TAMUS Child Protection Training

This training is provided and intended for use by Texas A&M University System employees/volunteers and personnel of third party camps using Texas A&M University System property for camps and programs for minors. It is derived from Texas state statutes as well as policies found within the Texas A&M University System.

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Provided by System Risk Management with cooperation and assistance of TAMU Student Activities
Introduction

The Texas A&M University System is committed to providing a safe environment for youth to grow, learn, and have fun. This training is provided to certain personnel who work with minors to educate them about a significant risk posed to children. It is our goal to balance the need to keep children safe with the need to nurture and care for children by engaging staff and volunteers in strategies for recognizing, preventing, and reporting child abuse and neglect. This program provides the training mandated by Texas Education Code §51.976

This course is divided into four sections:

A. The Definitions and Effects of Child Abuse and Child Molestation
B. Signs, Symptoms, and Reporting of Suspected Abuse
C. Typical Patterns and Methods of Operation of Child Molesters and Sex Offenders
D. Recommended Rules and Procedures For Youth Programs
The purpose of Section A is to clearly define what constitutes child abuse and child molestation. The section will also identify the different types of abuse as well as the effects of child abuse.

**Did You Know?**

- A report of child abuse is made every ten seconds.¹
- In 2010, more than 90% of the child maltreatment reports in Texas were reports of sexual abuse or neglect.⁶
- More than 90% of juvenile sexual abuse victims are abused by people they know.⁶
- About 30% of abused and neglected children will later abuse their own children, continuing the horrible cycle of abuse.¹
Defining Child Abuse

The Texas Administrative Code (Title 25, Part 1, Chapter 1, Subchapter Q, Rule 1.203) defines a child as, “A person under 18 years of age who is not and has not been married or who has not had the disabilities of minority removed for general purposes.” (25 TAC 1.203) According to Chapter 261 of the Family Code, child abuse is an act or omission that endangers a child’s physical, mental or emotional health and/or development. Child abuse may take several forms, including:

- **Physical Abuse** – Any non-accidental bodily harm or injury to a child. This could include hitting, kicking, slapping, shaking, burning, shoving, whipping, and any other use of physical force.1

- **Emotional/Psychological Abuse** – Any attitude or behavior that interferes with a child’s mental health, social development, or psychological functioning. Examples include making fun of a child, name-calling, shaming, rejection, threatening, and attacking a child’s self-image through labels or ridicule.1,2
• **Neglect** – The failure to ensure a child’s physical, medical, emotional, and safety needs are met. This includes a lack of supervision, inadequate provision of food, inappropriate clothing for season or weather, abandonment, denial of medical care, and inadequate hygiene.¹

• **Sexual Abuse** — Child sexual abuse or molestation is criminal behavior that involves children in sexual behaviors for which they are not personally, socially, or developmentally ready. The Texas Administrative Code (25 TAC 1.203) defines Sexual Abuse as, “Any sexual activity, including any involuntary or nonconsensual sexual conduct that would constitute an offense under the Penal Code 21.08 (indecent exposure) or Chapter 22 (assaulting offenses), involving a facility and a patient or client. Sexual activity includes but is not limited to kissing, hugging, stroking, or fondling with sexual intent; oral sex or sexual intercourse; and request, suggestion or encouragement for the performance of sex.” **Sexual abuse can occur through touching and non-touching means.**
Defining Child Abuse (continued)

- Non-touching sexual abuse offenses include:
  - Indecent exposure/exhibitionism
  - Exposing children to pornographic material
  - Deliberately exposing a child to the act of sexual intercourse
  - Masturbation in front of a child
- Touching sexual offenses include:
  - Fondling
  - Making a child touch themselves or anyone else’s sexual organ(s)
  - Any penetration of a child’s vagina or anus by an object for anything other than a medical purpose

Child sexual abuse may be violent or non-violent, and many times the children are not forced into the sexual situation. Rather, they are persuaded, bribed, tricked, or coerced. All child sexual abuse is an exploitation of a child’s vulnerability and powerlessness in which the abuser is fully responsible for the actions.
While there is no single set of behaviors that is characteristic of children who have been abused and/or neglected, the US Department of Health and Human Services has documented several emotional and psychological effects that are commonly associated with children who have been victimized, including:

- Low self-esteem
- Depression and anxiety
- Post-traumatic stress disorder (PTSD)
- Attachment difficulties
- Attention disorders
- Eating disorders
- Poor peer relations
- Self-injurious behaviors (e.g. suicide attempts)
- Lower academic achievement

Ultimately, the effects of child abuse and neglect can be wide ranging in severity and duration depending upon the circumstances of the abuse or neglect, the personal characteristics of the child, and the child’s environment.
Section B will discuss the warning signs and symptoms of child abuse, recognition of these signs, and steps for responding when you learn of suspected abuse.

The first step in helping children who have been abused or neglected is learning to recognize the signs of child abuse and neglect. Often times a child may not report abuse; therefore, it is vital that you are aware of and look for signs of abuse or neglect.

Listed below are some signs, compiled by the US Department of Health and Human Services, that may present themselves in a child, parent or caregiver who are in an abusive relationship. When reviewing these signs, it is important to note that children who have been abused may exhibit several symptoms or no symptoms at all. The presence of a single sign is not proof that a child has been abused, but a closer look at the situation may be warranted when these signs appear repeatedly or in combination.
Signs & Symptoms of Abuse

- **Signs of Abuse**
  - The child:
    - Shows sudden changes in behavior or performance
    - Has not received help for physical or medical issues brought to the parents’ attention
    - Is always watchful, as though preparing for something bad to happen
    - Is overly compliant, passive, or withdrawn
    - Arrives early, stays late, and does not want to go home
  - The parent/caregiver:
    - Shows little concern for the child
    - Asks/Permits program counselors to use harsh physical discipline if the child misbehaves
    - Sees the child as entirely bad, worthless, or burdensome
  - The parent/caregiver and child:
    - Rarely touch or look at each other
    - Consider their relationship entirely negative
    - State they do not like each other
Signs & Symptoms (continued)

• **Signs of Physical Abuse**
  – The child:
    • Has unexplained burns, bites, bruises, broken bones, or black eyes
    • Seems frightened of the parents or protests when it is time to go home
    • Shrinks at the approach of adults
    • Reports injury by a parent or another caregiver
  – The parent/caregiver:
    • Offers conflicting, unconvincing, or no explanation for the child’s injury
    • Uses or condones/encourages harsh physical discipline with the child

• **Signs of Sexual Abuse**
  – The child:
    • Has difficulty walking or sitting
    • Suddenly refuses to change for, or participate in, physical activities
    • Reports nightmares or bedwetting
    • Experiences a sudden change in appetite
    • Demonstrates bizarre, sophisticated, or unusual sexual knowledge or behavior
    • Reports sexual abuse by a parent or caregiver
• The parent/caregiver:
  – Is unduly protective of the child
  – Severely limits the child’s contact with other children, especially of the opposite sex
  – Is secretive and isolated
• **Signs of Emotional Abuse**
  – The child:
    • Shows extremes in behavior, such as overly compliant or demanding, extreme passivity or aggression, etc.
    • Is delayed in physical or emotional development
    • Is either inappropriately adult (parenting other children) or infantile
    • Has attempted suicide
    • Reports a lack of attachment to the parent/caregiver
  – The parent/caregiver:
    • Constantly blames, belittles, or berates the child
    • Is unconcerned about the child and refuses to consider offers of help for the child’s issues
    • Overtly rejects the child
• **Signs of Neglect**
  - The child:
    • Is frequently absent
    • Begs for or steals food or money
    • Lacks needed medical or dental care, immunizations or glasses
    • Is consistently dirty and has severe body odor
    • Lacks sufficient clothing for the weather
    • Abuses alcohol or drugs
    • States that there is no one at home to provide care
  - The parent/caregiver:
    • Appears indifferent to the child
    • Seems apathetic or depressed
    • Behaves irrationally or in a bizarre manner
The presence of any of these signs may be a serious indicator of abuse or neglect and a person noticing these symptoms should pay particular attention to a child who exhibits them. These behaviors are not, in and of themselves, conclusive evidence that a child has been abused; however, the presence of any of these behaviors may indicate that a child is being or has been abused or neglected. Even without these signs, listen to children closely as they may share subtle hints that someone in their social circle is causing harm.
If a child discloses that he or she has been abused by someone, it is important that you listen to them most of all.

**DO NOT**
- Investigate to determine if the reported abuse is true
- Ask leading questions (a question that suggests the answer or contains the information the questioner is looking for – That man touched you, didn’t he?)
- Make promises
- Notify the parents or the caretaker
Responding to Suspected or Reported Abuse (continued)

DO 1

– Believe the child
– Provide a safe environment (be comforting, welcoming, and a good listener)
– Tell the child it was not his/her fault
– Listen carefully
– Document the child’s exact quotes
– Be supportive, not judgmental
– Know your limits
– Tell the truth and make no promises
– Let the child know the information will not be shared with other children, while acknowledging that, in order to help the child, it will be necessary to discuss the situation with others who are in a position to help

• Ask ONLY four questions
  – What happened?
  – Who did this to you?
  – When did this happen?
  – Where were you when this happened?
  – Asking any additional questions may contaminate a case!

• Report it!
How to Report Suspected or Known Abuse or Neglect

*Texas Family Code; Chapter 261* requires, “any person having cause to believe that a child’s physical or mental health or welfare has been adversely affected by abuse or neglect to immediately make a report” to law enforcement §261.101(a). This law also provides protection for those who, in good faith, report or assist in the investigation of alleged or known abuse or neglect (§261.106). The immunity provided by law includes both civil and criminal liability.

When a child appears to be in immediate danger of serious harm, call 9-1-1 (where that service is available) or the nearest law enforcement department to ensure the fastest possible response time to protect the child. The person reporting should provide, whenever possible:

- The child’s name, description, age and address
- The name and address of the person responsible for the care, custody or welfare of the child
- Any other information to help authorities assist the child (who, what, when, where)
Once the incident is reported to law enforcement, notification must be given to the camp or program director. The program director must file an online report with the Texas Department of Family and Protective Services at the following link:

http://www.txabusehotline.org/Login/Default.aspx

Due to the sensitive nature of this type of report, it is important to maintain the highest level of confidentiality and professionalism when reporting. It is critical that the report be made as soon as possible. The more time that elapses between the incident and the report, the more difficult it is for authorities to investigate and to get the child the needed and necessary care.
More than 3 million reports of child abuse are made every year in the United States. Unfortunately, many more cases go unreported. The reasons for choosing not to report may be numerous and may include:

- Unsure about where and how to make a report
- Fear of being wrong about the suspected abuse
- Fear of making an inaccurate report
- Fear of negative reactions by coworkers, parents, or others
- Concern that CPS or law enforcement does not generally provide sufficient help to maltreated children
- Fondness for the parents and a belief that they would not hurt their own child
- Fear of misinterpreting cultural disciplinary styles
- Apprehension about getting involved

Charges of abuse and neglect are serious, so feelings of fear, apprehension, or concern are understandable; however, these reports are not only vital in order for the child to get the needed care, they are also mandated by state law. Knowingly failing to report abuse or neglect is a Class A Misdemeanor §261.109.
Child-to-Child Abuse Vs. Normal Sexual Behaviors

It is important to note that not all child sexual abuse is between an adult and a child. While sexual curiosity and sexual play are normal steps in a child’s development, these behaviors become concerning when they are extensive, unwanted by other children, occur between children who are much older or much younger than each other and/or when a child cannot or is unwilling to stop the behavior when asked by a parent or guardian.

“There is a difference between reportable abuse and age-appropriate sexual behavior. Normal sexual behaviors will often have the following traits:

– The sexual play is between children of similar size, age, and social and emotional development.
– It is lighthearted and spontaneous. The children may be giggling and having fun when you discover them.
– When adults set limits (for example, children keep their clothes on at day care), children are able to follow the rules.”

Signs of concerning behavior in children include:

– Children with a preoccupation with sexual acts
– Children who have sexual behaviors and interests that are not similar to those of same-age children
– Children aged 4 and older who do not understand or respect the rights and boundaries of other children in sexual acts
– Children who engage in adult-type sexual acts
– Children who use bribery, threats, or force to engage other children in sexual acts
All camp policies should prohibit any sexual conduct between children. A no tolerance policy and clear explanation to participants and parents/guardians sets the standard for expectations. There may be times when sexual conduct between children occurs. It is critical to understand when these encounters may be abuse and when you are required to make a report to local law enforcement. If you find yourself in this situation, the following considerations should help you determine the appropriate action.

Child-to-child sexual conduct is defined as participants under the age of 18 engaging in sexual kissing, hugging, stroking, or fondling with sexual intent; oral sex or sexual intercourse; and any request for the performance of sex. [25 TAC 1.203(22) & Family Code 261.001(1) defining abuse to include sexual conduct]. In evaluating this conduct and whether the incident should be immediately reported to law enforcement, consider:

Would a reasonably prudent person believe the behavior harmful to a participant’s mental, emotional, or physical welfare? [Family Code 261.001(1)(E)] If there is an age difference of more than three (3) years between the participants, the answer to this question is always YES.
Child-to-Child Sexual Abuse Reporting Guidelines

If all the other elements are present and the answer to “Would a reasonably prudent person believe the behavior harmful to a participant’s mental, emotional, or physical welfare? [Family Code 261.001(1)(E)] If there is an age difference of more than three (3) years between the participants, the answer to this question is always YES”, then:

**Reporter Of The Abuse**

The reporter must immediately notify law enforcement. Follow the guidance of law enforcement and then immediately report the incident to the program director. The reporter must note (a) the name of the law enforcement official who took the report, (b) the time of the report, (c) a brief summary of your discussion with law enforcement and (d) provide this information to the program director.

**Program Director**

Unless instructed by law enforcement to not contact the parent(s)/guardian(s), the program director will immediately notify the parent(s)/guardian(s) of the children. The program director will then file an online report with the Texas Department of Family and Protective Services at the following link:

http://www.txabusehotline.org/Login/Default.aspx

If the answer to the question is NO, then immediately report the incident to the program director who must notify the parent(s)/guardians(s) of the participants before the end of the day.
In summary, there are numerous signs commonly associated with child abuse and neglect. Ensure that you are knowledgeable of these signs, and that you pay close attention to the behavior of the children, parents, caregivers, and others with whom you interact. These patterns may be evidence of abuse or neglect and could save a child’s life. If you witness, suspect, or receive a report of child abuse regardless of when abuse occurred:

- Remove the child from immediate harm (if presently occurring)
- Report the abuse to local law enforcement
- Report the situation to your supervisor or the program director (unless they were the source of abuse or neglect)
The purpose of Section C is to identify typical patterns and methods of operation of child abusers and sex offenders.

Recognizing the typical characteristics and methods of operation commonly employed by individuals who sexually victimize children is an important step in preventing abuse from ever occurring. For the purposes of this training, a child molester is defined as a person who engages in any type of sexual act with a child and is older than the child.
Who is the typical child molester?

The belief that the typical child molester is a dirty old man in a trench coat is not only inaccurate but dangerous because it creates a false sense of security. The reality is that most sexual-exploitation-of-children cases in the US involve acquaintance molesters. The “acquaintance molester”, by definition, is one of us. The person is not simply an anonymous, external threat. The person cannot be identified by physical description and, often, not even by “bad” character traits. This emphasizes the importance of understanding how molesters operate and being aware of their patterns of behavior.

Common offender traits include:

- Adults/Individuals who seem preoccupied with children
- Adults/Individuals who identify with children better than adults
- Adults/Individuals who seem to converse well with children at the child’s level and more importantly, know how to listen to them on the child’s level
• Adults/Individuals who seem to engage in frequent contact with children (i.e. casual touching, caressing, wrestling, tickling, combing hair, or having children sit on their lap)
• Adults/Individuals who act like children with children or who allow children to do questionable or inappropriate things
• Adults/Individuals who do not have children and seem to know too much about the current fads or music popular for children
• Adults/Individuals that children seem to like for reasons you cannot understand
• Adults/Individuals who seem to infiltrate family/social functions or are “always available” to watch kids
Typical Behavior Patterns of Child Molesters and Sex Offenders (continued)

• Adults/Individuals who prefer the company of children to adult relationships – circle of friends and associates are young, have limited peer relationships and often engage in activities with children while excluding adults
• Adults/Individuals who spend inappropriate amounts of money on other people’s children
• Adults/Individuals who refer to children as “clean,” “pure,” “innocent”
• Adults/Individuals who have hobbies and interests appealing to children
• Adults/Individuals who frequently photograph children
Sex Offender Typology

There are two commonly identified types of sex offenders, preferential offenders and situational offenders. Preferential Offenders may be the “pillars of the community” and are often described as “nice guys.” They have definite sexual inclinations and preferences – those with a preference for children could be called “pedophiles,” while those with a preference for peeping could be called “voyeurs.” It is important to note that a preferential offender whose sexual preferences do not include children can still sexually victimize children.

- Criminal sexual behavior tends to be in the service of deviant sexual needs – often persistent, compulsive, ritualistic, and fantasy-driven
- More likely to view, be aroused by, and collect pornography with specific themes
- Have age and gender preferences
- Proactive in seeking their victims and aggressively engage in bold and repeated attempts to molest a child
Types of Sex Offenders (continued)

- Invest significant amounts of time, energy, money and other resources to fulfill their sexual desires
- Can easily have dozens if not hundreds of victims in their lifetime

Preferential offenders almost always have a method for gaining access to children and they are extremely dangerous because of their predatory nature. Rather than simply hanging around areas where children congregate, they may seek employment where they will be in contact with children (i.e. camp counselor, teacher, school bus driver, baby sitter) or where they can eventually specialize in working with children (i.e. doctor, dentist, social worker, clergy member). The key is that they seek and find access to children.
Types of Sex Offenders (continued)

*Situational Sex Offenders* are less likely to have sexual preferences for children. These individuals may, however, engage in sex with children for varied and complex reasons.

- Criminal sexual behavior tends to be in the service of basic sexual needs or non-sexual needs, such as power or anger
- Sexual behavior is opportunistic and impulsive
- Victims tend to be targeted primarily based on availability and opportunity
- Focus is on general victim characteristics (i.e. age, gender, race, etc.) and their perception of themselves as entitled to sex
- Frequently molest children who they have access to and control over
- Pubescent teenagers and younger children are common targets because they are weak, vulnerable, and/or available
- Tends to have fewer child victims than preferential offenders
An example of a situational sex offender could be a counselor/volunteer who is left unsupervised (ex. one-on-one tutoring) with participants for several hours, or throughout multiple times during a camp. During one of these unsupervised sessions, the opportunity presents itself to the counselor and he/she molests the child. This offender may use unsupervised situations during scheduled or unscheduled times throughout the camp to their advantage.

To reduce the risk of situational molestation it is vital that you create an environment of heightened awareness and accountability. Screening, supervision, and accountability are key strategies that put the offender, rather than the child at risk and, in turn, reduce the risk of sexual molestation.
Methods of Operation

Sexual predators may employ any of the following methods or strategies to gain access to potential child victims:

- Seduction/Grooming\(^4\) – This strategy is commonly employed by preferential offenders. The process takes place over a period of time and usually requires ongoing access to the child. The offender starts by gathering information about the child through a variety of means, including observing behaviors, conversations, and accessing records. Their goal is to determine the child’s interests or vulnerabilities. For example, offenders often target children who are from dysfunctional homes or victims of emotional or physical neglect. Once the offender understands the child, the next step is to lower the child’s sexual inhibitions. This is accomplished by gradually desensitizing the victim to increasingly inappropriate behavior while also rewarding their tolerance for the behavior through affection, attention, and gifts.
Typical Methods of Operation of Child Molesters and Sex Offenders (continued)

The desensitizing process may begin with simple affection – such as a pat, hug, or kiss on the cheek – and progresses to increased physical contact – fondling while wrestling, playing hide-and-seek in the dark, drying the child with a towel, giving a back rub, tickling, playing a physical game, or cuddling in bed. Victims usually become willing to trade sex for the attention, affection, gifts, and other benefits they receive from the offender.

- **Trickery/Coercion/Manipulation** – Molesters are creative in using the natural desires of a child. Children see adults as authority figures. They are naturally curious and need attention and affection. A molester may use these natural tendencies to lure the child into a situation where they are able to sexually molest or abuse the child. Molesters will isolate a child from adult supervision where they will be more vulnerable to molestation.

- **Force** – Usually there is little a child can do to resist force, whether through intimidation, threats, fear, or physical force.
Typical Methods of Operation of Child Molesters and Sex Offenders (continued)

- **Secrecy** is the common thread in these methods of operation. Secrecy is maintained by several methods they include but are not limited to:
  - **Bribery** – This could include gifts, animals, affection, or any favors that interest a child.
  - **Blame** – The molester tells the child they are at fault for what has happened.
  - **Embarrassment** – Children realize that what has taken place is wrong.
  - **Loss of Affection** – Often the molester is a person who is loved by the child.
  - **Displaced Responsibility** – The child blames themselves for the molestation.
  - **Threats** – The molester threatens the child or someone in the child’s family with physical harm.

Child abusers and child molesters may employ a number of strategies for gaining access to children and isolating them from others.
Section D will discuss recommended child abuse prevention strategies. The rules and procedures presented promote a culture that is committed to discussing, addressing, preventing, and reporting child abuse and molestation.

Sex offenders may engage in tickling and physical activities with children as a screening strategy. Anyone who does not object to these behaviors is viewed by sex offenders as being more likely to provide a safe haven for further unimpeded access to children. Additionally, those who do nothing about these activities also inadvertently communicate to children that the behavior is appropriate because the conduct was tolerated. So, what can you do to prevent and address sexual abuse and molestation in youth programs?

1. **Be knowledgeable**

   This training has presented a great deal of important and useful information related to child abuse and molestation. It is your responsibility to put this knowledge into action in order to effectively prevent and address child sexual abuse and molestation.
In addition to this information, it is highly recommended that you take the time to familiarize yourself with the typical behavior patterns of the children with whom you will be interacting and supervising. The Centers for Disease Control and Prevention provides a comprehensive list of facts about child development.

([http://www.childwelfare.gov/can/factors/knowledge.cfm](http://www.childwelfare.gov/can/factors/knowledge.cfm))
2. **Minimize the opportunities for child abuse and molestation**

The following recommendations serve two functions: 1) they are intended to protect youth participants, and 2) they also serve to protect adult counselors from being placed in potentially compromising situations or false accusations of abuse.

- **Guidelines for interactions between program staff/volunteers and children**
  - **One-on-one interactions between program staff/volunteers and children should be limited** (i.e. at least two adults should be present at all times with youth). No adult should ever be alone with a camper in an isolated place. In situations that require personal conferences, the meeting is to be conducted in view of other program staff/volunteers.
  - **No child or teenager should ever sit on the lap of a program staff or volunteers.** No adult is to allow a child or teenager to sit on his/her lap or lie in his/her bed. The only exception would be the parent/caregiver of the child.
  - **No frontal hugs.** An adult from time to time may feel a child’s need for a hug in order to support or comfort the child. The adult must use a shoulder to shoulder hug.
Recommended Rules and Procedures for Youth Programs (continued)

- **Contact between program staff/volunteers and youth is restricted to organization-sanctioned activities and times.** Program staff/volunteers should not contact youth outside of program activities or program specific needs. Counselors should never serve as babysitters for camp participants during a camp session.

- **Rough housing or hazing is prohibited.** Program staff/volunteers will not wrestle, tickle, or in any way engage a child or teenager in an activity where the adult’s hands might come in contact with the breasts or genital area of the camper. Staff and volunteers must be particularly careful about physical contact with campers while in the swimming area. No counselor or camper is to participate in any kind of hazing or initiation activity.

- **Wear appropriate attire.** Adults will at all times be dressed modestly. Clothes such as swimsuits, shorts, and tops are not to be revealing or in any way draw attention to the breasts, buttocks, or genital area. Equally important, program staff/volunteers should monitor the clothing worn by children. Youth clothing should follow the same guidelines above and should be appropriate for the weather and program activities.
Recommended Rules and Procedures for Youth Programs (continued)

• Guidelines for providing a safe environment

  – *Respect privacy:* Adults must respect the privacy of campers in situations such as changing clothes and taking showers. Only in emergency situations should an adult enter an area where children are unclothed. An adult would only intrude to the extent that the health and or safety of the camper would be in question. In the case of safety, one adult may enter the private area, but whenever possible two adults should be present. Campers must also respect the privacy of the adults in these situations. Therefore, it is not permissible for campers or adults to move about in the housing area unclothed.

  – *Counselor(s) sleeping accommodations:* Adults should sleep in an area where they can exercise the highest level of child supervision but not isolate themselves from general view. When wilderness camping, adults are prohibited from sleeping in pup-type tents with campers unless it is a parent and his or her child.

  – *Control access to children:* Limit contact between children and individuals not associated with the program while youth are under your care. Monitor the comings and goings of all youth and adults who enter and leave the facility. Be particularly alert to opportunities that are presented when activities occur in public spaces.
Recommended Rules and Procedures for Youth Programs (continued)

– **Conduct activities in spaces that are open and visible to multiple people.**
  Ensure there are clear sight lines throughout the activity spaces. Secure areas not used for programmatic purposes (i.e. closets, storerooms) to prevent youth from being isolated.

3. **Be alert**
   – Counselor-to-counselor monitoring is **critical** to the health and protection of children and to each other. An environment of heightened awareness and accountability is essential to preventing and addressing sexual abuse and molestation. To this end, all program staff and volunteers are expected to monitor their own behavior, as well as the behavior of other staff/volunteers.
   – Camp staff/volunteers should model appropriate interpersonal behaviors. Be aware of a child’s comfort level with activities, situations, and physical and emotional affection, and respond in an appropriate and consistent manner to child behaviors. Use discretion in what personal or private experiences you share with a child, and **never** discuss or ask children questions about sexual experiences.
4. **Act on suspicions**

**How to Report Suspected or Known Abuse or Neglect**

*Texas Family Code; Chapter 261* requires, “any person having cause to believe that a child’s physical or mental health or welfare has been adversely affected by abuse or neglect to immediately make a report” to law enforcement §261.101(a). This law also provides protection for those who, in good faith, report or assist in the investigation of alleged or known abuse or neglect (§261.106). The immunity provided by law includes both civil and criminal liability.

When a child appears to be in immediate danger of serious harm, call 9-1-1 (where that service is available) or the nearest law enforcement department to ensure the fastest possible response time to protect the child. The person reporting should provide, whenever possible:

- The child's name, description, age and address
- The name and address of the person responsible for the care, custody or welfare of the child
- Any other information to help authorities assist the child (who, what, when, where)
Remember, it is important to ensure the authorities are able to respond to the situation and provide the child with the needed care. It is not your role to question or determine the facts or to suggest that he/she was or was not abused. Ask:

- What happened?
- Who did this to you?
- When did this happen?
- Where were you when this happened?

**Reporter Of The Abuse**

The reporter must *immediately* notify law enforcement. Follow the guidance of law enforcement and then *immediately* report the incident to the program director. The reporter must note (a) the name of the law enforcement official who took the report, (b) the time of the report, (c) a brief summary of your discussion with law enforcement and (d) provide this information to the program director.
Once the incident is reported to law enforcement, notification must be given to the camp or program director. The program director must file an online report with the Texas Department of Family and Protective Services at the following link:

http://www.txabusehotline.org/Login/Default.aspx

Due to the sensitive nature of this type of report, it is important to maintain the highest level of confidentiality and professionalism when reporting. It is critical that the report be made as soon as possible. The more time that elapses between the incident and the report, the more difficult it is for authorities to investigate and to get the child the needed and necessary care.

We all have the responsibility to protect our children. If you take nothing else from this training, remember that you have the power to intervene and prevent these heinous acts from occurring. If you witness or suspect abuse is occurring, or if you receive a report of possible abuse, report it.
References & Citations

References & Citations

• ⁹ Stop It Now!, 2012, Age Appropriate Sexual Behavior, WWW, http://www.stopitnow.org/age_appropriate_sexual_behavior (last visited 2/1/2012). This Web site has additional information categorized by age range
CERTIFICATE OF COMPLETION

Child Protection Training

Course Name

Training Course Approval Number: CPM12-0066

Texas Department Of State Health Services

__________________________________________
Name of Recipient

Date of Completion: ________________ Score: ________

Course Facilitator: ___________________________ _______________
Signature Date

__________________________________________
Organization Position