

## Prevention Education FAQ (for Educators)

### **There's a student in my class I know has been affected by this topic, should they be a part of this conversation?**

At NWCASA we place a large emphasis on being survivor-centered and trauma-informed. In practice, that allows students the ability to opt out of potentially triggering or retraumatizing dialogues. It is important to keep in mind that just because a student hasn't disclosed, doesn't mean they haven't experienced violence and could explain why they might act out during these conversations. That being said, "the discussion of sexual violence is not inherently hurtful for survivors," however, inappropriate comments can cause harm ([Bedera, 2021](#)) Which is why setting standards in advance is so important!

### **If a student begins to act out during the presentation, what should we do?**

As mentioned in the answer above, a potential reason a student may act out during these conversations is because they have a relationship to the subjects being discussed. Students' triggers and responses to triggers vary significantly in a variety of ways. For some, they may experience psychological symptoms (e.g.: anxiety, depression, PTSD responses), whereas others may respond differently to other stimuli ([Bedera, 2021](#)). In these instances, it will be incredibly hard for a student to respond to instruction in a classroom setting, and it would be best for them (and the class!) to have a space they can go to.

If you feel a student is acting out for the sake of acting out due to immaturity or discomfort, I ask that you help maintain a supporting environment for the other students by removing them from the setting,

\*For more information on how to identify triggers, check out this resource.

### **Do I need to be present during your presentation?**

Yes! In the event that students need to leave the presentation or require a behavioral intervention, it is best that their core teacher is there to facilitate a safe environment for everyone. In the event of substitute teachers, we completely understand that schools are understaffed and under-resourced and therefore, instances may come up where substitute teachers must be present; however, it is ideal for the core teacher to be present during instruction of these topics for student comfort. In many instances, this content may be new and at some points, overwhelming to students. Having a familiar adult present may help relieve these feelings and enhance learning. Students may also have follow-up questions that the teacher can answer after having viewed the presentation when the presenter is gone from the classroom.

### **Can you explain your time requirements?**

As per our current guidelines, the minimum time requirement for NWCASA Prevention Education is as follows. PreK-5 Classrooms are expected to commit to one class period of content. For younger students, our presentations likely will not last the full period. In classes 6<sup>th</sup> grade or older, we ask that schools provide us two regular class periods or one block class. In both internal and external reviews of sexual violence prevention education, we have found that in order to create lasting change, "Quick, single-session sexual violence interventions are not effective and may actually be harmful ([Basile, 2016](#))." Programs with brief, one session sessions have not demonstrated lasting impact on the risk factors contributing to sexual violence ([DeGue, 2014](#)). While we understand that this can be difficult to accommodate, social-emotional skills must be emphasized like any other discipline.

**Why do you provide a train-the-trainer model and a direct-instruction model for PreK-5?**

Young children are more likely to disclose to familiar adults, therefore, having a trusted adult relay information about these topics can increase the likelihood of preventing further violence. While NWCASA wants to support the community to the best of our abilities, our goal is to encourage self-sufficiency/fluency in speaking about these topics in the future so that we can build a more understanding and informed world.

**Previously, your prevention education services were free of charge, why the change?**

Due to funding changes, prevention education has been difficult to keep staffed. To ensure our prevention education programming can meet the demands of our community we are humbly suggesting an honorarium fee based on the following agency cost allocations. This will supplement the cost to evidenced-based skill development lessons by NWCASA's highly qualified trained facilitator. Our trainings are survivor-centered, inclusive, trauma-informed, and judgment-free. They are led by a 40-hour sexual assault-trained crisis worker. NWCASA will continue to provide materials to the classroom as well as cover travel costs.

**Is there anything we should share with our class prior to your presentation(s)?**

Preparing students for instruction on sensitive subjects can help them to engage in the dialogue NWCASA has created more effectively. Giving students an idea of the topics that will be addressed as well as promoting the pre-test helps prepare students for a sensitive conversation. Furthermore, it is likely that a student in your class/group has been impacted by these topics. Letting students know in advance gives individuals time to check-in with themselves.\* If your group is Middle School age and up, they will likely be asked to fill out a pre-test as well.

\*Giving social workers/guidance counselors a heads-up can be helpful for this reason as well!

**Why do you share your pronouns? Why do you use the term “partner” instead of boyfriend/girlfriend/husband/wife?**

Every student we instruct is different, and not all of them will pursue heterosexual relationships (or romantic relationships at all for that [matter!](#)) LGBTQ+ inclusive content (content that integrates info about sexuality and gender) is proven to help LGBTQ students feel their learning environment is safer ([Kosciw et al., 2020](#)). It is especially important to recognize LGBTQ students in discussions related to sexual violence as lesbian, gay, and bisexual individuals experience higher rates of sexual violence than their heterosexual peers ([CDC, 2016](#).) The same is true of transgender individuals compared to cisgender individuals ([Flores et al., 2021](#)).

**How can I ensure my students will retain the content you provide?**

Teachers and caregivers can support this learning by relating it to everyday student interactions ie: I see you're trying to give that student a hug, but that student's body language is not enthusiastic, or by pointing out misogynistic messaging/interactions in real-time. Another way to support ongoing dialogues may include hanging a NWCASA visual in your classroom with the hotline number and FRIES graphic (which we can provide!) or visuals that promote supporting survivors! Furthermore, encourage students to initiate youth-led programs designed to involve youth in sexual violence prevention! Recent research has demonstrated that peer-led prevention increased skills aimed at preventing sexual violence, amongst other life skills such as leadership and communication ([Waterman et al., 2021](#)).

**Why do you request a planning meeting prior to instruction?**

Each student body and school we work with is different and, therefore may have different instructional needs. Meeting beforehand gives us the opportunity to best serve classrooms/organizations by discussing their make-up,

whether that's previous instructional content or current dynamics that pertain to the issue so we can customize our dialogues just for you!

**When working with students, you use the word penis and vagina instead of slang or jargon for these terms, why is that?**

A large part of the reason these topics may feel uncomfortable is because they are stigmatized. There is nothing inherently wrong with the terms "penis" "vagina" or "anus," but we have been socialized to think there is. When we push aside these fears, we are better able to advocate for both our health and students'! Comprehensive sexuality education must be medically accurate ([ACOG, 2016-reaffirmed 2020](#)) and therefore must include medically accurate terminology (not kitty, not "thing", not tutu)! Of course, this is not exclusive to preventing violence; familiarizing students with these terms will also help students navigate important medical spheres and advocate for their own health of well-being. If students aren't taught proper names for body parts it can delay their ability to report abuse because the adults may not recognize the safety concern. For example, if the student states "my uncle plays with my pocketbook when we are alone", if the teacher doesn't understand the child is calling her private part a pocketbook, the abuse may continue and the child may get the message that telling teachers isn't helpful. Using anatomically correct language is child abuse prevention.