SEXUAL SAFETY PLAN

Name:

This agreement is designed to keep everyone safe in this family or facility. All members in this family or individuals involved my care in this facility have signed this agreement. It lists the rules for living together safely in this family, for respecting the rights, boundaries, and comfort level of others, and for ensuring the personal safety of everyone. Our signatures on the bottom acknowledge that these rules have been discussed by the individuals who live here and/or are involved in my care, that we understand these rules, that we will follow them, and that we will help each other follow these rules.

I understand that before I go into another person's bedroom, I must get permission first.

I understand that if no one is home to give me permission to enter their room, I am not to go into another person's bedroom. Even if I have permission to enter another's room, I will not go through their things.

I understand that I will not go through other people's things (backpacks, purses, etc) without their express permission, even if they are left attended in a public part of the house or living area.

I understand that other children and youth in this house or facility do not have permission to go through my things unless I give them that permission, and I can take away that permission at any time.

I understand that if one of the adults involved in my care (parent, guardian, etc.) goes through my things it will be with a specific reason that will be explained to me. Examples of when an adult may go through my belongings may include:

I understand that when visiting another person's bedroom, the door must be open.

I understand that if someone is visiting my bedroom, the door must be open.

I understand that if the adults that care for me (parents, adoptive parents, foster parents, house parents, other family members, legally authorized representatives) talk with me in my bedroom, the door must be open.

Anyone who is in my bedroom talking with me, will only sit on my bed with my permission. I can ask them to not sit on my bed at any time.

I will undress only by myself and only in the bathroom or my bedroom, and will do so with the door closed.

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I will dress appropriately around the house or living area. I will always wear a robe or t-shirt and shorts over my underclothes (underwear, undershirt, bras, and/or panties) when in other parts of the house or living area. I will not walk around without covering my underclothes or in shorts without a t-shirt.

If the door is closed, I understand that there is to be only one person in the bathroom at one time. Specific exceptions to this item are as follows:

I understand that everyone sleeps in their own bed.

I understand that children do not sleep in the same bedroom with their parents or the other adults that care for them, unless they are under a year old. Sleeping arrangements while traveling will be discussed before we go on the trip.

I understand that a child six years of age or older will not share a bed or bedroom with a person of the opposite gender.

I understand there is to be no sexual contact or sexual touching between the children/youth in this family or facility or between the adults and children/youth in this family or facility. If this contract is for a family home, the only individuals who have sex together in this home are the adult caretakers (parents, etc.) who are in a relationship together, and they were only do so with the door closed.

I understand that there will be no sexual play and sexual touching of other people, which includes playing doctor, nurse, or things like that.

I understand that all inappropriate sexualized language (reference to body parts, sexual activity) and sexualized behaviors will not be permitted.

I understand that all physical touching between family members must be kept safe and be seen as safe touching. Touching that will not confuse, scare, or make me think that someone wants to have sex with me or hurt me in any way includes:

I understand that if something that I used to enjoy as safe touching makes me uncomfortable at any point, I am allowed to ask the other person to stop and have them respect my request. I can change what I am comfortable with at any time because I am in charge of my feelings and my body.

I understand that what feels safe to me, may not feel safe to someone else and I will respect other people's safe touch boundaries and never do anything without their consent.

I understand that other people may also change their mind about what feels safe, and may ask me to stop at any point. I will respect their request. They are allowed to change what they are comfortable with at any time, because they are in charge of their feelings and their body, just like I am in charge of mine.

I understand that only *yes* means yes. That *no* does not mean yes, *maybe* does not mean yes, and silence/no answer does not mean yes. So if I ask someone if I can hug them, for example, I will not do so unless they actually say *yes*.

I understand that it is normal to touch and/or look at my own body, and that includes masturbation. I also understand that I will only do so when I have privacy (in my own room, alone, with the door closed or in the bathroom, alone, with the door closed).

I understand that children will not have access to or bring into the home any inappropriate sexually oriented materials (books, pictures, magazines, videos, images, videos, articles, stories, from the internet, etc.). Only material appropriate for sex education will be permitted and only with an adult involved in my care being present to discuss the information with me.

I understand that I will not take images or videos of myself that are sexual in nature (including nudity, partial nudity, provocative clothing or poses) or engage in video chat, texting, emailing, online messaging, or social media usage that involves discussion of sexual behaviors or sharing of sexual images or videos. I understand that doing so not only puts me at risk, but is illegal because I am a minor.

I understand that if I have questions about sex, sexuality, and/or gender I can ask one of the adults who cares for me these questions. If they don't know the answer to my question, they will make sure to find someone who can. I understand that having these questions and asking them is completely OK and normal.

I understand there is to be no showing of or touching of one's penis, vulva/vagina, anus, and/or breasts and nipples in front of other people.

I understand that my body belongs to me and if anyone touches me in a sexual way or makes me feel uncomfortable (even if I am not sure why) I will say, <u>NO</u> and will tell an adult who cares for me and/or someone "safe", e.g. school counselor, coach, therapist, teacher, etc. The adults who care for me are responsible for making sure I feel safe, and I can continue to ask for help whenever I need it and until I get it and feel safe and comfortable again. I understand that I will not get in trouble for having boundaries about my body.

I understand that by signing this plan I agree that:

- I will follow these rules of privacy (e.g. no touching of another's private parts, purses, notebooks, private notes, diaries, no opening another's mail, etc.).
- I understand that all family members/individuals I live with are responsible for following these rules and may have consequences if they do not.
- I understand that if someone is not following these rules, it is OK for me to tell one of the adults that is responsible for my care.
- I understand that I am responsible for my behavior and may have consequences if I do not follow these rules.
- I understand that if I do not follow these rules, it is OK if someone tells one of the adults that is responsible for my care.
- I understand the rules clearly. If I have any questions about any of the rules at any time, I can ask one of the adults responsible for my care.

Signed Child/Youth	Date
Signed Parent/Guardian/Caretaker	Date
Signed Parent/Guardian/Caretaker	Date
Signed Counselor/Therapist/Case Manager (if applicable)	Date
Signed Siblings/Roommates/Housemates (if applicable)	Date

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