



Safeguarding Training Packet

New Song Church

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The Importance of Self Care

It is important to acknowledge that this training may weigh upon you, even if you are not personally a survivor of abuse. There is nothing intentionally graphic, but please consider for a few moments how you might care for yourself well during and after the training. Pay attention to what you need and take a break if needed (even if we are not on a break). No one will be put on the spot in terms of your personal story of abuse (and please use discretion when sharing to avoid identifying or graphic details for the sake of all). Effective strategies for self care are often personal, but some of these may help you stay calm if you feel anxious:

- Utilize the box breathing technique:
 - Inhale slowly through your nose for a count of four
 - Hold your breath for a count of four
 - Exhale slowly through your mouth for a count of four
 - Hold your exhalation for a count of four (then repeat the process)
- Hold a hot or cold beverage in your hands
- Take a sip of a beverage; swish it around in your mouth for a few seconds before swallowing
- Sit in a chair with your feet flat on the floor and your back flat against the back of the chair; take a minute and focus on feeling the weight of your feet on the floor and your back against the back of your chair
- Take a break from sitting; stand and stretch some while you listen
- Take a break, even if we are not on a break

If this training brings up things that you want to talk about with someone you trust in your support system, please consider reaching out to them - a friend, family member, or other person. You might also reach out to a professional mental health services provider. In the US, you might consider reaching out to the SAMHSA Helpline (1-800-662-HELP), which

provides 24-hour free and confidential treatment referral and information. If you have been impacted by abuse or other common forms of trauma, it is important when seeking out professional help to find someone who has focused their practice helping individuals with that type of experience.

Part 1: Facing the Reality of Abuse in the Church

The Prevalence of Abuse and Trauma

The ACE Study (ACEs are “Adverse Childhood Experiences”) is an adult retrospective study conducted by Kaiser Permanente and the CDC. The study discovered these prevalence rates for child abuse of different types in the United States:

- Sexual Abuse: 1 in 4 women, 1 in 6 men
- Physical Abuse: 1 in 4
- Neglect: 10%
- Emotional Abuse: 11%
- Emotional Neglect: 15%

You can learn more about the study here:

<https://www.cdc.gov/violenceprevention/aces/about.html>

Trauma is far more common than most people realize. In the United States, as many as 70 percent of people report some type of traumatic event in their lives.¹ Twenty-five percent of females and seventeen percent of males report being sexually assaulted by the age of 18.² Eighteen percent of children are physically abused.³ Over thirty-five percent of women and twenty-eight percent of men report being victims of intimate partner violence.⁴ The church is called to be a sanctuary from this violence, yet child sexual abuse perpetrators who seek victims in faith communities abuse for longer periods of time and accumulate more victims than those who prey in non-faith settings.⁵ Over ten percent of

¹ R.C. Kessler, S. Aguilar-Gaxiola, J. Alonso, C. Benjet, E.J. Bromet, G. Cardoso, L. Degenhardt, G. de Girolamo, R.V. Dinolova, F. Ferry, S. Florescu, O. Gureje, J.M. Haro, Y. Huang, E.G. Karam, N. Kawakami, S. Lee, J.P. Lepine, D. Levinson, and K.C. Koenen, “Trauma and PTSD in the WHO World Mental Health Surveys,” *European Journal of Psychotraumatology*, 2017 Oct 27.

² D. Finkelhor, G.T. Hotelling, I.A. Lewis, and C. Smith, “Sexual Abuse in a National Survey of Adult Men and Women: Prevalence, Characteristics, and Risk Factors,” *Child Abuse and Neglect*, 14.1 1990): 19-28.

³ A.J. Sedlak, “Fourth National Incidence Study of Child Abuse and Neglect” (NIS-4), Report to Congress. *PsycEXTRA Dataset*.

⁴ M.C. Black, K.C. Basile, M.J. Breiding, et al., “The National Intimate Partner and Sexual Violence Survey” (NISVCS), 2010 Summary Report (Atlanta: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention, 2011).

⁵ D.M. Eshuys and S.W. Smallbone, “Religious Affiliations Among Adult Sexual Offenders,” *Sexual Abuse: Journal of Research and Treatment*, 18.3 (2006): 279–288.

clergy report crossing sexual boundaries with congregants under their spiritual authority.⁶ Intimate partner violence occurs at the same rate inside the church as outside, but victims in the church stay in the abusive situations longer.⁷

Definitions of Abuse

Abuse: In general, abuse occurs when a person holding power and/or trust (e.g. pastor, elder, boss, mentor, supervisor, parent, adult, older child, etc.) uses that power and trust to exploit or violate someone who is more vulnerable (e.g. a child, someone who is sick, elderly, or disabled, student, supervisee, intern, immigrant, etc.). That exploitation or violation can take a variety of forms such as emotional, financial, physical, sexual, spiritual, etc.

Sexual Abuse: When a person in a place of power and/or trust, engages in sexual behavior with a child or an adult under their supervision, authority, mentoring, or spiritual care, including:

Sexual Penetration: Any act or attempted act of vaginal or anal penetration, however slight, by a person's penis, finger, other body part, or an object, and/or any oral-genital contact.

Sexual Contact: Any intentional touching of a person's breasts, buttocks, groin, genitals, or other intimate parts. Touching may be over or under clothing and may include the touching or making the person touch, or making the person touch their own body.

Non-Contact Sexual Acts:

- observing a person's nudity or sexual activity or allowing a person to observe sexual activity;
- recording, photographing, transmitting, showing, viewing, streaming, or distributing intimate or sexual images, audio recordings, or sexual information of persons; or
- exposing one's genitals or inducing a person to expose their own genitals
- within a power dynamic (boss-employee, doctor-patient, teacher-student, pastor-congregant, adult-child) communicating sexual desire or sexually stimulating content toward a person

Youth with Problematic Sexual Behavior is sexual behaviors among children that are developmentally inappropriate, illegal, or traumatic to other children, or who have otherwise acted out sexually or sexually abused against other children. (National Children's Alliance).

⁶ Marie M. Fortune and James N. Poling, *Sexual Abuse by Clergy: A Crisis for the Church* (Eugene, OR: Wipf & Stock, 2008).

⁷ M. Wang, S.G. Horne, H.M. Levitt, and L.M. Klesges, (2009). "Christian Women in IPV Relationships: An Exploratory Study of Religious Factors," *Journal of Psychology and Christianity*, 28.3 (2009): 224–235.

Adult Clergy Sexual Abuse is the exploitation of a power imbalance by a religious leader to engage in sexual behavior with an adult congregant, thereby violating professional boundaries and trust. This includes any sexual behavior in the context of a clergy-congregant relationship, where there is a lack of meaningful consent due to the inherent power difference.

Sexual Grooming is the deceptive process used to facilitate sexual contact while simultaneously avoiding detection. Sexual grooming may include victim selection, access to and isolation of the victim, developing trust with the victim and often their guardians, community, and youth-serving institutions, desensitizing the victim to sexual content and physical contact, and maintenance strategies on the victim to facilitate future sexual misconduct or to prevent disclosure. Georgia M Winter, Leah E. Kaylor, and Elizabeth L Jeglic. "Toward a Universal Definition of Child Sexual Grooming, and Deviant Behavior." *Deviant Behavior*, Volume 43, Issue 8, 2022.

Consent is a freely given yes, and must include the capacity to give such a yes. Consent "cannot be given by individuals who are underage, intoxicated or incapacitated by drugs or alcohol, or asleep or unconscious. If someone agrees to an activity under pressure of intimidation or threat, that is not considered consent because it was not given freely. Unequal power dynamics, such as engaging in sexual activity with an employee or student, also mean that consent cannot be freely given." (RAINN, <https://rainn.org/articles/what-is-consent>)

Sexual Assault: sexual contact or behavior that occurs without the consent of the victim. Sexual harassment generally violates civil laws—all have a right to work or learn without being harassed—but in many cases is not a criminal act (see more on harassment below). Sexual assault usually refers to acts that are criminal. Some forms of sexual assault include:

- Penetration of the victim's body, also known as rape.
- Attempted rape.
- Forcing a victim to perform sexual acts, such as oral sex or penetration of the perpetrator's body.
- Fondling or unwanted sexual touching.

Sexual Harassment: The legal definition of Sexual Harassment by the US Equal Employment Opportunity Commission (1980) is "Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

1. submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment
2. submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual;
3. such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile, or offensive working environment."

Beyond the legal definition, harassment, sexual or otherwise, can also occur in a community, conference, or event when the people involved are not employees of the church. Any unwanted sexualized behavior or sexualized behavior within a power differential is a serious form of harassment (including unwanted touch or communication, other unwanted sexual attention, or any behavior that objectifies or degrades.)

Financial Abuse: The illegal or improper use of a vulnerable person or his/her financial resources for another's profit or advantage. Some examples of financial abuse may include: the taking of money or property; forging a signature; getting a person to sign a deed, will or power of attorney through deception; coercion or undue influence; or, illegally or improperly adding names to bank accounts or safety deposit boxes. The elderly in particular are often targeted for financial abuse.

Physical Abuse: Non-accidental physical injury (ranging from bruises to severe fractures or death) by way of bodily contact (such as slapping, punching, pushing, beating, kicking, shaking or striking with an object) or non-injurious contact with the goal or effect of intimidating, threatening, or controlling.

Emotional Abuse: A pattern of behaviors, where a person uses power and trust to domineer and control others through acts such as shaming, dismissing, bullying, threatening, intimidating, humiliating, degrading, or insulting. A singular instance can be considered abuse (e.g. an insult as an instance of verbal abuse), but most often emotional abuse is defined and recognized in a pattern of controlling and domineering behaviors. Often the entire pattern is not visible to any one person, which can make recognition and accountability more difficult.

Spiritual Abuse: A form of emotional abuse using spirituality: a pattern of controlling and domineering behaviors using God, the Bible, religion, or spirituality. It is characterized by a pattern of coercive and controlling behavior in a religious context.⁸ Spiritual abuse can have a deeply damaging impact on those who experience it and can be experienced in a variety of different relationships. Many acts of sexual, physical, or other forms of abuse in a religious environment will have a component of spiritual abuse.

Spiritual abuse may include:

- Manipulation and exploitation
- Enforced accountability
- Requirements for secrecy and silence
- Coercion to conform, for example, seeking to enforce rather than encourage behavioral changes; failing to allow an individual autonomy to make their own choices
- Exercising control through using sacred texts or teaching to coerce behavior
- Requirement of obedience to the abuser

⁸ *Escaping the Maze of Spiritual Abuse: Creating Healthy Christian Cultures* by Lisa Oakley and Justin Humphreys, 2019.

- The suggestion that the abuser has a 'divine' position
- Isolation as a means of punishment
- Superiority and elitism⁹

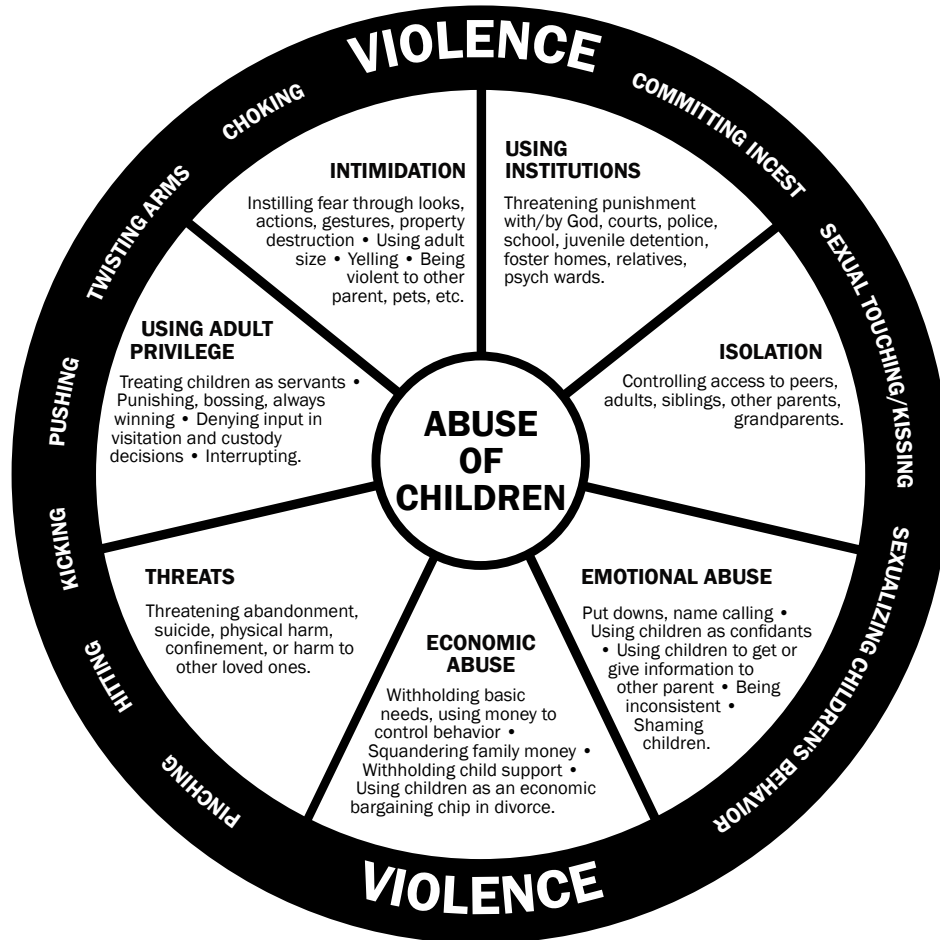
Stalking: A pattern of unwanted, fixated and obsessive behavior which is intrusive and causes fear of violence, alarm, or distress. Stalking is a terrifying reality and is now recognized as a crime in all fifty states.

Examples of stalking include (from The Justice Department's Stalking Victimization Survey):

- Making unwanted phone calls/texts or sending unwanted messages or emails
- Following or spying on the victim
- Showing up or waiting at places without a legitimate reason
- Leaving unwanted items, presents, or flowers
- Posting information or spreading false or confidential information about a person or victim on the internet, in a public place, or by word of mouth.

⁹ Oakley & Humphreys, 2019.

Abuse as a Pattern of Behaviors¹⁰



DOMESTIC ABUSE INTERVENTION PROGRAMS

202 East Superior Street
 Duluth, Minnesota 55802
 218-722-2781
 www.TheDuluthModel.org

¹⁰ These wheels come from The Duluth Model at <https://www.theduluthmodel.org/wheels/>.

Intimate Partner Violence: A pattern of behavior where a person in or who has been in an intimate relationship uses tactics of control, belittling, isolation, fear, stalking, and/or intimidation to dominate, harm, degrade, or otherwise undermine the worth and agency of the other person in the relationship. Intimate partner violence can be physical, verbal, emotional, sexual, social, or financial.

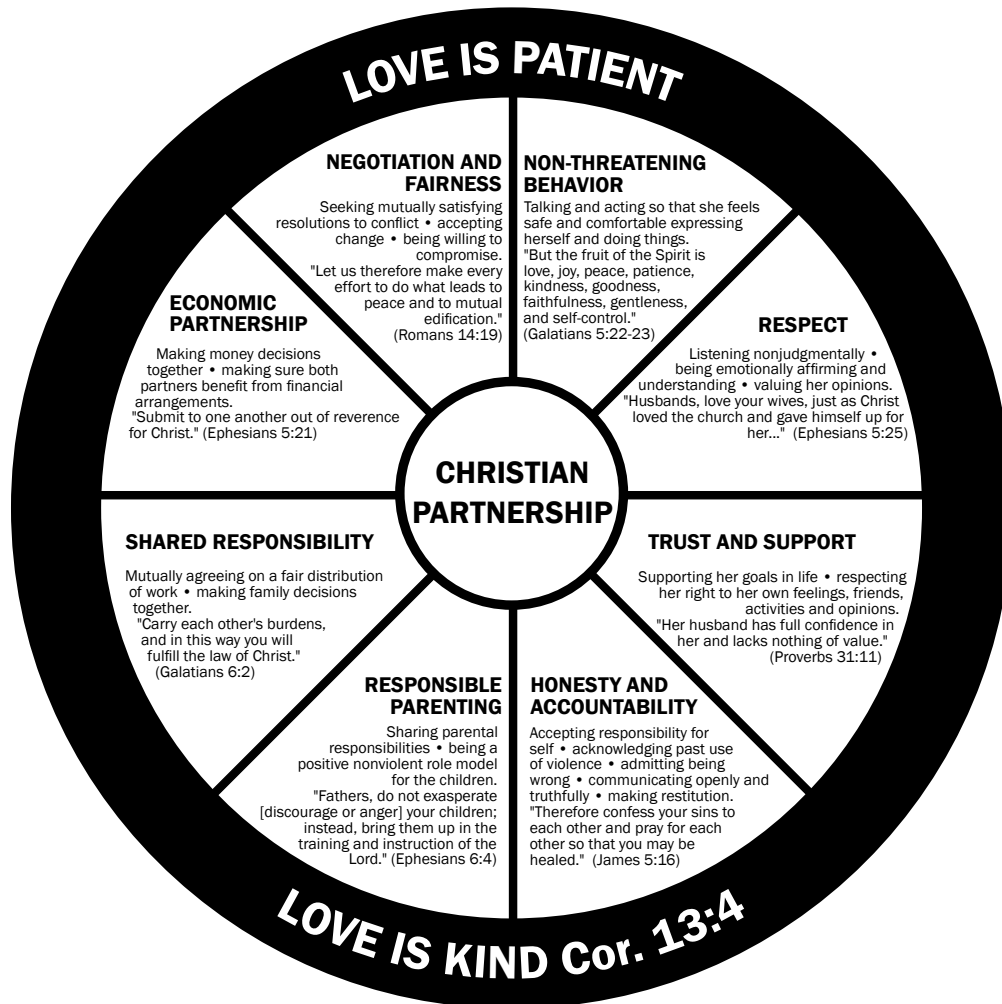


USING PHYSICAL AND SEXUAL VIOLENCE

Telling her "It's your responsibility as my wife to meet my needs" • demanding sex because "the wife doesn't rule over her own body, but the husband does"
• insisting that "the wife must obey her husband."

Naming Violence with Christian Men
CHANGING MEN, CHANGING LIVES
A Supplement to
Creating a Process of Change for Men Who Batter:
The Duluth Curriculum

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Scenario 1 - The Story of Tamar in 2 Samuel 13

*In the course of time, Amnon son of David fell in love with Tamar, the beautiful sister of Absalom son of David. **2** Amnon became so obsessed with his sister Tamar that he made himself ill. She was a virgin, and it seemed impossible for him to do anything to her. **3** Now Amnon had an adviser named Jonadab son of Shimeah, David's brother. Jonadab was a very shrewd man. **4** He asked Amnon, "Why do you, the king's son, look so haggard morning after morning? Won't you tell me?" Amnon said to him, "I'm in love with Tamar, my brother Absalom's sister." **5** "Go to bed and pretend to be ill," Jonadab said. "When your father comes to see you, say to him, 'I would like my sister Tamar to come and give me something to eat. Let her prepare the food in my sight so I may watch her and then eat it from her hand.'" **6** So Amnon lay down and pretended to be ill. When the king came to see him, Amnon said to him, "I would like my sister Tamar to come and make some special bread in my sight, so I may eat from her hand." **7** David sent word to Tamar at the palace: "Go to the house of your brother Amnon and prepare some food for him." **8** So Tamar went to the house of her brother Amnon, who was lying down. She took some dough, kneaded it, made the bread in his sight and baked it. **9** Then she took the pan and served him the bread, but he refused to eat. "Send everyone out of here," Amnon said. So everyone left him. **10** Then Amnon said to Tamar, "Bring the food here into my bedroom so I may eat from your hand." And Tamar took the bread she had prepared and brought it to her brother Amnon in his bedroom. **11** But when she took it to him to eat, he grabbed her and said, "Come to bed with me, my sister." **12** "No, my brother!" she said to him. "Don't force me! Such a thing should not be done in Israel! Don't do this wicked thing. **13** What about me? Where could I get rid of my disgrace? And what about you? You would be like one of the wicked fools in Israel. Please speak to the king; he will not keep me from being married to you." **14** But he refused to listen to her, and since he was stronger than she, he raped her. **15** Then Amnon hated her with intense hatred. In fact, he hated her more than he had loved her. Amnon said to her, "Get up and get out!" **16** "No!" she said to him. "Sending me away would be a greater wrong than what you have already done to me." But he refused to listen to her. **17** He called his personal servant and said, "Get this woman out of my sight and bolt the door after her." **18** So his servant put her out and bolted the door after her. She was wearing an ornate robe, for this was the kind of garment the virgin daughters of the king wore. **19** Tamar put ashes on her head and tore the ornate robe she was wearing. She put her hands on her head and went away, weeping aloud as she went. **20** Her brother Absalom said to her, "Has that Amnon, your brother, been with you? Be quiet for now, my sister; he is your brother. Don't take this thing to heart." And Tamar lived in her brother Absalom's house, a desolate woman. **21** When King David heard all this, he was furious. **22** And Absalom never said a word to Amnon, either good or bad; he hated Amnon because he had disgraced his sister Tamar.*

Where do you see these common dynamics of abuse in this account?

- Power and Vulnerability
- Trust and Community
- Entitlement and Dehumanization
- Deception and Manipulation
- Isolation and Powerlessness
- Fear, Shame, and Silence
- What would you add?

Part 2: Responding to the Impact of Abuse

Common Impacts of Abuse

Abuse may impact survivors in different ways. At the same time, the following abuse impacts are often experienced by many survivors. Emotional and spiritual abuse may impact survivors just as severely as physical and sexual forms of abuse. This is not intended to be an exhaustive list, but these are common impacts of abuse:

Common Impacts of Abuse	
Common Emotional Impacts	Common Physical Impacts
<ul style="list-style-type: none">• Anger• Confusion• Betrayal• Grief• Guilt• Shame• Humiliation• Fear• Powerlessness	<ul style="list-style-type: none">• Loss of Sleep• Loss of Appetite• Loss of Focus• Increased Stress Levels• Headaches• Fatigue• Injury
Common Mental Health Impacts	Common Spiritual Impacts
<ul style="list-style-type: none">• Anxiety (e.g. Panic Attacks)• Depression• PTSD• Substance abuse• Self-harm• Loss of Motivation	<ul style="list-style-type: none">• Loss of Safety in Church• Feeling Betrayal by God, the Church, and Spiritual Leaders• Feeling Distance from God• Spiritual places and practices can be triggering

In one study of 527 male child victims of sexual, physical, and emotional abuse, the researchers found significant “spiritual injuries” including feelings of guilt, doubt, despair, fear of death, and feeling God is unfair. In a review of 34 studies, encompassing 19,090 victims of child abuse, scholars note that most studies found abuse damaged the faith of children, including the child’s view of and relationship with God.¹¹

¹¹ *On This Rock: A Call to Center the Christian Response to Child Abuse of the Life and Words of Jesus* by Victor Vieth

The ACE Study

The ACE study centers on 10 questions (yes or no) posed to adults about their childhood. The doctors in the study saw the impact of higher ACES on health and mental health across a lifetime. “In the context of everyday medical practice, we came to recognize that the earliest years of infancy and childhood are not lost but, like a child’s footprints in wet cement are often lifelong.” (Felitti 2010) Higher ACES correlated with higher rates of heart disease, higher rates of cancer, higher rates of anxiety disorders and depression, going up as ACE scores went up. This is because of coping behaviors (i.e. smoking) that are “self-help” mechanisms but, even after correcting for “conventional risk factors” there was a strong relationship because of the impact “on the developing brain and body systems....” The doctors saw that the group with 6 ACES lived on average 20 years fewer than the group with 0 ACES. Now, this is not a destiny for anyone with a high ACE score, but any ACE is a risk factor. Also, we all know that correlation does not equal causation. Yet, now there are studies filling in some of the causal mechanism for how ACES inhibit the proper development of our brains, bodies, and immune systems (like the Harvard study below on the brain).

Robert F. Anda, David W. Brown, Vincent J. Felitti, Shanta R. Dube & Wayne H. Giles (2008). Adverse childhood experiences and prescription drug use in a cohort study of adult HMO patients BMC Public Health Research, 8:198.

National Scientific Council on the Developing Child. (2005/2014). Excessive Stress Disrupts the Architecture of the Developing Brain: Working Paper 3. Updated Edition. <http://www.developingchild.harvard.edu>

The Impact of Early Life Trauma on Health and Disease: The Hidden Epidemic, edited by Ruth A. Lanius, Eric Vermetten, Clare Pain; Cambridge University Press, 2010.

Protective Factors

“Strengthening Families™ is a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect. It is based on engaging families, programs and communities in building five key protective factors:

1. *Parental resilience: Managing stress and functioning well when faced with challenges, adversity and trauma*
2. *Social connections: Positive relationships that provide emotional, informational, instrumental and spiritual support*
3. *Knowledge of parenting and child development: Understanding child development and parenting strategies that support physical, cognitive, language, social and emotional development*
4. *Concrete support in times of need: Access to concrete support and services that address a family’s needs and help minimize stress caused by challenges*

5. *Social and emotional competence of children: Family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and establish and maintain relationships*

(For more information: <https://cssp.org/our-work/projects/protective-factors-framework/>)

What is Trauma?

“Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or life threatening, and that has lasting effects on the person’s functioning and mental, physical, social, emotional, or spiritual well-being.”

*“SAMHSA’s Concept of Trauma and Guidance for a Trauma-Informed Approach”
(SAMHSA’s Trauma and Justice Strategic Initiative July 2014)*

The Three “E’s” of Trauma

1. The Event(s)
2. The Person’s Experience of the Event
3. The Ongoing Effects of the Event

After the Event(s), you cannot change 1, but 2 and 3 change over time. How we are supported in our Experience can mitigate the ongoing Effects of the trauma.

Our brains do amazing things to protect us. A common impact of trauma is that the systems that are designed to protect us can become dysregulated. When this happens, the brains can get “stuck” in a fear/stress response. As humans, our nervous systems are constantly seeking safety and connection. A calm, non-judgmental interaction can actually help another person’s nervous system begin to regulate. We have tremendous power to support each other as individuals and a community.

The Four R’s of a Trauma-Informed Organization



This figure is adapted from: Substance Abuse and Mental Health Services Administration. (2014). SAMHSA’s concept of trauma and Guidance for a trauma-informed approach. HHS publication no. (SMA) 14-4884. Rockville, MD: Substance Abuse and Mental Health Services Administration.

Caring for Survivors

Survivors should have agency over sharing their story. When survivors choose to do so, they need our utmost support.

Important forms of support may include:

- Listening and staying calm
- Affirming without judgment
- Validating strong emotions (such as anger, betrayal, and confusion)
- Respecting their privacy
- Encouraging and empowering their agency
- Encouraging them to seek professional medical or mental health care as appropriate
- Asking if there is anything practical we can do

Any support must recognize limitations and should not offer therapeutic, legal, or other professional advice, but should focus on personal support and empowerment.

Those who offer support should be careful to avoid causing further harm, and should avoid:

- Place any portion of blame for the abuse on the victim
- Probe for intimate details of the abuse
- Express disbelief
- Attempt to silence the victim
- Encourage noncompliance with the law
- Express support for the perpetrator
- Urge meeting with, reconciliation with, or forgiveness of the perpetrator

Receiving an abuse disclosure is an honor, not a burden; it is a sign of trust. Survivors often choose to disclose their abuse years, even decades, after it occurred. Anyone receiving an adult's abuse disclosure may be guided by the following responses:

DO Say

Thank you for telling me.

I believe you.

I'm so sorry this happened to you.
How can I help?

Take as much time as you need.

I am here.

The following should only be said if the victim indicates these concerns are on his/her mind.

It is okay to be angry.

DON'T Say

Why are you telling me this?

Why didn't you _____ (run/scream/stop him etc.)

What do you mean when you say he abused you? What exactly did he do?

You need to forgive and move on.

It'll take some time, but you'll get over it.

It was so long ago, why are you still letting your abuser win by hanging on to it? Let it go.

Try to be strong.

It's understandable you're feeling that way.

Out of tragedies good things happen.

Your reaction is not an uncommon response.

You're lucky that _____ didn't happen.

You're not going crazy. These are normal responses following abuse.

I know how you feel.

It wasn't your fault.

Perhaps you misunderstood...

Supportive Organizations and People:

- Never blame survivors or minimize abuse
- Avoid giving platitudes or "quick fixes" to survivors
- Never press for details about the abuse (if the survivor volunteers them that is ok)
- Never urge the survivor to meet the abuser, "reconcile," or push forgiveness
- Never treat survivors as if they are the problem (e.g. coping behaviors, depression, sensitivity, lack of trust). Note that this does not mean you cannot set boundaries with a survivor.
- Seek to hold abusers accountable
- Believe victims and take practical steps to establish safety
- Distinguish sinning and being sinned against
- Create space for strong emotions and validate strong emotions (anger, grief, betrayal, etc.)
- Listen and support with patience
- Offer practical support as you are able to do so
- Respect the agency and privacy of survivors
- Respect the roles of others
- Respect their own limits and care for themselves

Supporting a Victim of Intimate Partner Violence

These are some practical words of advice if you are in the position to provide support to someone experiencing intimate partner violence. An excellent guide to help you and give you further information is the book *Helping Her Get Free* by Susan Brewster.¹² As with any survivor, communicating belief and support are essential. Pay attention to your words as well as your body language and validate their experience. Do your very best to avoid any form of victim-blaming or minimizing the abuse. Communicate clearly that there is no excuse for any form of abuse, ever.

Be Aware They May Be Monitored

Many abusers closely monitor their spouse when they are around others who could intervene. Pay attention to whether their spouse is there. Ask them if this is a good time to talk. Ask what time is a

¹² In this resource we will use gender neutral pronouns for a victim/survivor of IPV. The majority of victims of intimate partner violence are female, but there are many victims who are male.

good time to talk or text. You may want to come up with a code to signal it is ok to talk or text. Help them think about taking precautions like deleting texts.

Check In Regularly if Possible

Those who experiencing abuse in a relationship need someone who can serve as a contrast to the demeaning treatment in the abuse. It helps a survivor realize that there are others who care deeply and can help them. You may want to ask how often it would be helpful to check in. Give them choices and respect their agency.

Ask About Their Safety

The first concern for someone experiencing abuse is always safety. It is important that a survivor of abuse makes a safety plan.¹³ A local domestic violence shelter will often be able to help with this or you can call the National Domestic Violence Hotline (see under Resources below). Advocates like these can also help a survivor assess the risk of violence given their circumstances. We should not take on this role without training, however, it is a good idea to ask how safe they feel at home right now. You can say, “On a scale of 1 to 3 with 1 being things aren’t great but I feel safe, and 3 being I am afraid for my life, how safe would you say you feel right now?” If they answer 2 or 3 then it is urgent to try to connect them with local domestic violence resources to address safety.

Offer to Connect Them to IPV Resources

Some survivors may not be aware of resources that can help them. Some may be reluctant to access resources. You can help ease the discomfort of reaching out for help. It is important to know which county or counties a local domestic violence shelter serves and what types of services they offer. You can look online or call them. If possible, go and see it for yourself. It is important when you recommend a resource that that resource is able to serve that survivor. If possible, offer to call with the person or help them get there in person. Marriage counseling is not appropriate when abuse is suspected.¹⁴ Individual counseling or therapy is important, and it is highly recommended that for the survivor, therapy/counseling is with a licensed professional who has extensive experience or specializes in helping survivors of abuse.

Respect Their Agency in Making Decisions Even If You Disagree

Abusers take away the agency to make choices from a survivor. It is critical that we empower and respect the agency of a survivor. If we start to direct the life of a survivor, even though our intentions are not abusive, this is not healthy. Ignoring the problem of abuse is one extreme, but the opposite error is to think that we can be someone’s rescuer if we just take on the role of directing their life. Experts understand that survivors who leave abuse will almost always return unless it is their decision to leave and seek safety. Respecting their agency also means protecting their privacy regarding their story. It is important to ask permission before speaking with others about their situation.

¹³ From the National Domestic Violence Hotline (<https://www.thehotline.org/what-is-a-safety-plan/>): “**A safety plan is a personalized, practical plan to improve your safety while experiencing abuse, preparing to leave an abusive situation, or after you leave.** This plan includes vital information tailored to your unique situation and will help you prepare for and respond to different scenarios, including telling your friends and family about your situation, coping with emotions, and various resources suited to your individual circumstances.” You may call this hotline 24/7 to have a highly-trained advocate help you create a personalized safety plan - 1-800-799-SAFE (7233). You can also text START to 88788.

¹⁴ Among many other reasons, marriage counseling typically carries the assumption that any issues are mutual, but that is not the case with abuse. It also typically assumes that both individuals are coming in good faith, and this helps abusers continue to manipulate and blame others. Many survivors will not feel safe to be honest in marriage counseling, knowing they may pay a price later through retaliation.

Confront Denial and Minimizing Firmly but Gently

Some survivors have spent so many years immersed in the abuse that they have adopted the perspective of the abuser over time. It is important that you are prepared for some survivors blame themselves, minimize the abuse, or offer excuses for their husband. It is good to counter this reality, but also to show you understand that it is impossible to live and breathe this twisted reality for years without having it warp your perspective.

*Educate Yourself on Intimate Partner Violence and Share What You Learn*¹⁵

It is often essential for a survivor to learn more about the reality of intimate partner violence as an empowering step toward getting free from abuse. Educate yourself and share what you are learning as appropriate. It may well make the difference. Share that abuse is calculated behavior by an abuser. Share about the Wheel of Power and Control (see below). Share that abusers rarely stop without significant intervention and accountability. Share about the cycle of abuse. Share about the impacts of abuse. Share that Jesus came to set people free from abuse.

Ask How You Can Help

Listen carefully to what they are dealing with and what they need. Try to do what you can. Offer to show up with her to an appointment or in court or in other ways. Remember your limits and try to engage other resources as needed with their permission.

Count the Cost of Helping

It is also important not to underestimate the danger an abuser may pose when we help a survivor. Advocates are trained to assess risk and it is not usually advisable to try to take on that role ourselves. However, it is good for us to know a few basics. The highest risk to a survivor for homicide, statistically speaking, is when they are trying to leave their abuser. For this reason, it is not advisable to have the survivor stay at your house if there is any risk of physical violence. A shelter or hotel is usually a better option. Trained advocates are the best options for assessing risk, but it is ok to ask if their partner has ever threatened to kill them, if their partner has access to a weapon, if their partner has ever choked them, or if their partner has ever been physically violent. All of these would indicate significant risk.

Practice Self Care

Care for yourself so you can offer help in a sustained way. Get the support you need. When we help someone in abuse, there is an impact in our life from that trauma. Experts call this secondary traumatic stress or vicarious trauma. Self care is essential when we are helping in a situation that leads to high levels of secondary traumatic stress.

Further Resources

Here are some previously mentioned and further resources:

- *Why Does He Do That?* by Lundy Bancroft (Berkley Books, 2002)
- *Helping Her Get Free* by Susan Brewster (Seal Press, 2006)
- *Taking It Seriously: A Faith Leader's Guide to Domestic Violence* by Geneece Goertzen (Cascade Books, 2024)
- *Is It My Fault? Hope and Healing for those Suffering Domestic Violence* by Justin Holcomb & Lindsey Holcomb, with Elyse M. Fitzpatrick (Moody Publishers, 2014)

¹⁵ An excellent book to educate yourself on intimate partner violence is *Why Does He Do That?* By Lundy Bancroft.

- The Duluth Model Wheel of Power and Control: <https://www.theduluthmodel.org/wp-content/uploads/2017/03/PowerandControl.pdf>
- *Keeping the Faith: Guidance for Christian Women Facing Abuse* by Marie M. Fortune (Harper One, 1987)
- *No Place for Abuse: Biblical and Practical Resources to Counteract Domestic Violence* by Catherine Clark Kroeger and Nancy Nason-Clark (InterVarsity Press, 2010)
- *Refuge from Abuse: Healing and Hope for Abused Christian Women* by Nancy Nason-Clark and Catherine Clark Kroeger (InterVarsity Press, 2004)
- *The Verbally Abusive Relationship: How to Recognize It and How to Respond* by Patricia Evans (Adams Media, 2010)
- *Religion and Intimate Partner Violence: Understanding Challenges and Proposing Solutions* by Nancy Nason-Clark, Barbara Fisher-Townsend, Catherine Holtmann, and Stephen McMullin (Oxford, 2018)
- *The Cry of Tamar: Violence against Women and the Church's Response* by Pamela Cooper-White (Fortress Press, 2012)

Part 3: Understanding Offenders and Their Tactics

“Most offenders will deliberately establish themselves as the kind of person who wouldn't do that kind of thing.”

— Dr. Anna Salter

“They come to you in sheep's clothing, but inwardly they are ferocious wolves.”

— Matthew 7:15

“The grooming process is typically aimed at the intended child victims and those who are responsible for their wellbeing as well as the community that they operate in. Grooming is a constellation of otherwise innocent appearing behavior that is intended to give them ongoing access to children for sexual purposes, as well as, preventing discovery by others.”

— Jim Clemente, FBI

Scenario 2 - “Christina” and “Will”

1. How did Will appear to others in the church community?
2. What tactics did Will use to seek access to Josh?
3. What skills served Christina well in protecting Josh?

Part 4: Your Role in Prevention and Response

Church leaders must work to implement holistic policies based on Christian priorities and evidence-based best practices, rather than policies based on risk management for the institution.

Some Common Gaps in Risk Management Abuse Policies:

1. Only address sexual abuse, not physical abuse, emotional abuse, etc.
2. Only address conduct by staff and volunteers in structured times of ministry
3. Do not address conduct in the church by those who are not staff and volunteers (including minors)
4. Do not address training for all in the church (including parents and safety talks for minors)
5. Do not address abuse against adults
6. Do not state that all adults to report child and vulnerable adult abuse

Essential Policy Sections:

1. Introduction that connects your faith to prevention and response and defines broad applicability
2. Key Definitions of Abuse
3. Administrative Policy - Team Approach, Screening Practices, Training Plan
4. Key Boundaries for the Whole Community
5. Responding to Boundary Violations by Reinforcing Healthy Boundaries
6. Reporting Protocols
7. Trauma-Informed Care in Response
8. Known Offender Policy

Leaders should ask: *What does our policy say about our faith and our values?*

Leaders must work to further a culture of protection for the vulnerable. Effective leaders help the church community see that protecting the vulnerable is a priority to God, lead in raising the level of education in the community, clarify healthy conduct, and establish mechanism for real accountability.

Reporting Child Abuse

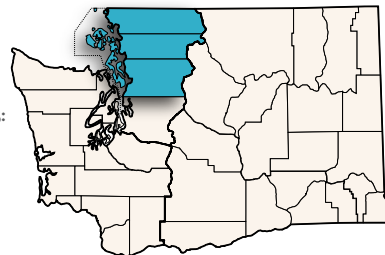
In Washington, some adults are required by law to report child abuse and neglect. All adults may report and GRACE encourages all adults to view themselves as having an ethical obligation to speak up for children and vulnerable adults who cannot speak for themselves. Any evidence, disclosure, or reasonable suspicion of child abuse or vulnerable adult abuse should be reported to Child Protective Services and Local Law Enforcement. There is a regional intake for Child Protective Services:

Reach the DCYF Intake Line in Your Community

866-829-2153

REGION 3 – NORTH WESTERN WASHINGTON COUNTIES:

WHATCOM SAN JUAN
SKAGIT ISLAND
SNOHOMISH



For more information about supporting families as well as identifying and reporting child abuse and neglect, visit www.dcyf.wa.gov



DCYF does not discriminate and provides equal access to its programs and services for all persons without regard to race, color, gender, religion, creed, marital status, national origin, citizenship or immigration status, age, sexual orientation or gender identity, veteran or military status, status as a breastfeeding mother, and the presence of any physical, sensory, or mental disability or use of a dog guide or service animal. If you would like free copies of this publication in an alternative format or language, please contact DCYF Constituent Relations at 1-800-723-4833 or email communications@dcyf.wa.gov. DCYF PUBLICATION CWP_0036C (11-2024)



For suspected abuse against a vulnerable adult, you may report online to Washington State Adult Protective Services or call the statewide intake at 1-877-734-6277.

Churches should put the relevant reporting information for their area in their policy. GRACE recommends that church policies require all adults report as an ethical obligation, above any legal mandate.

A reasonable suspicion of child physical abuse may be:

- A suspicious bruise/wound without an explanation (especially when frequent)
- Pattern bruise/wound (hand slap or hit with an object)
- Defensive wounds
- Fear of going home

A reasonable suspicion of child sexual abuse may come from early sexual behaviors or other physical indicators of sexual abuse:

- A 5 year old demonstrates knowledge of oral sex or is acting out sexually with another child beyond what is developmentally typical.
- Torn, stained, or bloody underclothing
- Injuries (e.g. bruises, tearing, bleeding), itching, or swelling in the genital, vaginal, or anal area
- Difficulty, pain, or blood in the genital area when walking, sitting, or using the bathroom
- Discharge from the penis or vagina
- Promiscuity and early sexual activity
- Urinary tract infections, yeast infections, STDs
- Pregnancy

A reasonable suspicion of neglect may be:

- Consistently dirty or has severe body odor (sour, greasy type of odor)
- Begs, steals, or hoards food or complains frequently of hunger
- Untreated illness, injuries, health issues (e.g. unfilled cavities) or serious educational needs are unaddressed
- Is often left inappropriately unsupervised

Notice behavioral signs that might apply to multiple forms of abuse (but these may also be rooted in grief or other causes than abuse)

- Sudden changes in behavior
- Sudden drop in grades
- Fear toward a person or type of person or situation
- Nightmares or trouble sleeping
- Anxiety and hyperactivity
- Depression
- Eating disorders or self-harm
- Acting out sexually
- Unexplained stomach pain

If you have questions about a situation, you may choose to call the hotline or a Child Advocacy Center to get their opinion.

Key Resources

- GRACE website: www.netgrace.org
- *The Child Safeguarding Policy Guide for Churches and Ministries* by Basyle Tchividjian and Shira M. Berkovits (New Growth Press, 2017)
- *Redeeming Power: Understanding Authority and Abuse in the Church* by Diane Langberg
- “Toward a More Trauma-Informed Church: Equipping Faith Communities to Prevent and Respond to Abuse” by Pete Singer
- *On This Rock: A Call to Center the Christian Response to Child Abuse of the Life and Words of Jesus* by Victor Vieth
- *The Cry of Tamar: Violence against Women and the Church’s Response* by Pamela Cooper-White (Fortress Press, 2012)

- *Taking It Seriously: A Faith Leader's Guide to Domestic Violence* by Geneece Goertzen (Cascade Books, 2024)
- *Escaping the Maze of Spiritual Abuse: Creating Healthy Christian Cultures* by Lisa Oakley and Justin Humphreys (SPCK, 2019)
- "When Wolves Wear Shepherds' Clothing: Helping Women Survive Clergy Sexual Abuse" by Diana R. Garland *Social Work & Christianity*, Vol. 33, No. 1 (2006), 1-35
- *Something's Not Right: Decoding the Hidden Tactics of Abuse and Freeing Yourself from its Power* by Wade Mullen (Tyndale Momentum, 2020)
- *Suffering and the Heart of God* by Dr. Diane Langberg (New Growth Press, 2015)
- *Keeping the Faith: Guidance for Christian Women Facing Abuse* by Marie Fortune (HarperOne, 1995)
- *God Made All of Me* by Justin S. Holcomb and Lindsey A. Holcomb (New Growth Press, 2015)
- *My Body! What I Say Goes!* by Jayneen Sanders (Educate2Empower Publishing, 2016)
- *Let's Talk About Body Boundaries, Consent, & Respect* by Jayneen Sanders (Educate2Empower Publishing, 2018)
- *When Your Child Discloses Sexual Abuse* by Chris Schopen (2017)