

OREGON SATF

Mandatory Reporting and Confidential Advocacy PARTNERSHIP GUIDE

VERSION 1, UPDATED 2023

www.OREGONSATF.ORG

ABOUT

ACKNOWLEDGEMENTS

This guide pulls together resources from partners and stakeholders across Oregon implementing best practices to support young people, kids, and children, and help prevent violence and abuse. It would not have been made possible without the partnership, expertise, feedback, existing resources, and input from people and organizations across the state. Some key stakeholders and partners who informed this resource include:

- CARES NW
- Clackamas Women's Services
- Oregon Coalition Against Domestic and Sexual Violence
- Oregon Crime Victims Law Center
- Oregon Department of Education
- Oregon Department of Human Services
- Oregon Health Authority

- Oregon Law Center
- Peace at Home Advocacy Center
- Prevent Child Abuse Oregon
- · Protect Our Children
- Raphael House of Portland
- Sexual Assault Support Services
- · Victims Rights Law Center
- Volunteers of America Home Free
- Women's Crisis Support Team

LEGAL DISCLAIMER

This information in this guide is not offered as, not intended as, and does not constitute legal advice. It is provided for informational purposes only. Much of the information was pulled directly from experts across Oregon and compiled into this guide. None of the information provided here should be considered a substitute for professional legal advice.

Additionally, state and federal laws are updated regularly and changes to law (statutes, case law, regulations, etc.) may impact the information shared within.

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MANDATORY REPORTING + PRIVILEGED CONFIDENTIAL YOUTH ADVOCACY PARTNERSHIP GUIDE - VERSION 1: UPDATED 2023

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Too often youth lose their voice when it comes to serious matters in their lives. We have an opportunity and an imperative to help provide them with the options they deserve. We believe that youth are eager, capable, and competent to make healthy informed decisions regarding their own lives. Prevention education can help, and in turn will create safe, equitable, educational environments for all.

Through utilization of, and collaboration with, local domestic violence and sexual assault response AND prevention programs, we can better ensure young people in Oregon have access to the most robust and meaningful supports. This will help ensure we are mitigating trauma, preventing future violence and adverse childhood experiences, and promoting healthy skills for youth to apply throughout their lives.

It is important to note that doing any sort of anti-violence work, including even simple awareness-raising activities (like hanging posters or holding assemblies) is likely to impact the rate of youth disclosures. Particularly, it is likely that we will see these disclosures rise as young people have opportunities to both recognize their experiences with violence and abuse and identify meaningful diverse community resources that can support them. Through prevention programming, youth will be connected with or seek out needed resources/services. They will additionally gain knowledge and skills to develop healthy relationships in all aspects of their lives.

WHAT IS THIS RESOURCE PACKET?

This resource packet compiles best practice approaches, guidelines, laws, and history around collaboratively supporting youth in Oregon who have experienced violence or abuse. It has been compiled to support youth serving institutions (like schools) to partner with confidential resources to improve outcomes for young people.

WHO IS IT FOR?

This resource is for anyone who is in a position, either through their organization/institution or through their professional role, to interact with young people who have experienced violence and abuse. It is especially relevant for people who are mandatory reporters of child abuse. They can use this resource packet to better provide a wrap-around approach ensuring youth are connected to as many supports as meaningful and necessary to them.

HOW CAN YOU USE IT?

This resource provides brief overviews of laws and policies impacting youth rights, as well as models and samples of collaboration that varying stakeholders can utilize as you develop, refine, or bolster your existing partnerships and support mechanisms. Additionally throughout this resource we have pulled from other tools that may provide more in-depth information and/or synthesized documents on specific topics. We encourage you to explore those in more depth as needed.

NOTES ON LANGAUGE

Confidential Advocacy:

Many people utilize the word 'confidential' to describe their services, communications, etc. This guide largely utilizes the term to describe people from qualified victim/survivor services organizations who provide completely confidential advocacy services (under VAWA) and are certified in victim-advocate privilege under Oregon state law (40.264 Rule 507-1). These advocates are also explicitly exempted in Oregon's mandatory reporting law (ORS 419B.005). We expand on each of these in the guide, but wanted to clarify in the beginning, what 'Confidential Advocacy' this guide is referring to.

Survivor vs. Victim:

Throughout this guide we interchangeably use the words victim and survivor to describe someone who has experienced violence and abuse. These are used interchangeably depending upon the context. As most legal frameworks utilize the language of 'victim,' this is the predominant term utilized when referencing laws and policies.

GLOSSARY OF ACRONYMS

- CVRA Crime Victims Rights Act, a Federal law established in 2004.
- **DVSA** Domestic Violence and Sexual Assault, often also be represented as Domestic and Sexual Violence (DSV) and Anti-Domestic and Sexual Violence (ADSV).
- FERPA Family Educational Rights and Privacy Act, a Federal law established in 1974.
- **HIPPA** Health Insurance Portability and Accountability Act, a Federal law established in 1996.
- OAR Oregon Administrative Rules are created by state agencies, boards, and commissions to implement Oregon's statutes (written laws passed by a legislative body).
- **ORS** Oregon Revised Statutes are the laws, and changes to laws, enacted by the Legislative Assembly that have been organized (codified) into the state's legal code.
- TIX Title IX of the Education Amendments of 1972, a Federal law.
- VAWA Violence Against Women Act, a Federal law established in 1994
- VOCA Victim of Crimes Act, a Federal law established in 1984.
- VRRA Victims' Rights and Restitution Act, a Federal law established in 1990.

SECTION 1

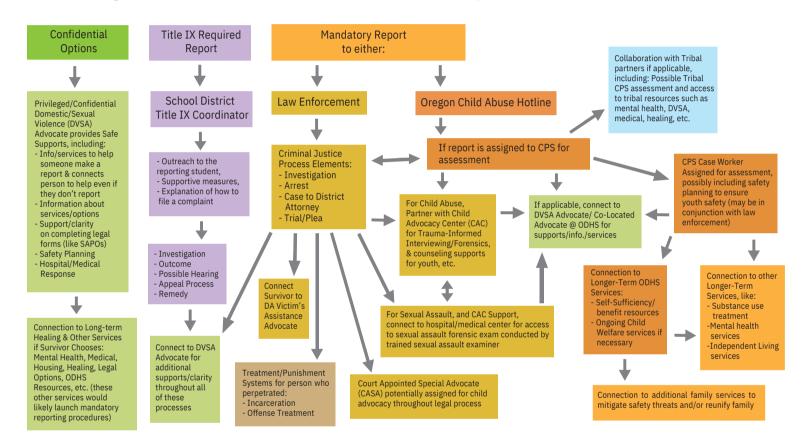
Minor's Rights and Laws Affecting Supports for Minors

Subsections:

- An Overview of Minor Rights
- General Laws Affecting Minor Supports
 (Ex. Mandatory Reporting of Child Abuse, Confidential Advocacy)
- Education-Specific Laws (Ex. Title IX)

Navigating the Systems to Respond to Disclosures of Abuse, Neglect, Assault, and Violence to a Person Under 18

When a disclosure of violence or abuse towards someone under the age of 18 occurs, there are several systems and processes that may begin as a result (Mandatory Reporting processes, Title IX Processes in Education Settings, and support from Confidential Resources). Each of these systems are focused on trying to ensure that people experiencing violence and abuse have access to services that support health and safety. In order to best support survivors, it is critical that we have a basic understanding of each of the processes and partners that a survivor may need to navigate. Below is a general example of many of the players and processes that may be involved in responding to disclosures. There are differences within every community. After looking at this chart, we encourage you to consider what these processes look like in your community, what's missing, and what resources could be added for more comprehensive services for each survivor?



Throughout Oregon, there are several different systems in operation to intervene when child abuse or domestic/sexual violence occurs. These systems are each made up of multiple different players, have a lot of nuance, are complex, and are rarely linear. Ideally these systems would work together collaboratively in order to best provide services that are trauma-informed, human-centered, and effective. This chart tries to map out many (not all) of the potential systems a child and their family might have to navigate when a disclosure occurs. Additionally, there are factors not represented on this chart, including additional players and systems when youth are in custody, foster care, or homeless/houseless, etc. As you explore this chart, we ask that you consider the elements on the following page.

^{*}All K-12 school employees are responsible employees under Title IX, and mandatory reporters of abuse under state law. Some reports of sexual assault or abuse, especially if the person who perpetrated is a school employee or student, will trigger both Title IX and Mandatory Reporting responsibilities. Additionally, if sexual violence is reported between a student and a staff/admin/parent volunteer/other contractor, additional reporting responsibilities exist, including to either the Teacher Standards and Practices Commission (TSPC) or to the Oregon Department of Education (ODE) depending on who is involved.

The chart on the previous page can feel overwhelming for those of us doing this work, which means it is definitely overwhelming for those navigating it when they've experienced violence, abuse, assault or neglect.

All of the players on this chart have a particular role, and it can be challenging to remember that each individual person and family we work with are likely interacting with many, if not all, of the other players listed here and some that aren't. When we work more effectively together and have more information about how all of these systems can be beneficial, we get closer to our goals of supporting young people and interrupting abuse and violence. Additionally, it is the role of Certified Domestic and Sexual Violence Advocates to talk about all of the systems, players, and processes that an individual and/or family may encounter. Having access to this type of advocate can be very helpful for individuals to understand what is going on, have access to someone with answers about all of the different players and processes, and to have a touchpoint throughout the entire process and beyond.

Young people, and their families, have varying rights within different systems.

Young people and their families have rights to confidentiality, information, and choice which vary with each system, and each partner. Some of the laws that establish these rights include HIPAA, FERPA, VAWA, VRRA, CVRA, and Oregon Law. It can be confusing to know which laws apply in certain scenarios, which rights each law affords the individual young person, and which rights are afforded to the parents, which aren't always the same.

Not shown on this chart are ways in which oppression, including racism, ageism, classism, sexism, xenophobia, etc., may impact the trauma an individual and/or family experiences, and the ways the systems, partners, and processes actually help or reinforce harm.

We know that implicit and explicit biases are a part of all of our systems, and inform how and if an individual may want to interact with a certain partner. When we are working towards interrupting abuse and violence, and supporting young people who have experienced it, we have to be conscientious of the ways the systems may cause harm. This may include family separation decisions, if providers believe a child, whether there are language barriers, whether there is mistrust, and whether a lack of knowledge and/or of cultural responsiveness on the provider's part is likely to cause more harm. When you add in layers of historical, intergenerational, and ongoing trauma caused by interactions with systems, this chart becomes ever more overwhelming and the systems can become more traumatizing to the individuals and families we engage with. When mainstream systems/organizations partner with culturally specific and Tribal service providers when appropriate, youth survivors will more effectively be served and re-traumatization we may cause will be lessened. Too often these partners are left out of these processes; referrals aren't made; and people aren't connected to culturally relevant resources which would reinforce protective factors and support healing. When this occurs, we are moving further from our goals of supporting young people, rather than moving closer.

Laws change, and new laws are added, regularly.

Every year, new laws, or fixes to existing laws, may go into effect. Interpretations of and guidance around laws may change as well, depending on leadership, federal/state/Tribal/local compliance, other laws, and many other factors. It often takes time to ensure all applicable players have modified processes to meet requirements tied to these changes. This means that this flow chart can continue to change, which is challenging for the partners doing this work and the people trying to navigate it.

Different partners often use the same, or similar, language – but may mean different things, which can add to the confusion and overwhelm an individual and/or how a family feels.

Although the players in this flow chart may have shared goals, they also serve separate purposes in order to move towards those shared goals. Consider the following: A school employee is required to make a mandatory report to child welfare or law enforcement, who will then do an initial and maybe a more in-depth investigation into the disclosure. That same school employee is also required to report to the school district's Title IX Coordinator who is then required to conduct an internal investigation, separate from the criminal investigation being conducted by law enforcement or the assessment being conducted by child welfare. In the criminal investigation there is a perpetrator, victim, investigation and trial - resulting in a guilty/not guilty verdict and maybe a conviction. In the Title IX process, there is a respondent and a claimant, and an investigation - resulting in a responsible/not responsible finding. In the child welfare assessment there is an alleged victim, alleged perpetrator, allegations, an assessment, and a disposition (ex. founded or not founded for abuse/neglect). If a young person is working with all these systems they may be referred to as victim, complainant, survivor, kiddo, etc. all by different partners in the same day. If an individual is navigating one of these systems, they are likely also navigating other systems, as well as interacting with many, if not ALL, of the other partners on this chart. This speaks to the need for all of these partners to more intentionally collaborate and understand each other's work to better support folks who are navigating these complex systems on top of trauma and oppression, and to utilize resources like Certified Domestic/ Sexual Violence Advocates who help people navigate all of the systems, and their rights within each.

^{**}Access the original 2-page document of this flow-chart and additional considerations at www.oregonsatf.org.

A Brief History of Mandatory Reporting and Confidential Advocacy in Oregon

1963

"The Battered Child Syndrome" was published in 1962 changing people's understanding of how common child abuse was. This was followed by many states, including Oregon, passing the first mandatory reporting laws in the country. Oregon's **first Mandatory Reporting of Child Abuse Law** was passed in 1963 and only applied to health care professionals and police officers. This first draft only required those officials to report the physical abuse of children age 12 or younger. Over the years, amendments and changes to Oregon's law, added additional people to the list of mandatory reporters and expanded the age-range to 18, and 21 years old for people receiving services at a child caring agency.

1974

Mandatory reporting among professionals within the United States began following the passage of the Child Abuse Prevention Treatment Act (CAPTA) in 1974. The original goal was to reduce child abuse and neglect - following revisions, this act extended from children to vulnerable populations (such as the elderly population, and individual's with developmental disabilities.) As a result of this legislation, almost all professionals working with people were considered a mandated reporter. This legislation was passed in good faith that it would prevent and minimize the occurrence and severity of abuse against vulnerable populations. Unfortunately, data shows detrimental repercussions have arisen from these requirements - resulting in decreased disclosures and reports, defeating the purpose of the original goal in 1974.

1994

The Violence Against Women Act (VAWA) was passed by Congress in 1994 as the first comprehensive federal legislative package designed to end violence against women. With subsequent reauthorizations, VAWA was expanded to address not only domestic violence, but sexual assault and stalking as well, with intentional focus on the needs of underserved populations. Along with requirements in the amended 1984 Family Violence Prevention and Services Act (FVPSA), VAWA mandates that any shelter, rape crisis center, domestic violence program, or other victim service program that receives either VAWA or FVPSA funding is prohibited from sharing any information about a victim receiving services, including any locational information, and whether an individual is even receiving, or has ever received, services. Similar confidentiality provisions are found in the Victims of Crime Act (VOCA). Programs that violate the confidentiality requirements risk losing federal or state funding.

2013

Oregon passes **House Bill 4016** which greatly expanded who was a mandatory reporter under Oregon's law, including staff of higher education institutions and employees of public or private organizations providing child-related services. This additionally established an exception for community-based, nonprofit organizations whose primary purpose is to provide confidential, direct services to victims of domestic violence, sexual assault, stalking or human trafficking; recognizing access to confidential advocates as critical to ensuring safety for survivors.

2015

In 2015, Oregon passed (40.264 Rule 507-1) establishing certified advocate-victim privilege and ORS 147.600 establishing confidentiality of certain victim communications and records. Anyone employed by/volunteering with a qualified victim services program, who has completed the required training (Oregon's 40 hour training requirement for domestic and sexual violence advocates), may have privileged and confidential communications with victims/survivors, unless they have statutory mandate otherwise (example: DVSA advocate that is also a foster parent is a mandatory reporter). The concept of confidential advocacy is based upon the idea that there are certain relationships and communications that should be protected for a person to receive the help they are seeking without fear that the information shared will be used against them.

Considerations Around Minor's Rights

There are many legal elements that affect the rights of minors related to violence and abuse they may experience. We have highlighted several of those here, including: Age of Consent Laws, Privacy Laws, Privileged Communication, Protective Order Access, and Reporting Options and Responsibilities in Oregon Law. This is not a comprehensive list and laws can change frequently.

AGE OF CONSENT FOR ACCESSING SERVICES

Although adults may support minors in making health care decisions, there can be times when a minor does not need or want adult involvement, or may not have a trusted adult to help them. Below is a brief (not exhaustive) list of common services, and their requirements for minors to consent in Oregon.

Medical and Dental Services (ORS 109.640)

Minors who are 15 years and older can consent to medical and dental services administered by a licensed provider without parental/guardian consent. This includes medical, dental, optometric (eye care) and surgical diagnosis and treatment.

DVSA Advocacy Services (VAWA)

Oregon law does not include age restrictions for accessing these services which means it is possible that a person under 18 seeking domestic violence/sexual assault advocacy services from a qualified victims services program can access these services.

Mental health & drug/alcohol treatment (ORS 109.675)

A minor who is 14 years or older may access outpatient mental health, drug, or alcohol diagnosis or treatment (except for methadone) without parental/guardian consent, if those services are administered by a licensed provider listed in ORS 109.675.

Sexual/Reproductive Health (ORS 109.610, ORS 109.640)

Minors of any age can access birth control information and services as well as testing and treatment for sexually transmitted infections (STIs) including HIV without parental/guardian consent.

PRIVACY RIGHTS

When considering how confidentiality intersects with minors' consent to services, it is also important to consider privacy laws and where young people and their families have control over their information. These laws also intersect with mandatory reporting in different ways. Some key privacy laws include:

Health Insurance Portability and Accountability Act (HIPAA)

This provides national standards to protect a patient's identifiable information in health records/ allows a patient greater access to their own records. HIPAA governs privacy policies in "covered entities" which generally includes physical and mental health care settings, hospitals, dentists, pharmacies and clinics, including Oregon's certified school-based health centers (SBHCs).

Violence Against Women Act (VAWA)

VAWA only allows a funded victim service provider to disclose the personally identifying information of people who seek, receive, or are denied services with a specific, signed, time-limited, release of information, or in response to a statutory or court mandate. Without a release, the victim service provider may only report child abuse or neglect if a statute or case law requires the report.

Family Education Rights and Privacy Act (FERPA)

FERPA protects the educational record of a student, including K-12 and higher ed. This can include school health records from health care providers employed/contracted by the school (ex. school nurses or licensed counselors). The record can be requested by parent(s), guardian(s), and some school officials. FERPA permits the parent/guardian to access the educational record without student consent until a student is 18 or older.

PRIVILEGED AND CONFIDENTIAL COMMUNICATION

Young people can expect different confidentiality protections from different professionals. Some professionals may be able to protect almost all communications with them. Others will have to report any child abuse to DHS or law enforcement, for example. Everyone providing services to children and youth needs to be confident about the requirements of confidentiality and privilege and when those requirements are not in effect.

CONFIDENTIALITY is a legal responsibility not to disclose private communications and records without a client's consent unless a law requires or, to defend themselves in a law suit brough by the client, allows the disclosure. Confidential professionals may not disclose confidential information to parents or guardians (with some exceptions), teachers, doctors, police (apart from mandated reporting of child abuse when applicable), and others. Confidentiality applies outside of legal proceedings. (Privilege applies in legal proceedings.) Oregon victim-advocate confidentiality is established at ORS 147.600.

PRIVILEGE is an evidentiary rule that allows the person whose confidential information is protected to prevent anyone else from disclosing that information without their consent. The person whose information is protected is the "holder" of the privilege. The holder of the privilege only asserts the privilege in legal proceedings. Oregon victim-advocate privilege is established at ORS 40.264.

The key difference between confidentiality and privilege is that confidentiality is a broader legal protection that applies to confidential information broadly and privilege is a legal protection that only applies in legal proceedings. Functionally, they both protect confidential information. Not all service providers offer the same confidentiality protections. The main differences are captured in this chart below.

MANDATORY REPORTERS OF CHILD ABUSE

Some professionals who provide confidential and/or privileged services are also mandatory reporters of child abuse. If this is the case, and they are not exempted from reporting because of privilege, they are required to report child abuse. Healthcare providers are also mandatory reporters of suspected nonaccidental injuries. Mental health providers may have a legal duty to report certain dangers to their clients or others.

PRIVILEGED & CONFIDENTIAL RESOURCES

Certified victim advocates and qualified victim services programs (see ORS 40.264(1) and ORS 147.600(1)) are not required to report child abuse unless they are on the list of mandatory reporters because of some other role (e.g., paid coach or foster parent). Psychiatrists, psychologists, clergy, attorneys, and certain guardians ad litem are not required to report child abuse that was disclosed in privileged communications.

OTHER PEOPLE

Youth may seek support from others who do not offer privilege or confidentiality protections nor who are necessarily mandatory reporters (e.g., family members and friends). Remember, though, these other people may report the abuse even if they aren't required to. With parents, Oregon has not established a parentchild privilege. (Note: A parent (or other third party) may be present during a confidential communication with a certified victim advocate and the communication will remain confidential so long as the parent is present "to further the interests of the victim" in seeking services or is "reasonably necessary for the transmission of the communication." (ORS 40.264(1)(b) and ORS 147.600(1)(b). Best practice for advocates in this situation is to document how a parent furthered a youth's interest or was necessary for the communication.)

PRIVILEGED AND CONFIDENTIAL COMMUNICATION CONTINUED

Legal confidentiality asserts that certain professionals may not disclose confidential communications they have with clients or those clients' confidential records. Privilege is an evidentiary rule that also protects those same confidential communications from disclosure in legal proceedings. So, for example, if such a professional receives a subpoena to disclose confidential information, they could assert a privilege and move to quash that subpoena if that is what their client asks them to do. This chart provides a very general overview of how privilege and confidentiality in Oregon overlap with mandatory reporting of child abuse in places where children and youth are often served.

CLERGY

Reports: Child Abuse UNLESS
learned of the abuse through a
privileged communication
To: OR Child Abuse Hotline or Law
Enforcement

OTHER MANDATORY REPORTERS OF CHILD ABUSE

Reports: Child Abuse
To: Oregon Child Abuse Hotline
OR Law Enforcement

TIX REPORTER

Reports: Discrimination or
Harassment (including sexual
violence). Also, possible
Mandatory Reporter of
Child Abuse
To: School Title IX
Coordinator and OR Child
Abuse Hotline/Law
Enforcement as applicable

Reporting Obligations

CERTIFIED VICTIM ADVOCATES AND QUALIFIED VICTIM SERVICES PROGRAMS

Reports: nothing unless have another role that makes them mandatory reporters. Confidentiality and privilege requirements keep them from filing a permissive reports

To: Nobody without written informed consent

PARENTS/GUARDIANS

Reports: No reporting requirements unless designated mandatory reporters due to licensure or workplace requirements. However, parents and guardians are allowed to report.

An additional note is that different people/institutions are responsible for investigating sexual violence/abuse in different ways. For example, law enforcement and the Oregon Department of Human Services are tasked with some investigations through the criminal justice system AND School District staff, the Oregon Department of Education, and the Oregon Teacher Standards and Practices Commission are all tasked in different circumstances with investigations in school settings. Who is involved and what simultaneous investigations are going on can get very complicated and complex.

Student Sexual Harassment: Reporting Options and Responsibilities in Oregon Law

OREGON SEXUAL HARASSMENT (ORS 342.700-708 AND OAR 581-021-0038)

- School staff are required to report behavior that may constitute sexual harassment ORS 342.704 (2)(d) and OAR 581-021-0038(5)(f)
- When a complaint is filed, the school is required to give notice to the student of their rights and options under the policy OAR 581-021-0038(5)(i). This notice may also go to a parent/guardian, "where applicable" OAR 581-021-0038(5)(i)(D)
- Schools are required to have a drug and alcohol amnesty policy related to reports of sexual harassment. More on this can be found on the next page. Amnesty laws and policies should be reviewed with the local school or district. OAR 581-021-0038(5)(h)
- While nothing in this law or rule explicitly requires parental or law enforcement notification, nothing prohibits it either. The rule specifically states that parents may receive a notice of rights/options "where applicable" 581-021-0038(5)(i)

HARASSMENT, INTIMIDATION, BULLYING AND CYBERBULLYING (ORS 339.351)

- The definition of "harassment, intimidation or bullying" is broad enough that many reports of sexual harassment could fall under this statute ORS 339.351(2)
- School employees must report acts of harassment, intimidation, bullying, or cyberbullying to a designated employee
 ORS 339.356(2)(f)(B)
- The law contains a parental/guardian notification requirement, with a provision that would allow schools to opt-out of direct parental notification if notification could endanger the student ORS 339.351(2)(f)(C). Because of the overlap between the definition of harassment/bullying and the definition of sexual harassment, this might create a parental/guardian notification requirement for sexual harassment.

SEXUAL CONDUCT, ALSO CALLED SEXUAL MISCONDUCT OR "SB155" CONDUCT (ORS 339.370 TO 339.400.)

- Oregon law defines "sexual conduct" as verbal or physical conduct occurring by a school employee, agent, contractor, or volunteer, and a student that are sexual advances, requests for sexual favors, of a sexual nature, or have the effect of interfering with the student's educational performance, or create an intimidating or hostile educational environment (O.R.S. 339.370(12)(a).). Under this law, "students" includes anyone in grades K-12, including students who are over 18 (O.R.S. 339.370(13)).
- Whenever a school employee has "reasonable cause to believe" that sexual conduct (as defined by ORS 339.370-339.400) occurred, they have to report it to a designated school employee ORS 339.388(1)(a)
- The school's designated employee is required to report suspected sexual conduct to either the Oregon Department of Education (ODE) or the Teacher Standards and Practices Commission (TSPC), depending on the licensure status of the person perpetrating the violence (ORS 339.388(2)).

DISCRIMINATION (ORS 650.850 AND OAR 581-021-0045)

- Defines protected class discrimination, including sex discrimination, and prohibits it in public K-12 educational programs.
- Sexual harassment is a form of sex discrimination covered by Oregon nondiscrimination laws and rules. Schools
 must ensure that they are treating sexual harassment as a form of sex discrimination with all associated
 protections.

TEEN DATING VIOLENCE (ORS 339.366)

The Healthy Teen Relationship Act (HTRA) requires schools to implement prevention education grades 712, as well as establish procedures for how school employees are to respond to incidents of teen dating
violence that take place at the school, on school grounds, at school-sponsored activities or in vehicles used
for school-provided transportation, and identify by job title the school officials responsible for receiving
reports related to teen dating violence (the same individuals identified under ORS 339.356).

Additional Elements that May Effect Youth Supports and Minor Rights

Protective Orders

Protective Orders, often referred to as Restraining Orders, are a tool people can use to help promote safety, including when they are navigating processes around violence or abuse (ex. criminal or civil legal proceedings). These are different from "No-Contact Orders" issued by judges or parole/probation officers which may go into effect after an incident/crime has happened. Protective orders may go into effect as a preventative measure before a specific act of violence has occurred. There are many different types of protective orders with complicated stipulations on how and when they can be accessed. These are some of the main protective orders impacting minors:

Sexual Abuse Protective Order (SAPO) ORS 163.760 to 163.777

Anyone 12 years old and up may file for a SAPO on their own. Anyone under the age of 12 must have a parent or guardian file for them. The respondent must be 18+ and not already restrained by a "no contact order"/other protective order.

Family Abuse Prevention Act (FAPA) ORS 107.700-107.735

A minor may apply, but they may need to have a guardian petition for them, and the respondent must be either the spouse/former spouse of, or have been in a sexually intimate relationship with the minor.

Stalking Order ORS 30.866; 163.730-163.750

A minor may apply, but they may need to have a guardian petition for them. The respondent can be anyone regardless of age or relationship to the petitioner.

Extreme Risk Protection Order (ERPO) ORS 166.525-543

Anyone who is the family member/household member of someone who presents a risk of suicide or causing physical injury to another in the near future may apply, although minors may need parent/guardian to file.

Purchase or possession of alcoholic beverages by person under 21 (ORS 471.430)

A person under 21 years of age is not in violation of, and is immune from prosecution for possessing or consuming alcohol or drugs if the person contacted emergency medical services or a law enforcement agency in order to obtain medical assistance for themselves or another person due to alcohol consumption. This may allow for accessing services like sexual assault forensic exams under this provision, if the violence was facilitated by/related to substance use.

Student Mental Health Days (ORS 339.065)

In 2019, Oregon's law around school attendance was updated to allow for absences related to mental and behavioral health. Students can take up to five days in a term of three months or 10 days in any term of at least six months by submitting the absence excusal in writing directed to the principal of the school they attend. This right allows students to help prioritize their mental health and healing.

OREGON CRIME VICTIMS RIGHTS

A victim of crime in Oregon has certain rights intended to help protect them and ensure they are treated with dignity and respect. Victims who are under the age of 18 have these rights as well, as do their parents or guardians. It is important to note that a parent/guardian's rights don't supersede the youth's rights as a

Victims' rights in Oregon include a right to justice, as well as to:

- play a meaningful role in the criminal or juvenile justice process.
- be treated with dignity and respect.
- receive fair and impartial treatment.
- receive reasonable protection from the offender.

victim of crime. Crime Victims' Rights apply to the adult criminal justice system and juvenile justice system. Many of these rights go into effect automatically, while others must be requested through local District Attorney's offices or Juvenile Departments.

What rights do people have as victims of crime?

For criminal cases, the victim and legal guardian of the victim, has the rights to do these things:

- Attend proceedings held in open court.
- Have a support person with them.
- Receive restitution (payment from the defendant or the adjudicated youth) for eligible crime-related expenses.
- Request a transcript or recording of open court proceedings.
- Protect information that could identify them or their home, such as address, phone number, and Social Security number.

If they have an attorney, their attorney can also exercise these rights on their behalf. If they don't wish to speak at a hearing (when that right is available), they can have someone speak on their behalf.

Depending on how/if a case progresses through the criminal justice system, additional rights may be available, including to:

- Have the court consider the victim's schedule when setting dates for the trial and required hearings.
- Limit the sharing of crime-related information that is sexually explicit.
- Refuse to speak to the defendant's attorney or private investigator.
- Have the judge consider their safety at any hearings on releasing the alleged youth offender/defendant.
- Know the outcome of their case.
- Receive notification of court proceedings that are considered "critical stage," and notice of hearings after a conviction occurs. The victim can also choose to receive notification of the offender's release from detention, shelter, or other facility.

Victims of abuse, sexual assault, domestic violence, or stalking, may have the right to:

Take time off work to attend court or medical appointments; End a rental agreement early; Not be disqualified from unemployment benefits; Have their locks changed; Get special arrangements for public housing; Set up a payment plan with their phone company.

- Victims of family or sexual abuse, stalking, or abuse against a disabled person or elder, can request a protective order (an order instructing a person to stop abusing or harassing you).
- Victims of sexual assault have the right to receive emergency contraception from a hospital.
- Victims of domestic violence, may be able to get financial help through the Oregon Temporary Assistance to Domestic Violence Survivors fund.
- Immigrants may have additional legal options. Their immigration status doesn't affect their rights as a victim of crime.
- Victims of a crime that involved physical injury or death, may be able to get financial help for costs related to counseling, medical care, and funeral expenses. Contact the Crime Victims' Compensation program through the Oregon Department of Justice for more information.

Educational Settings and Title IX

Title IX is a federal law passed in 1972 that prohibits sex discrimination in educational programs and activities. Title IX protects all students from unfair treatment based on their sex or gender. In 2021, the U.S. Department of Education's Office for Civil Rights (OCR) clarified that Title IX also prohibits schools from engaging in discrimination based on sexual orientation or gender identity. Any school that receives federal funds must comply with Title IX, meaning that schools like public schools and public charter schools cannot treat students differently or provide different services, benefits, or opportunities for students based on their sex or gender, sexual orientation, or gender identity.

"No person in the United States shall, on the basis of sex, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any education program or activity receiving Federal financial assistance[.]"

- Title IX of the Education Amendments of 1972 to the Civil Rights Act of 1964

Title IX requires schools to have specific policies, procedures, and supports that create safe and nondiscriminatory learning environments for students. This includes policies that prohibit sexual harassment and sexual violence, and procedures for responding to reports of sexual harassment or sexual violence.

If a student experiences sexual harassment at school (or at a school-sponsored event, on the bus, at an athletic game, etc), they have specific rights and protections under Title IX. Students who experience harassment can:

- · Report it to their school
- Receive supportive measures to help reduce the impact of the harassment on their educational environment, which may include things like receiving counseling or changing their class schedule around
- Have the school conduct an investigation. This school-based investigation is different than a law enforcement investigation. If the school investigates and determined that sexual harassment occurred, they're required to remedy the effects of the harassment and put sanctions (disciplinary measures) in place for the person who harassed the student.

Just like other laws, Title IX can change. Since 2012, OCR has frequently updated or changed the regulations and guidance around Title IX, especially around sexual harassment. The regulations impacting sexual harassment were updated in 2020, and OCR proposed replacing those regulations again in 2023 – which may change the requirements of Title IX during the 2023-2024 school year, and might change some of the rights and options for students listed above. You can check with your local school district to see their latest Title IX policies, or contact the district's Title IX Coordinator to ask about updates.

WHY TITLE IX - FROM WORK



"Know Your IX and the National Alliance to End Sexual Violence (NAESV) conducted an online survey in March 2015 to gauge survivors' beliefs about the criminal justice system, victim autonomy, and reporting. Almost 90% of survivors said that campus victims should retain the right to choose whether and to whom to report. Eighty-eight percent (88%) said that, were campuses required to turn rape reports over to the police (without survivors' consent), they believe fewer victims would report to anyone at all."

"The vast majority of student survivors never report to law enforcement or campus officials. But when schools fail to foster an environment in which survivors feel safe reporting, survivors are left without the accommodations they need to stay in school, and perpetrators are rarely held accountable. States should require schools to adopt baseline best practices to encourage reporting, prevent retaliation against survivors, and ensure survivors know where they can access resources after an assault."



WHY TITLE IX?

"Rape is the most underreported crime in the United States... [Some of] the common reasons why survivors routinely choose not to report to the police, [include]: Fear or distrust of law enforcement, Desire to protect [the person causing them harm] who may be a former (or current) partner, family member, boss, professor, or friend, Recognition that the criminal justice system creates and perpetuates violence... For instance, people of color and low-income people are disproportionately incarcerated, and rape itself is rampant and unchecked in prisons. Fear of deportation or criminalization themselves, and Recognition of [societies] historical and enduring failure to hold perpetrators accountable"



WHY DO SCHOOLS HANDLE SEXUAL VIOLENCE REPORTS?

"Title IX requires schools to combat sex discrimination in education. One of the most common objections we hear... is "but isn't rape a crime?" It absolutely is, and students who report to their schools can also report to the police. However, rape and other forms of gender-based violence manifest and perpetuate inequality. To make sure that all students, regardless of their gender identity and expression, have equal access to education, schools are required to prevent and respond to reports of sexual violence. This isn't a replacement for reporting to the police; it's a parallel option for survivors based in civil rights - rather than criminal - law... Schools... are in the position to take action quickly to ensure a safe campus."

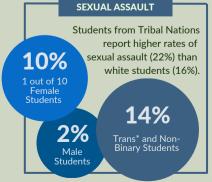
IMPACTS ON OREGON YOUTH

The below information in this format is pulled from an SATF resource entitled 'Healthy Sexuality Education is Necessary to Prevent Violence and Abuse in/and Outside of our K-12 Schools' which highlights the impacts of violence and abuse on youth throughout Oregon and the research that shows how comprehensive sexuality education can mitigate these impacts. This resource is available on SATF's website.

While sexual pressure and intimate violence generally happen outside of the school setting, students are most often victimized by a school peer/s. This in turn means survivors of sexual coercion and sexual assault are frequently forced into an education setting alongside the very person or people who victimized them.

- 2020 OSSCC State of Safe Schools Report

Oregon 11th Grade Students Report Experiencing:



SECTION 2

Understanding Roles,
Responsibilities, and
Opportunities in Collaboratively
Supporting Youth in Oregon

Roles involved in Supporting Youth who Experience Violence or Abuse

There are many different people and systems involved in supporting youth when they experience violence or abuse. Some of these support systems are outlined on page 6 of this resource packet. We want to focus in on four main roles that commonly impact youth. More depth on each role can be found in the following pages.

Role	What supports are provided?	Reporting requirements?	How do they work with/support other roles?
Privileged + Confidential Advocate	Provide safe supports throughout all processes that victims/survivors may need to navigate. This includes providing information, safety planning, connections and referrals, and accompaniment when requested.	None	Help youth navigate the other systems - including reporting processes, connect youth to partners in other roles, help youth know their options and be informed throughout other processes.
Preventionist	A Preventionist is someone who provides prevention programming, including education. Often serve in a dual role of prevention and advocacy.	None if also working as a privileged advocate. Other requirements may apply based on licensure, etc.	Preventionists are often the first people that receive disclosures because people identify their own experiences with violence when discussing healthy relationships and violence prevention. Preventionists can then connect youth to other resources, provide immediate safety planning, and help youth navigate ALL of the other processes.
Mandatory Reporter	This varies based on the person's main role (ex. teacher or healthcare provider). These people would need to make a mandatory report to either the Oregon Child Abuse Hotline or Law Enforcement, ideally in traumainformed ways that give the victim/survivor as much voice as possible.	Must report to ODHS Child Welfare or Law Enforcement	Depending on the position in an institution (ex. leadership), or their role generally, these people may provide ongoing support to youth (ex. counselors), or their main role would be making the report which should also enable them to access other supports. Can also connect youth to a confidential advocate to provide additional supports.
Reporters Under Title IX (TIX)	Along with any mandatory reporting responsibilities, these people may have additional obligations to report to a TIX Coordinator. TIX Coordinators have a variety of roles that may extend from ensuring academic accommodations to conducting TIX investigations (outside of any criminal justice investigations occurring).	Makes report to Title IX Coordinator.	Depending on the position in an institution, these people may have ongoing interaction with youth (ex. teacher), they may not be involved in the Title IX processes beyond reporting. They can also connect youth to a confidential advocate to provide additional supports.

PRIVILEGED CONFIDENTIAL ADVOCATES

The advocate's role in sexual assault response is to provide knowledgeable, compassionate, trauma-informed, and supportive intervention to the survivor of violence (as well as friends and/or family members), and to support their needs after the assault. Advocates help survivors navigate systems, such as criminal justice, civil legal, medical, and social services systems, and work to ensure victim rights and dignity are respected and upheld by these systems. Advocates provide information, education, safety planning – physical and emotional - and referral. Perhaps more than all other responders, advocates are responsible for ensuring that, at all stages of response, the voice of the survivor is centered.

Privileged advocates are extensively trained to help individuals navigate their environments and attain health and safety. These advocates provide a safe space where a student can feel in control of their situation, consider options, identify their needs and seek resources. Accessibility of these services protects youth from further victimization and harm.

Safe Supports Provided by Privileged Confidential Advocates:

- **Emotional Support** Provide a listening and supportive ear for those who have experienced violence of any form with no mandatory actions to follow.
- **Confidentiality** Work directly with the youth and are bound by law to maintain confidentiality around communications and records. This may include not sharing information with schools, agency staff, parents or guardians, etc. without a signed release of information.
- Safety Plan- Explore options with youth to enhance safety within their home, school and community.
- **Minor Rights** Inform youth of their legal rights as a minor.
- Access Resources- Assist youth in identifying and accessing community and school resources that fit their needs.
- Navigate- Assist youth in navigating the medical process and community systems.
- Assist- Youth in accessing safe shelter and transportation.
- **Empower** Provide unwavering support that encourages the youth to make choices that will help improve their situation.

Often times youth reach out to a confidential and privileged advocate to share personal information about a situation in which they felt powerless. By allowing the youth to work alongside an advocate at their own pace, the youth can slowly regain the control that may have been taken from them. Once the youth reaches this point they more often than not reach out on their own (with the assistance of their advocate) to access resources and possibly file a report. Confidential advocacy increases victim safety and creates safe spaces where youth feel comfortable reaching out for help.

Youth in Oregon may speak with a confidential advocate no matter how old they are.



Confidentiality Mandates for Domestic/Sexual Violence Programs in Oregon

OHS administers federal and state funding for domestic/sexual violence programs in Oregon. With this funding comes federal and state confidentiality mandates that we must enforce. The U.S. and Oregon legislatures both prioritize confidentiality for domestic violence, dating violence, sexual assault and/or stalking victims.

The Federal government demands strict confidentiality (34 USC §12291 (b)(2), 42 USC §10406(c)(5)) from community-based organizations whose primary purpose is to provide direct services to victims of domestic/dating violence, sexual assault, stalking and/or human trafficking. These programs may not disclose any personally identifying information collected in connection with services requested, utilized or denied. This is far stricter than HIPAA.

There are only three exceptions to this protection.

- Voluntary, informed*, written, reasonably time-limited consent of the person whose information is sought
- Statutory mandate
- Court mandate

In Oregon, there is no statutory mandate for domestic/dating violence, sexual assault, stalking and/or human trafficking programs to report. In fact, the Oregon legislature specifically exempts these programs from child abuse reporting. (419B.005(5)(bb)(B))

In Oregon, these programs must also take steps to avoid all disclosures and must object to subpoenas and other legal requests for disclosures. (ORS 147.600)

Also, in Oregon, victims can assert privilege. They can refuse to disclose in a legal matter, and prevent others from disclosing, any confidential communications with a certified advocate and the records created or maintained in the course of providing services.

The benefits of these confidentiality mandates:

- These crime victims will be safer. This ensures that this completely free service available for victims will allow them to openly share any information. This can be essential for meaningful safety planning.
- These crime victims will not be further victimized. It is traumatizing when information gets out that you shared in confidence. It can also be life threatening if it gets into the wrong hands.
- These crime victims will be more likely to use advocate services. Advocates have access to resources, like shelter, which can benefit victims. Reducing barriers to those resources makes everyone safer.
- These crime victims will benefit more from advocate services. If a victim feels they must hide information from an advocate, services will not be as responsive or useful

2018

stInformed consent is given only after the survivor understands the alternatives to and the risks and benefits of the disclosure.

COLLABORATION BEST PRACTICE

Many efforts to respond to violence/abuse and ensure coordinated, wrap-around response exist throughout Oregon. We can learn from these efforts. Some of the clearest models of this include **Sexual Assault Response Teams (SARTs) and Child Abuse Multidisciplinary Teams (MDTs),** which are both required in every county throughout Oregon because experience has shown that communities with coordinated systems meet the challenges of effectively responding to violence better. In systems where response is comprised of increasingly complex arrays of responders/service providers, a coordinated, multidisciplinary approach is the best response.

SEXUAL ASSAULT RESPONSE TEAMS

(ORS 147.401)

The District Attorney (DA) in each county organizes a SART consisting of representatives from at least:

- The DA office:
- A prosecution-based victim assistance program or unit;
- A sexual assault forensic examiner;
- Law enforcement (local and/or sheriff);
- A nonprofit agency that offers safety planning, counseling, support or advocacy to victims of sexual assault;
- A sexual assault nurse examiner or hospital staff; and
- Other persons necessary or recommended by SART.

CHILD ABUSE MULTIDISCIPLINARY TEAMS (ORS 418.747)

The District Attorney (DA) in each county develops and maintains an MDT to consist of, but not be limited to:

- Law enforcement personnel,
- Department of Human Services child protective service workers.
- School officials,
- Local health department personnel,
- County mental health personnel with experience in children/family mental health,
- Child abuse intervention center workers,
- Juvenile department representatives,
- Others specially trained in child abuse investigation.

Ideally, these teams will include other professionals, disciplines, and community members who play important roles in a effective response as well, including, but not limited to: offense management and treatment professionals, college and university campus faculty/staff, non-traditional and culturally-specific service providers, Tribal Nations, and more.

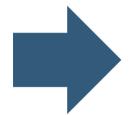
The purpose of these coordinated efforts is to improve the response to violence and abuse and to guide and inform local prevention efforts. A coordinated, multidisciplinary response mitigates the effects of violence/abuse on individual victims and their loved ones, increases victim and community safety, and prevents future victimization. Teams that develop strong and trusting relationships among the individuals and agencies ensure an effective, collaborative body. As in all other collaborative efforts, trust building takes time. If the functions of a team are to work collaboratively to mitigate trauma, increase community safety, and prevent future victimization, each responder should be given the chance to explain how and why they respond as they do so other members can come to understand the needs and concerns that drive each agencies' response policies and what they can legally share with other team members. Then the process of creating common protocols can move forward in an environment of mutual respect and understanding, and ultimately members can call on each other for assistance and direction, as well as hold each other accountable on behalf of victims and a victim-centered response.

By studying communities with active, well-functioning teams, we see that this collaborative approach brings many improvements, including: an increase in the number of victims coming forward for help, more medical and mental health follow-up services accessed by victims, an increased percentage of victims reporting to law enforcement, victims expressing greater satisfaction with the care they received from medical personnel and law enforcement, as well as a greater confidence in the legal system's ability to achieve a form of justice for them.

CONFIDENTIAL ADVOCACY AND PREVENTION

Many spaces, including schools, partner with community organizations, like those qualified victim services programs, to provide prevention programming. We often see these two services as very separate and/or simply frame prevention as being the beginning of a referral process to response services (knowingly or not). This looks something like this one way arrow model below:

Prevention efforts raise awareness of response resources.



Response resources provide services for victims and survivors

When doing prevention work well, we instead need to think about Prevention and Response as **TWO SIDES OF THE SAME COIN**. When prevention and response systems operate in a balanced, equitable manner, both are more successful, and people are healthier and safer. This looks more like the model below.

RE-FRAMING OUR WORK: THE SATF CONTINUUM MODEL

ACTION + COLLABORATION

Advocacy + Response services inform
Preventionists and outreach with
community-specific trends, share data,
and each area participates in
cross-training and evaluation.

ADVOCACY + RESPONSE SERVICES

Advocacy and Response services operate in a clear, consistent, and "as advertised" manner, are able to refer as necessary to additional resources.

OREGON SATF PREVENTION, ADVOCACY + RESPONSE CONTINUUM

TRAUMA-INFORMED, SURVIVOR-CENTERED RESPONSE

Staff that are able to respond to reports of sexual violence are well-trained, assess safety and promote survivor autonomy.

PREVENTION EFFORTS

Community-specific, grounded in best-practice, and operate in a trauma-informed manner.

KNOWLEDGEABLE + WARM REFERRAL BY PREVENTIONISTS

Preventionists and other key staff are able to accurately and adequately refer to services in a warm manner.

PREVENTIONISTS

Preventionists can be housed at any number of organizations and/or institutions who are predominantly working to prevent violence or abuse before it ever occurs. They are responsible for implementing prevention activities, which may include education (like healthy relationships, anti-oppression, sexuality education, consent, parenting education, etc.), social norms campaigns, policy work, etc. These people often partner with schools or other community partners to come in and provide prevention education.

Preventionists who work at a qualified victim services program, have completed the required certification training, and are providing advocacy services - whether ongoing or responding to initial disclosures and providing warm referrals to full-time advocates, are also required to protect survivors' confidentiality and privilege.

Well-trained preventionists from these qualifying organizations provide trauma-informed prevention programming, which includes planning and implementing prevention activities to anticipate and honor the presence of victims and survivors, and anticipate the possibility of those who have already perpetrated violence of some kind in any audience. This means two key things:

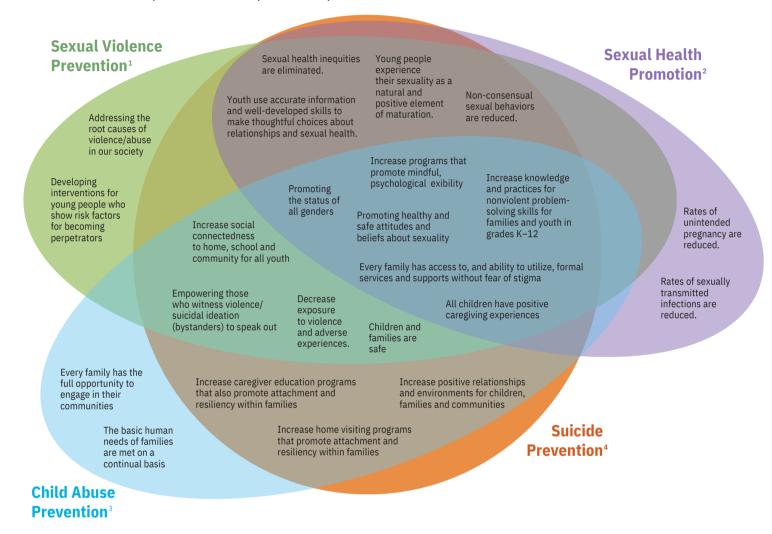
- Their work should be built on the understanding that because prevention addresses root causes of
 violence, it focuses on the risk of and protection from perpetrating violence and not on the risk of
 victimization. Focusing on risk reduction for victimization tends to support victim-blaming and the
 oppressions that may increase individual and community targeting for violence. This approach helps
 ensure preventionists avoid re-traumatizing, blaming victims, or colluding with abusive
 behaviors/attitudes.
- They have the ability to respond safely and confidentially to disclosures of violence or abuse or requests for help from participants during prevention activities. This is especially important as data consistently shows that when we hold space to talk about, learn about, and understand violence and abuse, people are going to reach out for support. This is true whether people are implementing a survey about prevalence, hanging informational posters around their space, or providing robust prevention education and beyond.

Safe Supports Provided by Preventionists (beyond standard prevention programming):

- **Safe Spaces** Prevention begins in the same place response does, by creating safe spaces where people can share their stories.
- **Emotional Support** Provide a listening and supportive ear for those who have experienced violence of any form with no mandatory actions to follow.
- **Confidential Advocacy** Depending on the parameters listed above, preventionists might also serve in an advocacy role and provide all of the same services listed for advocates, including safety planning, information, referrals, and more.
- **Empower** Provide unwavering support that encourages youth to make choices that will help promote the health and safety of themselves and others.

Connecting Goals/Strategies for a Healthier and Safer Oregon for Young People

In working to prevent different forms of violence/abuse and promote healthy attitudes, beliefs, and behaviors for all, much of the work overlaps and impacts the work being done in other sectors. When we start to look at the various goals and strategies of these sectors we can start to see overlaps and identify more clearly, places to collaborate and coordinate our efforts. Prevention efforts are also supported by several statewide laws, a few of which are listed below. These laws may affect both response and prevention.



Healthy Teen Relationships Act (ORS 339.366): Requires schools to incorporate age-appropriate education into new or existing training programs in grades 7-12 about teen dating violence and domestic violence, with a focus on promoting healthy relationships.

Erin's Law: Child Sex Abuse Prevention (ORS 336.059): Requires every school district board to adopt a developmentally appropriate and culturally sensitive child sexual abuse prevention instructional program for students Kindergarten through 12th grade with a minimum of four instructional sessions per year, as well as professional training for school personnel.

Human Sexuality Education (OAR Rule 581-022-1440): Requires that each school teach comprehensive, age appropriate, medically accurate sexuality education. This education is guided by Oregon's Health Education Standards which incorporate the above laws and more.

10regon, The Oregon Attorney General's Sexual Assault Task Force. (2006). Recommendations to Prevent Sexual Violence in Oregon: A Plan. http://50.116.64.16/~oregonv6/wp-content/uploads/2016/12/svpplow.pdf 2United States, Oregon Department of Human Services, Children, Adults, and Families Division. (2007). The Oregon Youth Sexual Health Plan. https://www.oregon.gov/DHS/CHILDREN/MFMC/Documents/Oregon%20Youth%20Sexual%20Health%20Plan.pdf 3Oregon Elevating Prevention Initiative (Jan 4, 2016, Publication). (n.d.). doi:http://ctfo.org/wp-content/uploads/2016/01/Elevating-Prevention-Report-FINAL.pdf 4Oregon Health Authority. Youth Suicide Intervention and Prevention Plan, 2016–2020. Salem, OR: Oregon Health Authority; 2016. https://www.oregon.gov/oha/PH/PREVENTIONWELLNESS/SAFELIVING/SUICIDEPREVENTION/Documents/5-year-youth-suicide-prevention-plan.pdf

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MANDATORY REPORTERS OF CHILD ABUSE

Mandatory reporting is a mechanism to address abuse and neglect of children, people over the age of 65, and adults living in a care facility and adults with certain disabilities. For the purposes of this resource guide, we are focusing on mandatory reporting of child abuse. Under Oregon law, any mandatory reporter must immediately report when they have reasonable cause to believe a child they come in contact with may have been abused, or a person they come in contact with may have abused a child. These reports must be made to either the Oregon Child Abuse Hotline run by the Oregon Department of Human Services (ODHS) or law enforcement.

Reporters are required to report the following (although this is not a comprehensive list):

- Physical Abuse
- Sexual Abuse and Exploitation
- Neglect
- Threat of Harm
- Mental Injury

Reports must include (if known):

- Name, date of birth/age, for all adults/children involved
- Description of abuse and impact to child's health/safety
- Alleged perpetrator's name, relationship, location, and access to the child
- Cultural or language considerations and ethnicity
- Any known American Indian or Alaska Native heritage
- Contact information for those involved

There are additional definitions of abuse that require mandatory reports when children are in care as defined under ORS 418.257. ORS 419B.005 provides a complete list of currently designated mandatory reporters of child abuse in Oregon, and ODHS also offers this overview "mandatory reporters are public and private professionals required by law to report suspected child abuse. Some examples of mandatory reporters include: medical practitioners, law enforcement personnel, employees of public or private organizations providing child-related services or activities, public and private school employees, and members of the clergy." This may include full-time and part-time staff, as well as some volunteers. The list of mandatory reporters is fairly expansive in Oregon, and the specific reporting requirements for them can vary significantly from healthcare providers, to educators, to clergy, to any public employees. Although their main roles/jobs may vary, there are overlaps in the ways any mandatory reporter can support minors through mandatory reporting.

Safe Supports Provided by Mandatory Reporters:

- Connect Youth with Resources and Systems that can help them this may include systems like child-welfare, but can also include confidential and more expansive resources. Having a good understanding of what will happen once a report is made is really important here.
- **Provide Trauma-Informed Reporting Processes** Reporters can each work to create a safe space for people to begin engagement with the expansive systems and structures that help to stop violence and abuse. This includes offering as much control as possible back to the young person whenever possible. See the next page for more tips on this from the Oregon Department of Education.
- Connect Youth to Other Community Resources, Including Confidential Advocacy Knowing what resources are available in your community that can provide more in-depth support for the young person and their families can be really meaningful. This includes providing contact information and/or a warm handoff to those resources to make direct connections.

Trauma-Informed Mandatory Reporting Tip Sheet from the Oregon Department of Education (ODE) Sex Abuse Advisory Group (2016)

For the victim, the phone call you make reporting the incident of abuse will set into motion a series of events that are mostly beyond their control. Because child abuse is, by its nature, a crime that is about taking control away from the victim, anything you can do to help the victim gain some sense of control in the aftermath can be crucial to their well-being and how they handle the process to come.

GENERAL TIPS:

- **Create privacy and safety** If possible, take the person to a room where the two of you can speak privately. Speak to them at eye-level.
- **Be calm and re-assuring** Take a minute to calm yourself down. Make sure you present as calm and confident. Be aware of you posture, your body movements, your tone of voice, and your facial expressions.
- Give the person lots of positive feedback "I'm really glad you told me this, it must be very hard." "This is a really brave thing you are doing, I'll do what I can to get you the help you need." "No one deserves to be hurt like this, I'm really glad you told me. "Everyone deserves to be safe and it is not your fault."
- Avoid asking about details of the event Take their statements seriously and don't pressure them to tell you more than they are willing to talk about. Ask, is there anything else you would like to tell me? Anything else that is important for me to know? Do you have any worries about all this?
- Ask the person about adult support Are adults in their life that they would like to know about this? Have they told any adults before? How did that go? If the alleged offender is in the home, ask them directly if they have talked to any of the other adults living in the home (if there are any) and how that went. This will give you information about whether she has any adults who support her in her family, community, and at home.
- Allow the person to make any decisions you can at this point "Is there anyone you would like me to call to be here with you for this?" I need to call someone who helps children when things like this happen, would you like to be in the room when I make the call? If they say, "no," ask them which adult they'd like to have be with them while you make the call.
- Ask the person if they have any worries about you talking with other people (or other people finding out about the alleged sexual abuse). If yes, ask them to tell you more about them; "What do they imagine happening?" "What are they worried that person will do?" If you believe they have a parent who is supportive, ask them directly about talking with them. "What does the person think their parent will do and say when they find out?"

DO NOT

- Make contact with the person's parent(s)/caregiver(s) until ODHS or Law Enforcement have talked to them.
- Ask them why they didn't tell earlier.
- Ask them what they tried to do to stop it, or why they didn't do something to stop the abuse.
- Say negative things about the alleged offender or the parent(s)/caregiver(s), OR make promises about what will, or will not happen.
- Act shocked or react emotionally.
- Make promises about what will, or will not happen. If you don't know, say so, and tell them that they can ask the other adults who will come to speak with them.

WHEN DISCUSSING REPORTING:

- **Don't rush through the process.** Yes the phone call needs to be made promptly, but the rest (interview, telling the parents/caregivers) will be scheduled to some extent to accommodate the victim's needs.
- **Discussing reporting with the victim:** We need to take steps to keep you safe. You already took the first step by talking to me and that was really brave. Step two is me talking to another adult. This adult talks to children and families all the time about stuff like this. They know that everyone deserves to be safe and they work had to make that happen.
- Explain confidentiality: Clearly explain to the victim what confidentiality level exists around this, since they will no doubt be scared about who will find out. Tell them who you are obligated to tell, and if those people will/can honor their confidentiality.
- Explain Child Protective Services (CPS): "There are people who help children and families when things like this happen. Their job is to help everyone be safe, and help parents, caregivers, and adults take care of kids. They will talk with you first to figure out what adults in your life can help keep you safe." If the youth has had experience with CPS in the past, listen to their experience, and show empathy for their feelings. Encourage them to tell the new caseworker about their thoughts and feelings. Let them know that you can also tell them as well.
- **Discussing Law Enforcement:** Ask the CPS hotline worker if Law Enforcement is likely to respond when they send a caseworker to the school. If so, tell the victim another person will come with the CPS caseworker and their job is to help keep kids safe too. Depending on the age of the child, describe the role of police.

CONNECT THE PERSON TO CONFIDENTIAL SUPPORTS

As outlined on pages 7-9 of this resource packet, once a mandatory report is made, there are many different processes a youth and their families may have to navigate as well as people they will have to interact with. By providing them the information for a confidential advocacy program in their community, you are providing them one more resource that can not only support them through to safety, but also ensure they have access to information and other highly-trained, dedicated supports.

What is/are the local confidential advocacy resource(s) in your community?	What is their contact information? Do they accept calls/texts/e-mails/walk-ins/etc.?
If you have an MOU or partnership with one or mor are specific people youth can reach out to and how	re of these organizations on prevention and/or response, who (text/chat/call/etc.)?

COLLABORATION BEST PRACTICE

SCHOOL-BASED HEALTH CENTERS (SBHCS) + CONFIDENTIAL ADVOCACY

In an effort to provide comprehensive resources to students seeking support in developing healthy relationships, the Oregon School-Based Health Alliance (OSBHA), with funding from the E.C. Brown Foundation, and in partnership with Raphael House of Portland (RH), Volunteers of America (VOA) Home Free, Portland Public Schools (PPS), and the Student Health Centers (SBHCs) at Cleveland and Franklin High Schools launched a confidential advocacy pilot project in 2018. The pilot was unprecedented in the United States, and at the time, was the only public school-approved program offering on-site confidential advocacy services to youth. The Healthy Teen Relationship Act Implementation Project developed out of growing recognition of the prevalence of teen relationship violence and its impact on the social, emotional, and educational well-being of students. Along with developing a model for schools to replicate throughout Oregon, the Project focused on:

CONNECTING EDUCATIONAL PROGRAMMING AND ADVOCACY SUPPORTS IN SCHOOLS:

RH and VOA have been teaching healthy relationship curricula in PPS classrooms for over 15 years. Building on their strong existing relationships with students, teachers, and administrators at both schools, Healthy Relationship Advocates expanded their work by providing youth individual confidential supports and providing school-wide support in creating a culture that promotes safe, equitable, and healthy relationships.

EXPANDING SERVICES AVAILABLE AT SCHOOL-BASED HEALTH CENTERS:

SBHCs worked to grow services to more effectively address the holistic health needs of students and be a place students can go to receive support to make their relationships healthier and receive advocacy support if they're experiencing something they identify as unhealthy. This meant a confidential advocate would be available at least two days per week to provide active listening, community based resources as needed, and facilitate peer support within their school community.

PROVIDING CONCENTRATED SUPPORT FOR THE ENTIRE SCHOOL COMMUNITY

The project involved OSBHA's Program Manager, RH Prevention Program Coordinator, VOA Teen Advocates, principals at each high school, at least one health teacher champion at each high school, school counselors, SBHC staff, and Parent Teacher Associations to encourage conversations about the practice of healthy relationships and sexuality within the school communities. Community partner staff facilitated workshops/trainings for students, teachers, and parents; and worked closely with administrators to develop policies and procedures to support a culture of healthy relationships.

PPS REPORTED THE FOLLOWING <u>OUTCOMES</u> AS A RESULT OF THIS PILOT PROJECT

- The pilot project **helped PPS understand the skills, training, and experience needed** by adults who respond to student healthy relationship 'incidents' in schools.
- The project prompted **better coordination** between PPS Prevention Services (prevention education) and PPS Student Support Services (incident response) groups, including weekly meetings and conjoint strategic planning.
- They recognized a benefit for students is that there are more 'askable' and 'safe' adults available to support them.
- The community partner advocates provided services to schools that PPS did not have the capacity to provide and helped meet needs of the HTRA state mandate.
- Schools not in the pilot project wanted confidential advocate services in their schools to support students coping with healthy relationship issues, and **PPS began funding the project** beyond the pilot year.
- As a result of the enhanced relationships with RH and Home Free, PPS is now engaged with a regional "family violence coordinating council and prevention group."

REPORTERS UNDER TITLE IX

People responsible for reporting under Title IX may include any staff, faculty, or volunteers at a school receiving any federal funds. When these people receive a disclosure of sexual or gender-based violence/harassment, on top of any mandatory reporting requirements (see pages 27-29), they will also need to report this to their school district's designated Title IX Coordinator. The Title IX Coordinator may be responsible for conducting an investigation or overseeing an investigation process. Although the person making a Title IX report may not be extensively involved in a Title IX investigation process, they may be responsible for/tasked with helping implement any reasonable interim measures and accommodations to promote health and safety. These could include:

- **Promoting Safety at School/School Functions:** Instituting no-contact orders, rearranging class schedules, reorganizing seating arrangements, providing a school escort, helping a student transfer schools, etc.
- Promoting Health Access: Help schedule/coordinate visits with school nurse or school based health
 center staff, provide hall passes or excuse class attendance to access mental health or other health
 supports, help find other local services that can help, such as a local hospital, domestic/sexual
 violence center, victim advocate, disability advocate, addiction counselor, housing advocate, or
 lawyer, etc.
- **Maintaining School Involvement:** Excuse tardiness or absences, give more time for (and/or chances to redo) homework and tests, offer online class options, provide tutors, adjust transcripts, adjust attendance requirements, etc.
- **Mitigating Punishment:** Implement school amnesty policies, stop/interrupt retaliation for telling, not retaliating against/punishing someone for not participating in a Title IX investigation or requesting certain accommodations or resolutions, etc.

Safe Supports Provided by Reporters Under Title IX (from Stop Sexual Assault in Schools):

- Know that students have a right to an education free from sexual harassment under Title IX, a
 federal civil rights law.
- Learn more about students' rights and schools' responsibilities.
- **Understand harassment** can include a wide range of behaviors from gestures, sounds, comments about clothing and gender to cyber sexual harassment to sexual assault. Let students know about these forms of harassment.
- When you witness sexual harassment, you can: support the recipient, tell the harasser that it's unacceptable, and that you will be reporting it. Sexual harassment is not a simple discipline matter.
- **Know your district's policy** on sexual harassment and have the contact information for the Title IX Coordinator.
- Help the student report it to the principal, counselor, or district Title IX Coordinator.
- Refer students to resources in your community, like a confidential advocacy program where they can get confidential help after being harassed or assaulted.
- Refer students to resources where they can learn more about their rights under Title IX like TIX Education Specialists, Stop Sexual Assault in Schools, and Know Your IX (to name a few).

PARTNERING TO EXPAND ACCESS + OPTIONS

TITLE IX + ADVOCACY

Oregon SATF recommends that institutions employing or partnering with confidential advocates implement policies granting students access to confidential services at the time of making an initial report/disclosure of sexual harassment/violence to the institution.



FRAMING THE WORK

Oregon law provides the opportunity¹ for schools to utilize confidential victim/survivor advocates. As professionals with expertise in systems navigation, the work of privileged confidential advocates serves as a compliment to the work schools colleges and universities do to support students under Title IX, Clery, and Oregon law. This is achieved by providing reporting parties with access to all of the support, resources, and information about options available to them, including reporting to the Title IX office.



WHY INCLUDE CONFIDENTIAL ADVOCATES?

Including confidential resources as a first point of contact when a student makes a report is a trauma-informed practice that allows for survivors of violence to explore all of their available resources, including reporting, when they are ready. In Oregon, schools that utilize confidential advocates in their institutional processes see 1) higher rates of reporting to Title IX and 2) increased participation by reporting parties in investigations.²

Confidential services offer an alternative approach to Title IX, which requires schools to adopt specific investigatory and administrative procedures to respond to reports of sexual assault and harassment. Due to the rigidity of those procedures, victims/survivors who report assaults, particularly people under the age of 18, trigger administrative responses that do not always account for victims' wishes or privacy. As a result, victims may often decline to report because they fear prematurely triggering a response mandated by state/federal law in which they have no control. Confidential advocacy services provide an alternative resource for victims to seek help without triggering a response that leaves them powerless.



PRECEDENT + POLICY APPLICATION

Oregon SATF recommends that schools model their practice after Oregon's medical advocacy law. This law requires law enforcement and hospital staff to call for an advocate to be present when a survivor presents for a sexual assault exam, to explain the survivor's options and connect the survivor to resources. For schools, we recommend the following: Upon receipt of a report of sexual harassment, schools should 1) connect the reporting party to a confidential advocate via email or in-person, 2) allow 2-3 business days for reporting party to make contact with advocate to explore options and resources available to them, and then 3) follow up with reporting party to conduct initial interview with TIX Coordinator.





SAMPLE RESOURCE

The following is a complainant/respondent rights document provided by Ashland school district. The document outlines the rights and options guaranteed by this specific district, including rights and options outlined in law and rule as well as additional options and rights that Ashland guarantees in their district policies. Compliance with state and federal policy is important, and can be bolstered by building and implementing robust response processes rooted in trauma-informed, student-centered approaches. The rights listed below (both those in compliance with laws as well the ones added and guaranteed by this school district) provide us one example of more robust response processes and resources.

Complainant/Respondent Rights Within Ashland School District's Response to Sexual Harassment and Violence

Below is an outline of the rights available to all complainants and respondents during sexual harassment, sexual violence and Title IX investigations. The "Complainant" is a person who has experienced an act of sexual harassment or violence that is affecting their sense of emotional or physical safety at school. A Complainant may not be the person who has reported the incident(s) to the school but they are still granted these rights. The "Respondent" is a person alleged to have committed an act of sexual harassment or violence.

Unless otherwise noted, each right is available to both the Complainant and the Respondent, and to staff as well as students. You have the right:

- To receive written information and a full explanation of the reporting and investigation process prior to making a disclosure.
- To receive information on how to access confidential support and community resources without triggering the school investigative process.
- To receive help navigating your school's response process.
- To make an anonymous Title IX report (which may impact or substantially limit the school's ability to conduct a complete investigation).
- To have a complaint investigated promptly and in accordance with established district policies.
- To receive help reporting to law enforcement.
- To have your information treated with the highest possible level of confidentiality.
- To be free from retaliation or negative impact in the school environment because of your participation in an investigation.
- To have an advocate or other support person present during any step of the process and during any investigatory interviews.
- To have incidents of off-campus or social media harassment and abuse investigated when they impact your sense of emotional or physical safety at school.
- To choose how much you will participate in an investigation, including the choice to not participate.
- To request that interim supportive measures be put in place to protect your emotional and physical safety during the investigation.
- To receive updates on the status of the investigation and to be informed if there is a delay in reaching a resolution. To be informed of all options for an appeal of a resolution, both within the district, to the Oregon Department of Education, and to the Office of Civil Rights.

SECTION 3

Best Practices for Partnerships to Support Youth

Subsections:

- Making the Case for Collaboration
- Collaboration Models
- Resources for Collaborating
- FAQs

WHY CONFIDENTIAL OPTIONS?

"Two of the most important factors for teens seeking services are the desire to be treated with respect and the need for confidentiality." (World Health Organization, 2001)

"In the 2015 legislative session, Oregon passed HB 3476 making Oregon the first state in the country to provide students with privileged, trained advocates on [college and university] campuses. [In the first year] SATF trained and certified over 200 privileged advocates on campuses throughout the state, and saw a dramatic shift in reporting numbers. Since implementation, there has been a 122% increase in reporting of assaults to Title IX officials, and a 138% increase in access to on campus victim services. Campuses have also reported an increase in historically under-reported populations coming forward including LGBTQ students, students of color, male survivors, and immigrant and refugee populations. These increases in students feeling safe to come forward have been so unparalleled that SATF has actively been training nationally on the model to other states looking to implement similar changes. States such as Utah have used the bill to model legislation in their own states."

- Oregon Attorney General's Sexual Assault Task Force, Campus Program, 2017 (after the first full year of implementation of victim-advocate privilege)

"Many students who have experienced violence are left feeling powerless and look to support services that can inform them of their options while helping them regain a sense of control. Currently many students are reluctant of immediately starting an investigation and remain silent of their assaults. This makes it difficult for institutions to address the conduct, assure all students are safe and reach students who are in need of academic and support services. In allowing colleges and universities the option to provide students with privileged campus advocates, they will be informed of their options for reporting and assistance with academic accommodations and other necessary safety planning, without the fear of retaliation from peers or the assailant in a safe space."

- Oregon Community College Association and Oregon Public Universities

Title IX Coordinator Work Group (3/25/2015)

In the pilot Oregon Child Abuse Prevalence Study (OCAPS) of youth in Oregon who reported having an abuse experience, "47% had never talked with anyone about their experience. Those who had shared their experience at some point in time most often shared it with a friend, parent or sibling."

The University of Oregon's Center for the Prevention of Abuse and Neglect
 OCAPS High school Pilot Study Preliminary Report, 2019

WHY CONFIDENTIAL OPTIONS? - UNDERSTANDING TRAUMA

Violence and abuse cause trauma, and the impacts of this can ripple out throughout people's lives. Extensive research has been conducted to understand the lifelong impacts of trauma - from ACES research to studies on trauma and institutional betrayal, we are developing a more comprehensive understanding of the all-encompassing impacts of trauma. The Institute on Trauma and Trauma-Informed Care (ITTIC) identifies the following effects of trauma:

- Trauma can impair: memory, concentration, new learning, and focus.
- Trauma has been correlated to: heart disease, obesity, addiction, pulmonary illness, diabetes, autoimmune disorders, cancer.
- Trauma can impact an individual's ability to: trust, cope, form healthy relationships.
- Trauma can disrupt: emotion identification; ability to self-sooth or control expression of emotions; one's ability to distinguish between what's safe and unsafe.
- Trauma can shape: a person's belief about self/others; one's ability to hope; one's outlook on life.

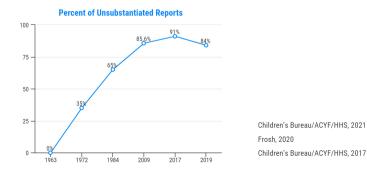
Knowing that people who experience violence and abuse have experienced trauma can help inform the ways we offer them trauma-informed care, and actively work not to retraumatize them. Things institutions often do that can cause re-traumatization include:

- Forcing people to continually retell their story, including not having systems set up to minimize this
- Not offering/providing choices in services, treatments, processes
- Treating people as a number or labeling them a certain way
- Not providing opportunity to give feedback about their experience with the services they receive or the processes they go through
- Committing Institutional betrayal which refers to wrongdoings perpetrated by an institution upon individuals dependent on that institution, including failure to prevent or respond supportively to wrongdoings an individual experiences
- Chronically under-resourcing and overwhelming staff which reduces staff capacity to effectively manage caseloads and provide highest quality care and services

Oregon relies heavily on a mandatory reporting model to respond to child abuse. This can be a meaningful tool to help some, but in other cases it may cause additional harms and/or increased abuse.

Knowing limiting choice and voice in our processes can retraumatize, it can be meaningful to offer people confidential resources to disclose and learn about all of their options, what they can expect, and how to promote safety to be best prepared to mitigate harm and re-traumatization when going through certain systems can be incredibly meaningful.





WHY CONFIDENTIAL OPTIONS? - MITIGATING RETRAUMATIZATION

Ensuring opportunities for safe and resourced disclosure (not just reporting) can help mitigate barriers to accessing any services, support empowerment, and can help alleviate potential for re-traumatization.

It is important to note that Disclosure and Reporting are different. Disclosure simply refers to 'telling' or discussing one's experience with violence or abuse with another person (which could include people with expertise in violence/abuse like counselors or medical providers OR people like friends and family). Reporting is a specific type of disclosure which includes a specific desire to officially record the experience and may come with the expectation that reporting will lead to an investigation, and/or engagement with accountability processes (which may include the criminal justice system or Title IX processes).

A University of Oregon study found "the more gender harassment and institutional betrayal (like mishandling of the situation by schools) teens encounter in high school, the more mental, physical, and emotional challenges they experience in college," lead researcher Monika Lind explains.

97% & **96%

identified experiencing gender harassment at least once in high school.

A 2019 study published in the Journal of Family Violence on the impacts of mandatory reporting laws on survivors of intimate partner violence found:

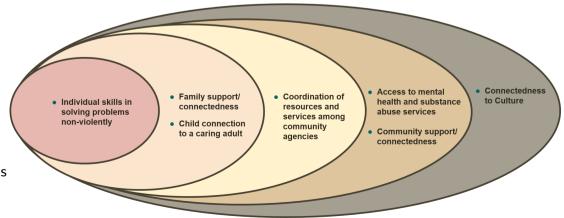
35% of participants said they did not ask at least one person for help because they feared their information would be reported to an official or an authority figure.

The most common system-level fear was that asking for help would result in the arrest of their partner or the general involvement of criminal legal system. **83.3%** of survivors said the mandatory report either made their situation worse (51.2% saying much worse) or had no impact.

Oregon's Department of Human Services Vision for Child Welfare is for all children and young adults to experience safe, stable, healthy lives and grow up in the care of a nurturing family and community.

This vision is based on a belief that children do best growing up in a family, and on values honoring and supporting cultural wisdom, building community resilience/voice, and ensuring the self-determination of communities of color.

These values align with evidence for factors that protect against violence and abuse perpetration and victimization (see those listed to the left). Knowing what protects against violence, can help us build more robust response systems to mitigate future violence.



COLLABORATIVE PARTNERSHIPS MODELS

Youth in Oregon benefit when mandatory reporters and confidential advocates have strong working relationships. In this section we want to offer four strategies for how to do this. These are not the only strategies that can be enlisted, but they are some of the most common ones. They include:

- Co-Located Models
- Rapid Response Models
- Including Confidential Options in Policies and Procedures
- Making Warm Referrals and Ensuring Awareness of Expansive Resources

These are organized in order of comprehensiveness of the wrap-around services from most-comprehensive (at the top) to least comprehensive (at the bottom) if implemented on their own. There is not one right way to provide trauma-informed comprehensive services to people under the age of 18, but implementing all four of these strategies in tandem will provide the most support and the most access for young people who have experienced violence or abuse.

As you explore these options, it can be meaningful to understand existing partnerships and capacity for partnerships. The below questions can help collect this information and increase transparency across systems to provide assistance for youth navigating your resources.

Before A Young Person Needs Help:

- Do you have a Memorandum of Understanding (MOU) or other agreement in place for how best to serve young people when the need arises?
- Has your organization/institution provided cross-training to partners to explain your procedures or services?
- Do your partners have your institution/organization's current contact information? Is there a point person that should be contacts if a young person needs assistance?
- Have you shared who in your institution/organization is a confidential or privileged resource for young people? Have you shared any exceptions to confidentiality that your staff/volunteers have?
- Has your institution/organization provided marketing materials (business cards, public notices, brochures, etc.) describing your services to community partners?
- Does your website link to community partners and resources that would benefit young people?
- Schools: Is there a private location (conference room, etc.) identified that an advocate, counselors, ODHS staff, or campus safety officers could utilize for private interviews with a student?
- Does your institution/organization share aggregate/non-identifiable information with community partners to identify trends, safety concerns and ideas for prevention initiatives?
- What gaps in knowledge does your institution/organization need to address to best serve youth survivors?

CO-LOCATED MODELS

Co-located advocates are staff from a nonprofit community-based agency who spend part of their time working in the partner setting (like a school) and part of their time working at their community-based DVSA organization. These co-located advocates provide in-depth safety planning, emotional support, education, advocacy, referrals, available client assistance funds, program navigation, and parenting/family resources. Advocates can also provide training and consultation on violence/abuse-specific issues to partner staff and beyond. This model can look a few different ways:

- A dedicated office for a confidential advocate from a local qualifying agent to work in ongoing and/or on a set schedule.
- A rotating space that, when requested, a confidential advocate can utilize to meet with youth. This might
 include a school or institution calling a young person out of class, or passing along notification to a specific
 youth on behalf of a confidential advocate. This does not mean that the purpose of the meeting can be shared
 however and best practice would be to have a signed release of information for the purposes of future 'calling
 out of class' when needed.

A partnership using a co-located model, may also include elements of the other strategies (like rapid response models or including confidential options in policies and procedures). There are many ways to set up these partnerships. A co-located model can really ensure that youth have access to these trauma-informed resources, as it may be harder for young people to get to and access the resources outside of the spaces (like schools) who have a primary purpose of serving youth.

Why Use a Co-Located Model?

There is a long history of using co-located confidential advocacy models in Oregon and throughout the country. One of the most notable is confidential advocates being co-located in local DHS Child Welfare and Self-Sufficiency offices. This is recognized as a best practice nationally, and Oregon has been co-locating DV advocates in ODHS offices for more than a decade... ODHS Child Welfare staff reported women and children were positively impacted as a result of working with a co-located DV advocate.

Impacts for DV survivors included:

- Increased strategies for enhancing their children's safety
- More access and likelihood to use ODHS services
- Less anxiety and a greater understanding about the ODHS interventions and processes
- A better understanding of the impact of DV on their children

The purpose of providing these services in ODHS offices is to increase the number of cases in which children can safely remain with a non-offending parent, to remove barriers to self-sufficiency and family stability for clients impacted by DV, and to foster a closer working relationship between community-based DV organizations and ODHS Child Welfare and Self-Sufficiency Offices. As outlined by law, colocated DV advocacy services are voluntary for survivors.

SAMPLE MOU

This Memorandum of Understanding (MOU) is entered into by <u>Name of Community Partner Organization</u> and <u>Name of Youth Serving Institution/School</u>. The MOU formalizes the commitment of the parties to work together to provide trauma-informed services to youth and employee victims of violence and abuse and to improve the overall response to violence and abuse at <u>Youth Serving Institution/School</u>. The parties share the goal of preventing violence and abuse in the community, and responding appropriately to youth and employees who have been victimized.

I. Description of the Partner Agencies

In this section, include a brief description of what each organization/institution does, including their missions/purposes, scope of work, and any other pertinent information.

Name of Community Partner Organization		
Name of Youth Serving Institution/School		
Name of Touch Serving Institution, Sensor		

II. History of Previous Collaboration

In this section, elaborate on how you have partnered in the past and how this is building on that or solidifying that partnership.

Example: Name of Youth Serving Institution/School and Name of Community Partner Organization have collaborated for the last [insert the length in years of the collaboration] on programs to prevent violence and abuse. Name of Community Partner Organization has conducted [insert number] educational programs for youth of Name of Youth Serving Institution/School and provided professional training for school staff. This MOU builds on the previous collaboration to provide services to victims and training to additional school officials.

SAMPLE MOU CONTINUED

III. The Role of the Community Partner Organization

In this section outline the different expectations, obligations, and commitments of the community partner organization. There is an example included below.

Name of Community Partner Organization agrees to:

- Make 24-hour crisis hotline services available to youth/employees of youth serving organization/school.
- Provide regular confidential (VAWA), privileged (ORS 40.264, Rule 507-1), crisis intervention, information and referral, accompaniment to medical/legal services as requested by youth and employees, and other safe supports.
- Provide youth and employees of youth serving organization/school with information about how to file a complaint with the school and how to report a crime to school/school district faculty and staff as well as offer to assist students and employees with filing a complaint or report.
- Conduct feedback surveys or use other methods to assess the effectiveness of the services provided to youth/employees.
- Meet regularly with Youth Serving Institution/School's Title IX Coordinator or designee to share generalized information about: the needs of victims/survivors, trends in services provided, additional services that are needed by youth/employees, and the effectiveness of the prevention and response program.
- Provide [specify hours] of training to Youth Serving Organization/School District staff and faculty, on the incidence and prevalence of violence and abuse, the physical and emotional effects, appropriate methods for interviewing and communicating, strategies to support a healthier and safer organization/school community, etc.
- Assist Youth Serving Organization/School with the development and provision of violence prevention programming and training to faculty, students and school officials.

SAMPLE MOU CONTINUED

IV. The Role of the Youth Serving Institution/School

In this section outline the different expectations, obligations, and commitments of the community partner organization. There is an example included below.

Name of Youth Serving Institution/School agrees to:

- Identify central point of contact for Community Based Organization staff to facilitate referrals for confidential services.
- Notify designated contact at Community Based Organization when a disclosure is received.
- Provide private space for Community Based Organization staff to meet confidentially with youth and employees.
- Provide training to Community Based Organization staff about: institution/school resources that are available to
 youth and employee victims of violence/abuse; federal and state requirements for institution/school in responding
 to violence/abuse; reporting procedures for youth/employees who wish to file a report and/or a complaint; the
 institution/school code of conduct and disciplinary process; and the educational/other accommodations that can
 be provided.
- Provide printed and online materials about reporting options for youth and employees, including information about how to file a complaint with the institution/school and how to report a crime.
- Inform the Community Based Organization about the reporting obligations of employees/volunteers and identify those employees with whom youth can speak confidentially (and any exceptions to that confidentiality.)
- Inform the Community Based Organization about the school's prohibitions on retaliation, how allegations of retaliation can be reported, and what protections are available for students who experience retaliation.
- Ensure availability of the Title IX Coordinator or designee to meet regularly with Community Based Organization.

•	Collaborate with the Community Based Organization on prevention approach and activities.

IV. General Provisions

In this section, include any information that is required in the organization/institutions' standard MOUs as long as it doesn't violate any of the laws directly applying to the partnerships.

INCLUDE SIGNATURES FROM APPROPRIATE ORGANIZATION/INSTITUTION REPRESENTATIVES

RAPID RESPONSE MODELS

This strategy refers to automatically contacting a privileged confidential advocate once a disclosure is received. This can help ensure that youth are connected with an advocate to help them navigate all of the different processes/systems as soon as possible. Youth are also then able to make more choices around what resources they want to use/have access to. Rapid response models can be implemented in conjunction with any of the other models/strategies, but can also be implemented on their own. Rapid response models might look like:

- Organization staff and/or volunteers directly contacting a designated (through MOU or other
 agreement) privileged confidential advocacy program when a disclosure is made. This program will
 send an advocate to be present, answer any questions, and offer confidential services, as the youth
 moves forward through any specific processes that were started as a result of the disclosure.
- Organization staff and/or volunteers follow their organization/institution protocols and ensure a
 designated staff member is notified of a disclosure. This staff member contacts a privileged
 confidential advocate immediately to come support the young person, then begins trauma-informed
 reporting processes.

Why Use a Rapid Response Model?

This model has been shown to be really meaningful in a variety of settings. A notable example is, since 2017, Oregon law (ORS 147.404) states that an advocate must be called when a sexual assault patient presents for medical assessment. Advocates can provide emotional support, education, and connection to services. Advocates may be able to provide clothing, informational handouts, and transportation. Most often hospitals call community-based domestic violence/sexual assault agencies.

Providing advocacy during a medical-forensic exam is considered best practice nationally, and allows the person to receive immediate support and crisis intervention, and to be informed of additional resources to assist in their recovery. The supportive response provided by a victim advocate, in tandem with a Sexual Assault Nurse Examiner, mitigates trauma and reduced symptoms of post-traumatic stress disorder (PTSD). Victims who receive support throughout the medical and legal process or more likely to continue to engage with the criminal justice system after the initial reporting of their sexual assault. Additionally, advocate participation during the medical-forensic process has been identified as a key component in reducing the backlog of untested kits and improving the system's response to sexual assault victims.

This model increases access to services available to survivors by enabling them to learn about the breadth of resources available to them, ensuring that victims are fully informed about their options when they choose to accept or decline advocacy services.

INCLUDING CONFIDENTIAL OPTIONS IN POLICIES AND PROCEDURES

Including referrals to and collaboration with confidential options in your institution/organization's policies and procedures can be a meaningful way to help ensure that all people on your team can provide the same level of supports to all youth you serve. This includes policies on response to disclosures, as well as prevention implementation. Some possible examples include:

- Including referrals to confidential options as a formal step in response procedures when responding to disclosures of violence and abuse. This can include handing out contact information, business cards, or brochures from community partners providing these services, including them in written materials provided to young people, and making a warm handoff/introduction when possible.
- In meeting any annual training requirements on mandatory reporting, child abuse, harassment, etc. inviting local confidential advocacy options to provide a short presentation on their services and answer questions from the team. If your organization does not have any current training requirements on this, developing a policy to ensure this happens with some frequency so staff are best able to provide trauma-informed supports to young people when violence/abuse occurs.
- Including a seat on advisory bodies, threat assessment teams, behavioral/community health teams, etc. for confidential youth advocates. This can help you set up comprehensive response systems and mechanisms (and update existing ones) in more trauma-informed ways.

Why Include Confidential Options in Policies and Procedures?

There are great examples of this built into Oregon's education laws around responding to sexual violence, like Oregon's Law on school sexual harassment policies (ORS 342.704). These laws help us implement best practices to ensure that young people are aware of: their rights, expansive resources, and how they can access services. Regardless of whether we are implementing programming in a school based setting, ensuring young people are connected to information is a best practice and will help ensure all young people are getting help.

Among other things, ORS 342.704 requires schools to provide information in writing to person(s) who experience sexual harassment on:

- The rights of the student, student's parents, staff member, person or person's parents, including privacy rights and any legal exceptions to those for school/district complaint processes/services.
- Information about internal complaint processes and services available through the school or district
- Notice that civil/criminal remedies not provided by the school/district may be available through the legal system and may be subject to statutes of limitation
- Information about, and contact information for, state and community-based services and resources that are available to persons who have experienced sexual harassment.
- Notice that students who report information about harassment and students who participate in an investigation
 may not be disciplined for violations of the district's drug and alcohol policies that occurred in connection with
 the reported incident(s) with some exceptions.

MAKE WARM REFERRALS AND ENSURE AWARENESS OF EXPANSIVE RESOURCES

Some strategies:

- Include local Confidential Advocacy Resource's contact information on various parts of your website (ex. community resource pages, any page related to violence or abuse, specific policy pages, etc.)
- Include these resources in materials directed at youth and families.

EXAMPLE: Ashland School District FAQ Document for Students

In their Title IX policies, Ashland School District includes a four page student friendly FAQ. Throughout this FAQ they refer people to a local confidential advocacy program. Some examples include:

- "Can I make a report without involving law enforcement? Due to mandatory reporting laws the school is required to notify the police if there was a sexual assault... Staff at the Jackson County SART can provide you with detailed information about the law enforcement process and facilitate your connection to Ashland PD..."
- "What resources are available to help me heal? The counseling department and administrators can direct you
 to no cost counseling for the duration of your time in the District. For resources outside of the school, Jackson
 County SART (https://www.jacksoncountysart.org/) can help you find free counseling, alternative healing
 practitioners, medical care and a support group or connection to peer support."
- Utilize opportunities in educational programming to highlight confidential advocacy resources in the community as outlined in Oregon's Health Education Standards (ex. 8.HRVP.6 states that students should be able to 'Identify community resources and other sources of support, including confidential advocates, that students can go to if they have questions about sexual safety or if someone is being sexually harassed, abused, assaulted, or trafficked.'
- Utilize posters and other visual materials throughout your space with the contact information of both your local confidential advocacy resources, as well as any relevant national resources (ex. the National Teen Dating Violence Hotline or Oregon Youth Line). To the right is a poster example available on ODE's website.



- Whenever violence or abuse is brought up (ex. in meetings, trainings, classroom instruction, etc.)
 highlight the confidential advocacy resources present and available in your communities.
- Ensure staff and faculty are aware of community resources and how to contact them and able to share this information with others. This is a key component of Erin's Law for K-12 schools.

A Resource for K-12 Schools:



Responding to Disclosures of Sexual Violence in Oregon's Schools

Oregon has extensive policy that supports effective response to sexual violence in educational settings. This reflects Oregon's commitment to supporting students as well as schools in creating spaces that continue to put students first. This document outlines some of the recommended strategies and considerations for schools' responses to sexual violence that have been effective in promoting healthier and safer schools for all students throughout Oregon. This includes both mandatory reporter and confidential options. Both are really important, meet different needs, and together, they allow us to better meet the health and safety needs of Oregon's students. Together, we can successfully respond to and prevent sexual violence.

Oregon-tested, School-based, Effective Practices

- Establish clear policies and procedures for responding to sexual violence that all staff/faculty are aware of and trained in.
- Raise awareness of and increase access to various types of support systems and supporters. These can include, mandatory reporters (like school counselors and other staff), confidential resources (like community based advocacy services), and online resources (like the National Teen Dating Violence Hotline).
- Support student decision-making as much as possible throughout the response process. This may including connecting them to other resources, as well as providing them options whenever possible.

In Schools, Who Supports Students who have Experienced Sexual Violence?

*Community-Based Confidential Privileged Advocates (ORS 147.600)

Includes: Certified advocates employed by a qualified sexual assault/victim advocacy office, women's center, or other qualified program providing safety planning, counseling, support or advocacy services to victims of violence.

May not disclose certain information provided to them by student victims of violence without that student's permission, even in the court of law. This is known as 'certified advocate-victim privilege.'

Responsible Employees (Under Title IX)

Includes: Any school employee with authority to take action to redress harassment/misconduct, OR is someone a student could reasonably believe has this authority or responsibility, has the duty to report these incidences to Title IX Coordinator.

Title IX Coordinator and the School are required to take immediate and appropriate steps to investigate sexual violence and take prompt and effective action to: stop the harassment, remedy the effects, and prevent recurrence.

Mandatory Reporters of Child Abuse (ORS 419B.005-419B.015)

Includes: School Employees, as well as several non-school employees like doctors, counselors, police officers, etc.

Required to report specific things to either the Oregon Child Abuse Hotline or Law Enforcement if they have reasonable cause to believe someone under the age of 18 (or 21 if receiving services from child-caring agency) is experiencing abuse or neglect. Mandatory reporting does not include a requirement to investigate, just to report it appropriately.

Other Restrictions on Student Privacy

P

"Prevents the disclosure of "personally identifiable information" (PII) in a student's education record without the consent of a parent or eligible student (aged 18 or older) unless an exception to the law's general consent requirement applies."1

People who have to follow FERPA may include: teachers, administrators, and other school/district employees

"Prohibits covered entities from disclosing "protected health information" (PHI) to any third parties, unless the individual who is the subject of the information (or the individual's personal representative) authorizes it in writing or the rule otherwise permits disclosure."1

People who have to follow HIPAA may include: school nurses or school based health center staff

"In order to ensure the safety of... youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, grantees... [receiving VAWA funding] shall protect the confidentiality and privacy of persons receiving services.",

People who have to follow VAWA may include: community based and Tribal Nation domestic and sexual violence advocates

Laws in Oregon that Support Best Practice Sexual Violence Response in Schools

Healthy Teen Relationships Act (ORS 339.366)

Requires school districts to adopt a policy and procedures to respond to incidences of teen dating violence and domestic violence. and identify, by job title, the school officials responsible for receiving reports.

Resource: Healthy Teen Relationship Act Toolkit, A Local School District's Guide to Teen Dating Violence Prevention

Erin's Law: Child Sex **Abuse Prevention** (ORS 336.059)

Requires every school to implement a child sex abuse prevention program that includes professional training for school personnel on child sex abuse and receiving reports and disclosures.

Resource: Oregon Department of Education's Long-Term Distance Learning - Erin's Law Toolkit for Districts

Oregon Safe Schools Act (ORS 339.356)

Requires every school to have a policy about and a procedure to respond to incidences of harassment, intimidation, bullying, and cyberbullying. This includes a statement about how schools will respond. Resource: 2009 Oregon Safe Schools Implementation Toolkit

Human Sexuality Education Rule (OAR 581-022-1140) Requires every school district to adopt a Comprehensive Plan of Instruction on Human Sexuality Education that includes annual education on sexual violence prevention, healthy relationships promotion, access to community resources, and family communication and involvemnet. Resource: Oregon Department of Education's Sexuality Education Resources

^{*} Advocates working at qualifying community and tribal domestic and sexual violence programs in Oregon must keep victim communications and records confidential in alignment with state and federal privilege and confidentiality laws. Some advocates may have other requirements that make them a mandatory reporter of child abuse under Oregon law.

FIND PRIVILEGED CONFIDENTIAL RESOURCES IN YOUR COMMUNITY

You can access an up-to-date list of privileged confidential advocacy programs in Oregon, organized by county, at:

Oregon Coalition
Against Sexual and
Domestic Violence
www.OCADSV.org

The Oregon Attorney General's Sexual Assault Task Force www.OregonSATF.org You can also access an interactive map with these resources, along with extensive data from the student health survey, broken down by county here:

Oregon Health Authority Rape
Prevention & Education Resource Map

https://experience.arcgis.com/experience/2ab 23beced0045579294517e524d7b70/

ADDITIONAL COMMUNITY RESOURCES

State/National Text, Chat, and Phone Resources for Youth

*Note: These services are not protected by Oregon confidentiality and privilege laws.

YouthLine

A service of Lines for Life

CALL 877.968.8491

TEXT 'teen2teen' to 839863

A free 24-hour crisis, support, and helpline for youth, answered daily by teen volunteers from 4-10pm (PST). https://www.theyouthline.org/

National Teen Dating Violence Hotline

CALL 866.331.9474, 800.787.3224 (TTY)

TEXT 'LOVEIS' to 22522

A free 24/7 help line offering support, education, and advocacy to teens and young adults (as well as friends and family) with questions or concerns about dating and relationships; and information about relationship abuse for educators, counselors, and service providers. https://www.loveisrespect.org/get-relationship-help-24-7-365/

Some Additional Crisis Response Partnership Opportunities for Youth Serving Organizations and Institutions

There are a wealth of resources in our communities to support young people and their families. We've listed a few below that may be meaningful to also establish some relationships/partnerships with to better support youth in our organizations/institutions.

- **Providers for people who have caused harm**: This may include treatment providers, parole/probation officers, battering intervention programs, family reunification programs, restorative justice practitioners, peer support specialists, and warmlines, among others
- Identity Specific, Culturally Specific, and Tribal Organizations: many of these organizations have dedicated violence and abuse response and prevention programs, as well as broader community supports that can ensure people are connected to their cultural communities (a factor that protects against violence and abuse).

PARTNERSHIP Q&A POINTS

Can minors consent to confidential advocacy services?

Yes. These services are available to anyone regardless of their identities, including age. Nothing in Oregon's victim-advocacy laws (including ORS 147.600) requires victims to "consent" to confidential advocacy services. Rather, the laws say that victims "seek" services and qualified victim services programs (and advocates) "provide" or "offer" services. Oregon law allows youth of certain ages the legal capacity needed to protect themselves in certain situations, like the ability to consent to varying medical services, and even enter into contracts for things like housing and protective orders to protect themselves from abuse. Confidential advocacy resources are trained to provide victims/survivors information about their legal options and resources, so ensuring access to privileged confidential advocacy can actually help young people be more successful at accessing their other rights under Oregon law.

Are privileged confidential advocates mandatory reporters of child abuse when working in K-12 schools?

Oregon's child abuse mandatory reporting laws expressly exempt qualified victim services programs from mandatory reporting obligations. Specifically, Oregon's Mandatory Reporting law excludes employees of "a qualified victim services program as defined in ORS 147.600" who provide "confidential, direct services to the victims of domestic violence, sexual assault, stalking or human trafficking." Additionally, advocate confidentiality and privilege laws in Oregon expressly prohibit the disclosure of victim information without informed, written consent. None of these laws make exceptions for when providing services to minors or in K-12 schools. It is true that "school employees" are mandatory reporters under Oregon law; however, advocates employed by a qualified victim services program, are not "school employees" when working with and within schools. A "school employee" is someone who has an employment relationship or employment contract with the school. Additionally, Oregon's mandatory reporting laws include employees of a higher education institution. Assuming advocates have no employment relationship or employment contract with schools, the same expectations for mandatory reporting do not apply to them.

What are the limits to confidentiality for advocates when it comes to other forms of violence/abuse, suicide, and if someone expresses harm they want to cause?

Oregon's victim-advocacy confidentiality and privilege laws (including ORS 147.600) along with federal law require advocates to keep the information survivors/victims share with them confidential. That being said, the job of an advocate is to provide basic crisis intervention, make referrals and direct connections to other resources (most of which are mandatory reporters), and provide other safe supports. Further it is best practice that advocates working with young people in particular are trained in suicide intervention and/or mental health first aid. This includes developing a follow-up plan with survivors/victims they are working with, connecting/bolstering connections to supports in the person's life, and making emergent/needed referalls with the consent of the victim/survivor.

PARTNERSHIP Q&A POINTS CONTINUED

What will confidential privileged advocates do if they receive a disclosure of violence or abuse?

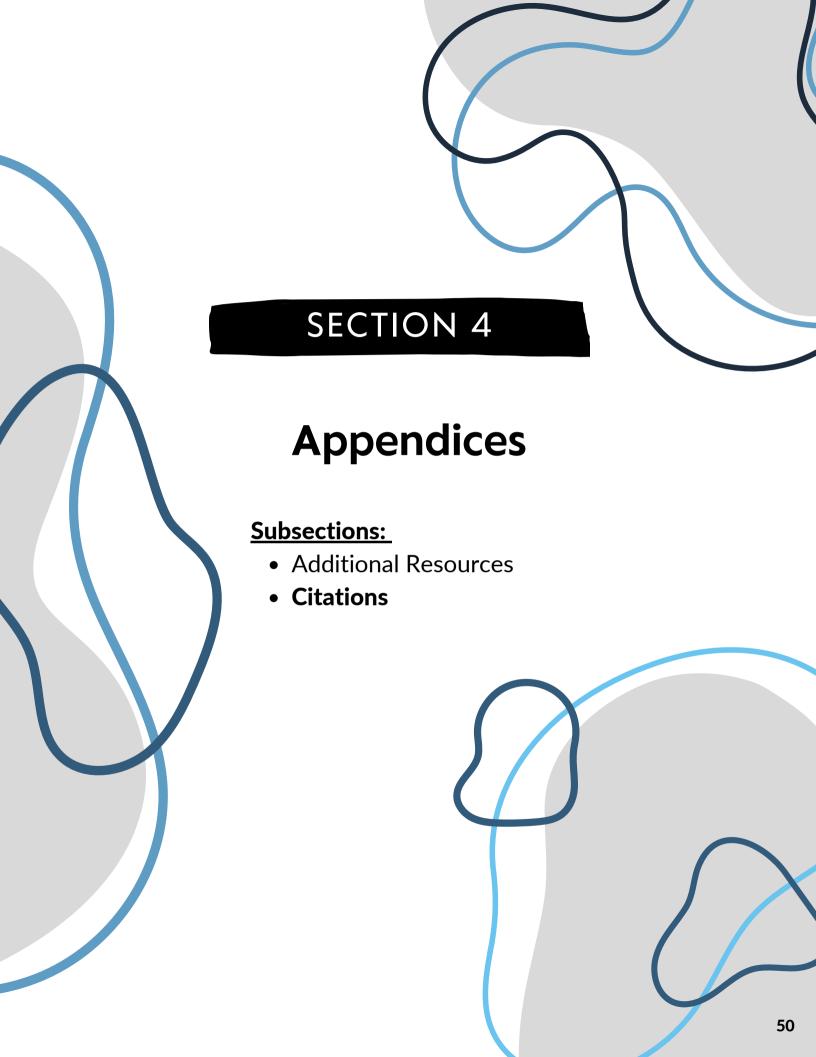
It is a confidential privileged advocates role to provide safe supports, referalls, and additional resources. One of the core foundations of this is safety planning with the young person accessing services. This could include: identifying adults, friends, and other supports the young person feels safe connecting with and/or leaning on for help - and talking through what that could look like; risk-reduction strategies to mitigate additional harm in the interim; identifying and discussing strategies to access additional health services (from physical and sexual health to mental health services); accessing financial supports when possible to access resources; strategies to set digital boundaries and limit ongoing/increasing harassment or violence; steps to self-reporting (with schools, law enforcement, Child Protective Services, etc. and submitting evidence/going-through medical evidence collection like a SANE exam; and more. This also often includes next steps planning, including setting an additional time to check in and access additional supports. As trauma can impacts ones' ability to retain/process information, follow-up meetings can be incredibly meaningful to help a survivor/victim of violence access important resources in informed, consensual, and trauma-informed ways. A young person may not choose to report or access other services in the initial meeting(s), but as they utilize advocacy services it is very likely they will engage in other services as soon as feels safe to do so. Additionally, advocates may help enable engagement with other resources/services if they have written informed consent from the survivor/victim.

Why do young people access confidential advocacy services?

Although advocates are primarily focused on providing supports related to sexual and domestic violence/abuse, harassment, dating or relationship violence/abuse, stalking, and trafficking, young people may access them to talk about a broader array of issues and experiences. This could include challenges in their friendships, navigating online safety, substance use/misuse, trouble communicating with parents and caregivers, crushes, gender identity and sexual orientation, navigating emotions, houselessness, accessing reproductive healthcare, and so much more. This is particularly true when young people do not feel like they have many adults they can go to in their lives/communities who they can share information with confidentially. When these broader issues/experiences arise in advocacy sessions, advocates provide basic information and referrals to resources/people with more expertise in those topics. This might include revisting resources/information tied to prevention programming and facilitating access to additional resources when possible.

If a young person doesn't ask for specific resources or doesn't express a specific concern, will advocates provide resources/referalls for them?

Advocacy utilizes a participant-led model, meaning the directions the conversations go in is the result of what the participant wants to talk about. Much like other supports, successful advocacy is rooted in relationship and trust-building. This means that people may choose to meet with an advocate more than once to expand/build on the types of supports they need and/or topics that they want to discuss. Advocates will reiterate in these meetings what kinds of supports/services they can provide, what a referral process might look like to additional supports, It is not up to advocates to define people's experiences. For example it is not an advocates role to define someone's relationship as abusive or unhealthy. Advocates can provide opportunities to explore tools, skills, and information, and provide additional resources for people to learn more. They can also provide opportunities for people to identify strategies and skills that may work best for them to navigate issues in their relationships. Additionally, a best practice for advocates is to have some training in suicide intervention and mental health first aid. This means that they may ask direct questions at times to learn about someone's feelings of fear/safety, discuss safety planning, and navigate options.



Additional Resources

- The <u>Oregon Minor's Privacy Toolkit FAQ</u> from Victim Rights Law Center (VRLC) offers a short (5-page) summary of Minor's Rights related to violence and abuse in Oregon. Additionally, VRLC's larger general <u>Minor's Privacy Toolkit</u> (23-pages) offers broader context and fillable worksheets to identify resources/processes specific to our individual communities/settings.
- <u>Oregon Civil Restraining Orders: SAPO, FAPA, Stalking, EPPDAPA, ERPO, and EPO</u> (4 page) chart providing an overview of access and processes for people, including youth, to access various protective orders.
- <u>Understanding Minor Consent and Confidentiality in Health Care in Oregon</u> (12 page) guide from the Oregon Health Authority

• Mandatory Reporting Resources:

- Oregon Department of Human Service's (ODHS) Mandatory Reporting of Child Abuse
 Webpage which includes an overview of mandatory reporting, and access to training and other resources.
- ODHS's Child Safety Webpage which includes resources for families, information on child welfare, and link to other local resources across Oregon.

Title IX Resources:

- Oregon Department of Education's (ODE) Civil Rights Office which includes contact information for the civil rights team at ODE, as well as the national <u>Department of Education Office of Civil Rights</u> which includes the most up-to-date Title IX regulations and information. Both of these places offer varying options for people to file a formal complaint if people in schools throughout Oregon feel that their Title IX rights have been violated.
- Some additional national Title IX resources/organizations that might be helpful include: <u>Know</u>
 <u>Your IX</u>, <u>Stop Sexual Assault in Schools</u>, <u>Break the Cycle</u>, and <u>End Rape on Campus</u>

• Prevention Resources:

- Oregon specific resources on prevention education can be found on the <u>Oregon Department of Educations (ODE)</u> Sexuality Education: Health, Safety & Wellness Program which includes tools, resources, information, and training opportunities around violence/abuse prevention as well as health promotion. This also includes links to open source lessons created by educators, youth, and community partners throughout Oregon. Youth can find additional prevention resources on <u>SATF's webpage</u>, including a summary of curricula based on how they meet Oregon's health education standards and performance indicators and Oregon best practices.
- The <u>Centers for Disease Control and Prevention</u> also offer some useful prevention resources, particularly their violence prevention technical packages which focus on: Youth Violence, Child Abuse and Neglect, Sexual Violence, Intimate Partner Violence, Adverse Childhood Experiences (ACEs), and Suicide.

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SUGGESTED CITATION

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