.

It is imperative that adult supporters are able to assess the young person's safety and make the appropriate referrals for services when necessary. Youth under the age of 18 who are thrown out of their homes must be reported to child protective services. Youth who are under the age of 18 and are the subjects of homophobic verbal abuse should also be referred to child protective services. Adults working with youth should familiarize themselves with the shelter system in their community in order to provide appropriate referrals. Youth reporting suicidal ideation or homicidal intent should receive immediate intervention.

Additional Resources:

The Trevor Project:

844-4-U- Trevor – (866-488-7386)

The Trevor Project is the leading national organization focused on crisis and suicide prevention efforts among lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth.
The Trevor Project operates the only accredited, nationwide, around-the-clock crisis and suicide prevention helpline for LGBTQ youth.

The Hetrick-Martin Institute:

www.hmi.org

The Hetrick-Martin Institute is the oldest and largest lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth serving agency. With 30 years of experience working with LGBTQ youth we have developed replicable best practice model for the work.

Lambda Legal:

www.lambdalegal.org

Lambda Legal is the oldest national organization pursuing high-impact litigation, public education and advocacy on behalf of equality and civil rights for lesbians, gay men, bisexuals, transgender people and people with HIV. The work we do has impact on the way we live — we change laws, policies and ideas.

Bullying and the Myth of "Mean Girls"

There is growing concern about aggression, bullying, and "mean" behavior among girls, particularly in the U.S. and Canada. In girl-targeted media, the message for girls is often that bullying, meanness, exclusion, gossip, rumor-spreading, competition with other girls over appearance, boys, and social status are an unavoidable condition of being female. This "girls will be girls" notion that females of all ages will naturally betray, reject, and undermine one another divides girls and cuts them off from a source of much needed support and information about the way the world works and what they share in common across their differences. The reality, of course, is that girls need one another.

It makes sense that this myth of betrayal would prevail in many social contexts. To the degree to which girls live in cultures where men hold political and social power, girls may not be listened to or taken seriously, or they may be restricted in their activities, watched more closely, mistreated or have fewer rights because of their gender. Thus acceptance, visibility, status and in some cases, survival can depend on pleasing men and competing for men. However, when girls name injustice together and resist divide and conquer strategies, they can be a powerful force for social change and social justice.

Girls may bring assumptions about female betrayal and their experiences of rejection and competition into the classroom. They may experience anxiety about whether or not they'll be accepted or included and they may stand apart, looking for signs that another girl will be friend or foe. They may gravitate toward those girls who, because of race, ethnicity, religion, clothing style, or appearance, suggest they have something in common. The success of their work together will depend on their ability to know and understand one another on a deeper level and to consider the feelings and experiences that get in the way of this understanding. It is important, then, to name and explore these feelings together and to affirm a belief in the power of girls to be allies [and to create and maintain a coalition].

As a V-Girls facilitator, you can help girls to identify societal messages and discuss their own experiences of betrayal and bullying. Show them how they can band together to resist social pressure. Your V-Girls can also discuss how these girl issues become women's issues: societies where women are marginalized because of their gender; have less or no political power, as compared to men; have their rights curtailed. Help them to explore how isolation and power games lead to betrayal, violence and destruction, whereas solidarity and friendship lead to well-being, joy and building a positive world. You can even have them formulate a plan for spreading this kind of awareness to their community.

In your group, help girls identify societal messages and discuss their own experiences of betrayal and bullying. It can be helpful for girls to explore how they are similar, how they are dissimilar, and why they might need each other. It is important to examine the harm that girls can do to others and themselves when they accept the violent and damaging assumptions that girls must compete with each other - especially for a boy's affections, compete to be "queen bee," or the most popular girl, and exclude other girls in order to maintain a "social group purity" WHAT DOES THIS MEAN????. It is most useful for girls to see these behaviors not as just the "norm", but as violent to other girls and themselves.

Cutting and Self-Injury

Cutting is a behavior in which someone purposefully hurts themselves by cutting or otherwise harming their own skin. Why might someone want to cut themselves?

There are many explanations for why people cut themselves. For some, cutting provides a physical pain, a single focus to distract from a seemingly inescapable and pervasive emotional pain, which feels overwhelming to the person. The focusing of the pain to one specific place can sometimes have the effect of calming the person down, temporarily. Some people try to cut off from their own appropriate emotional responses to experiences they have had or situations they are presently experiencing in their lives. Cutting provides a secretive, isolative way of connecting to a strong feeling and then releasing that feeling. There is hope that their mental suffering will come to an end, just as physical suffering comes to an end. There is also an illusion of control. The problem is that it is a temporary fix with long-term problems.

Many who cut themselves believe they cannot ever experience emotional understanding from another person. Seemingly inescapable suffering starts with closely held beliefs about the unsatisfying quality of all relationships. These beliefs may be developed from experiences in early development. Some girls who injure themselves do so because they are unhappy. Often people do not realize the extent to which their experiences are understandably painful. They may believe that their suffering is a sign of their own weakness, and due to their own inability to be stronger, less needy, less emotionally dependent, yet they do not see how to improve their level of functioning. Cutting and other self-injury is also a dangerous behavior. At times, individuals with no intent to kill themselves, accidentally do so. Cutting can become an addiction. It is used as a misguided method of self-care. Without structured and professional interruption, cutting tends to escalate. Young people can overcome cutting by learning the how to self-soothe and how to take genuine, effective care of oneself, though positive, effective and mature ways to resolve emotional dilemmas.

It is important for individuals who engage in cutting behavior and other forms of self-injury to receive professional help. School mental health personnel can help obtain those connections to treatment and can assist girls in receiving immediate and longer term help.

Guiding questions:

Have you ever known someone who cut themselves? What did they say in explanation of their behavior?

---

[i] Centers for Disease Control and Prevention, Adverse Childhood Experiences Study
http://www.cdc.gov/nccdphp/ace/prevalence.htm
[ii] Centers for Disease Control and Prevention, Youth Risk Behavior Study, 2007
[iii] National Campaign to Prevent Teen and Unplanned Pregnancy—Fact Sheet
[iv] Centers for Disease Control and Prevention, Youth Risk Behavior Study, 2007
[v] Centers for Disease Control and Prevention, Youth Risk Behavior Study, 2007

[vii] 44. Kilpatrick, D., Saunders, B., & Smith, D. (2003). Youth victimization: Prevalence and implications. U.S. Depar tment of Justice, National Institute of Justice report.

[viii] 1 in 6 girls and 1 in 7 boys is sexually abused before he age of 18…D2L? CACRC
[ix] Beitchman, et al, Child Abuse and Neglect, 1992 (D2L 6)
[x] (Brown & finkelhor, 1986)
[xi] National Research Council, *Understanding Child Abuse Neglect,* Washington, DC: National Academy Press, 1993.
David Finkelhor et al, *A Sourcebook on Child Sexual Abuse,* Newbury Park: Sage Publications, 1986.
Finkelhor, 1990