

Safe Sanctuary at Church of the Master United Methodist- Youth Training

Introduction and Theological Rationale

Slide 2:

God calls us to make our churches safe places, protecting children and other vulnerable persons from abuse. God calls us to create communities of faith where children and adults grow safe and strong. (From The Book of Resolutions of the United Methodist Church. P.384-385) Therefore, in covenant with all United Methodist congregations, our church adopts this Safe Sanctuaries Policy (“Policy”) for the prevention of abuse of children, youth, and older/vulnerable adults.

Slide 3:

Our Christian faith calls us to offer both hospitality and protection to those who cannot protect themselves. We affirm this responsibility at each person’s baptism by our congregational response, pledging: “With God’s help we will so order our lives after the example of Christ, that this person, surrounded by steadfast love, may be established in the faith, and confirmed and strengthened in the way that leads to life eternal” (Book of Worship, Baptismal Covenant, Congregational Pledge, 105).

Slide 4:

Inclusivity

We are an inclusive church. *We celebrate everyone unconditionally as a child of God, made in God’s infinite image. Jesus calls us to love ALL people – no exceptions, no conditions. Guided by the Holy Spirit, we seek to be a church that loves and affirms all people.* Our faith calls us to offer hospitality and protection by being inclusive of all people, especially those who are vulnerable. When welcoming children, youth, and adults, all staff, leaders, and volunteers will:

- Make no assumptions about a person’s sexual orientation or identity
- Always use an individual’s preferred pronouns
- Educate themselves and train their volunteers on proper use of terminology
- Be intentional about creating a safe environment and culture by awareness and training around homophobic language and bullying

Slide 5:

Scope

This Policy shall apply to all activities sponsored by Church of the Master, regardless of location, as well as any activities utilizing its facilities.

Outside groups utilizing the Church's facilities shall be required to adhere to this policy or adopt and adhere to equivalent policies. Where the two policies are in conflict, the more conservative approach shall be taken.

Slide 6:

Youth Volunteers

Youth Volunteers serving in ministry shall:

- Be at least 12 years of age
- Be five years older than the oldest participant in the group
- Never be alone with children without an Adult

As part of the selection process, applicants must follow these steps:

1. Submit a Youth Volunteer application
2. Complete a Youth oriented Safe Sanctuaries training, which shall be retaken every three years
3. Sign the Youth Volunteer Covenant

Slide 7:

Training

Staff or lay leadership will facilitate Safe Sanctuaries training at the church, at least once a year or when requested. The Church community shall be informed of the Safe Sanctuaries training opportunities. A record of completion, and the Volunteers attending, shall be kept on file for 7 years. Every 3 years, each person working with children, youth, and vulnerable adults must be Safe Sanctuary trained (and adults must undergo a background check every 3 years).

Slide 8:

Something feels "off"- What should I do?

The purpose of our Safe Sanctuary Policy is to keep all persons safe. This means we also need to be prepared in the event of an issue regarding someone's safety. If you suspect, witness, or experience: an incident, accident, or any form of abuse, what do you do? You need to tell either the adult leader in charge of the area of ministry, an adult volunteer, or another trusted adult. These adults will then report to the Senior Pastor.

Slide 9:

What not to do

Do NOT text a friend. Do NOT record things on your phone. Do NOT post anything about the incident on social media. This is to protect all persons involved.

Slide 10:

Age Appropriate Healthy Touch

Physical affection should be appropriate to the age of the child or youth or vulnerable/older adult. For example, it is generally appropriate for a 2-year-old to sit in a nursery worker's lap and give a kiss on the cheek, but it is not appropriate for a teenager and youth leader to behave this way.

Touching should be initiated by the child or youth. It should be a response to the child or youth's need for comforting, encouragement, or affection. It should not be based upon the adult's emotional needs.

Ideally, touching and affection with children should only be given when in the presence of other children's ministry or youth workers. It is much less likely that touches will be inappropriate, or misconstrued as such, when the touching is open to observation.

Vulnerable/older adults, in particular, usually lack the physical touch that was once so vital to their beings. As we age, people feel uncomfortable touching vulnerable/older adults and we tend to not touch at all. Holding a hand, resting a hand lightly on the back or shoulder would be appropriate for these adults.

Slide 11:

- Touching behavior should not even give the appearance of wrongdoing. As ministry workers our behavior must foster trust at all times; it should be above reproach.
- Any person's preference not to be touched must be respected. Do not force affection upon a reluctant person.
- Church staff or volunteers are responsible to protect children, youth, and vulnerable/older adults under their supervision from inappropriate touching by others.
- Church staff or volunteers must promptly discuss inappropriate touching or other questionable behavior by other workers with their ministry leader or a pastor.

Report any inappropriate touch to the ministry area leader who shall report it to the Senior Pastor and follow section the response plan.

Slide 12:

Supervision

All Church activities involving Children, Youth, or Vulnerable Adults shall adhere to the following minimum requirements:

There shall be two unrelated Adults present. Unrelated adults are adults who are not: biologically related, spouses, or individuals in a cohabitating environment.

- A. The Adults may be related to participants, but not to one another. Related/married Adults may lead together, but there must be at least one more Adult present. (This requirement may be waived in the case of paid Staff.)
- B. The “Rule of Three”- There must always be a minimum of three unrelated people together for any Church event; this can be two Youth and one Adult, or one Youth and two Adults. The “Rule of Three” can be followed for ministries with Youth, grade 7 and above.

Slide 13:

If it is not possible to have two Adults always present, the activity must take place in an open space—indoors or outdoors—where other Adults are able to witness the activity and interactions of all involved. It is NOT acceptable to have only one Adult present with Children, Youth or Vulnerable Adults in a private space, or any space where other Adults are not able to witness the activities and interactions of all involved.

Slide 14:

During a Church sponsored event, one member of the Staff may provide childcare for a group of 5 Children or less. The childcare must be provided in a room where the door can be left open or there is a window in the door. There will be a Staff member “on-call” if a problem arises in the nursery.

There may be only one Adult present for Youth small groups that happen within the context of a larger program (like M&Ms) as long as that the Adult is Staff member – not a volunteer - and the door to the room is open or has a window in it.

There should be at least one Adult trained in first aid and CPR on the premises. First aid kits will be readily available, and locations shall be made known during Safe Sanctuaries training.

At no time should windows be obscured or doors locked to areas where Children, Youth or Vulnerable Adults are meeting. *Exception: Active shooter drills or incidents.*

All Leaders assisting with diaper changing, toileting, and clothes changes of Children, Youth, or Adults with special needs shall follow the guidelines as set forth in the Church's Teacher Training Manual.

All Leaders shall follow appropriate boundary guidelines as set forth in Safe Sanctuaries training.

Slide 15:

Individual Counseling

Sometimes one-on-one interactions are necessary, specifically in reference to counseling. These interactions must be conducted appropriately.

The Clergy, Staff, or lay leader shall conduct the meeting in a visible space, meaning that the office door is open or a window is visible and someone can reasonably see all persons in the room or the meeting shall take place in a public place.

Slide 16:

General Communication

Any communication via text, email, etc. between a Staff or Volunteer and Youth or Child must include that person's parent/guardian in the communication as well.

Slide 17:

Social Media

In general, our Church views social networking sites (such as Instagram, Snapchat, Facebook, and so forth), personal websites, and blogs in a positive light and as a medium for self-expression. In order to carry Safe Sanctuaries principals into the online environment, Staff and Volunteers are expected to observe the following guidelines:

- Staff and Volunteers should not submit "friend" or "follow" requests to Children or Youth
- Staff and Volunteers are free to accept or decline requests from Children and Youth to "friend" or "follow" them on social media, provided permission is received from the parent/guardian of that Child or Youth first

- Staff and Volunteers must be respectful in all communications and blogs related to or referencing the Church congregation, its members, and other Staff or Volunteers
- Staff and Volunteers must not use social media, personal websites, or blogs to harass, bully, or intimidate others
- Staff and Volunteers must not use social media, personal websites, or blogs in ways that are contrary to the mission and ministries of the church.

Staff and Volunteers must not post pictures of congregation members, other Staff or Volunteers without obtaining written permission

Slide 18:

Transportation

- In off-site events, there will be at least two or more Children, Youth, or Vulnerable Adults with an Adult driver. Each Adult driver must have an Auto-Safety Form on record with the Church office.
- Ministry activities and events involving transportation must require written and signed permission from parents or legal guardians
- When using charter buses or other contracted drivers, the carrier must provide certification that the driver has completed a background check within the last 3 years
- If Children, Youth, or Vulnerable Adults are being dropped off at different locations efforts must be made to have the last remaining Child, Youth, or Vulnerable Adult be a family member related to the vehicle driver. If this is not possible, the parent or guardian of the last Child, Youth, or Vulnerable Adult must be informed of the drop-off process and give approval for the arrangement.

Slide 19:

Off-Site and Overnight Events

Adults shall not share a bed with an unrelated Child, Youth, or Vulnerable Adult
Leaders must obtain medical information and liability release forms for all participants and keep those records on hand throughout the off-site activity or overnight event
Leaders shall provide parents or guardians with specific information regarding the schedule, sleeping arrangements, leader-to-participant ratio, and emergency contact information.

Slide 20:

Contextually Appropriate Awareness and Etiquette Around:

- LGBTQ+ Inclusion
- Persons with Disabilities
- Mental Health
- Persons with Dietary Restrictions
- Transfers & Mobility Assistance
- Medical Events & First Aid

Slide 21:

LGBTQ+ Inclusion

LGBTQ+ inclusion awareness and etiquette focuses on affirming each person's identity, welcoming all people, and treating individuals with respect and dignity.

Slide 22:

Core Concepts & Terminology

- **Sexual Orientation:** Who you are attracted to (e.g., lesbian, gay, bisexual, straight).
- **Gender Identity:** An internal, deeply held sense of one's gender (e.g., woman, man, non-binary).
- **Gender Expression:** How a person presents their gender outwardly (e.g., clothing, hair, behavior).
- **Transgender:** An umbrella term for people whose gender identity differs from the sex they were assigned at birth.
- **Ally:** Someone who supports and advocates for the LGBTQ+ community.

Etiquette & Best Practices

- **Pronouns:** Share your own (e.g., in email signatures or introductions) to normalize it, and ask for others' pronouns rather than assuming.
- **Mistakes:** If you use the wrong pronoun or name, apologize briefly, correct yourself, and move on.
- **Confidentiality:** Never "out" someone's sexual orientation or gender identity to others.
- **Respectful Curiosity:** Do not ask personal questions about anatomy, medical procedures, or previous names ("deadnaming").

- **Language:** Use gender-neutral terms when unsure (e.g., "folks" or "everyone" instead of "ladies and gentlemen").

Being an Active Ally

- **Correct Others:** Gently correct colleagues if they use incorrect pronouns or names for someone.
- **Challenge Homophobia/Transphobia:** Intervene or report derogatory comments or jokes to the ministry leader or Senior Pastor
- **Self-Education:** Take the burden off LGBTQ+ individuals by researching topics yourself.

Slide 23:

Persons with Disabilities

Disability awareness etiquette focuses on treating individuals with respect, dignity, and independence.

Slide 24 & 25:

- **Ask Before Helping:** Do not assume help is needed. If you offer, wait until it is accepted, then listen to instructions.
- **Speak Directly:** Address the person with a disability directly, even if they have an interpreter or companion present.
- **Respect Personal Space:** Treat wheelchairs, canes, scooters, and service animals as extensions of a person's personal space—do not touch or move them without permission.
- **Use Person-First Language:** Focus on the individual, not the disability. Say "person with a disability" rather than "disabled person." Note: caution against emphasizing first-person language too much. Within some communities there are some pretty strong debates about the use of person first vs identity first language. Some individuals prefer identity first because their disability is such an important part of who they are. It might be better to include something about starting with person first language but then taking the lead of the individual and using their preference.
- **Be Patient with Communication:** If you do not understand, ask them to repeat, rather than pretending to understand.
- **Don't Ask Personal Questions:** Avoid asking about a person's disability unless they bring it up. It is often private information.

- **Avoid Condescending Behavior:** Treat adults as adults. Do not treat people with disabilities with pity or as children

Interacting with Specific Disabilities

- **Mobility Disabilities:** If a conversation lasts more than a few minutes, sit (if possible) to speak at eye level.
- **Visual Impairments:** Identify yourself when entering a room. If guiding, offer your arm rather than taking theirs.
- **Hearing Impairments:** Gain their attention, perhaps with a light tap on the shoulder, before starting to talk. Face them directly.
- **Speech Impairments:** Listen patiently. Do not finish their sentences.
- **Service Animals:** Do not feed, pet, or distract a service animal; they are working.

Common Misconceptions

- **Assume competence:** Do not underestimate someone's abilities.
- **It's okay to use common phrases:** Phrases like "see you later" or "gotta run" are perfectly fine to use with people with visual or mobility disabilities.
- **If unsure, ask:** It is okay to ask what makes them comfortable if you are unsure of how to behave

Note: Not every disability is visible. Many people live with chronic pain, fatigue, mental health conditions, or neurodivergence (such as Autism or ADHD). Because you cannot "see" these challenges, etiquette relies on believing the individual and assuming competence.

Slide 26:

Mental Health

Mental health awareness and etiquette centers on empathy, active listening, and reducing stigma by using person-centered language.

Slide 27:

- **Use Person-Centered Language:** Focus on the person, not the diagnosis. Instead of "he is schizophrenic," say "he is living with schizophrenia".
- **Listen and Validate:** Believe what they share without interruption or judgment. Use phrases like, "I can understand how frustrating that must be," or "Thank you for sharing that with me".
- **Ask, Don't Assume:** Ask how you can help or if they want to talk in detail. Not everyone wants to discuss their challenges at length.

- **Respect Privacy and Boundaries:** Choose a private place for conversations (while still following Safe Sanctuary guidelines) and avoid forcing people to talk about things they are not ready to share.
- **Avoid Dismissive Phrases:** Do not say "calm down," "you'll be okay," "what do you have to be sad about," or "this happened to me too".
- **Do Not Diagnose:** Avoid trying to diagnose or suggest solutions unless you are a professional.
- **Normalize the Conversation:** Treat mental health with the same seriousness as physical health and bring it up without shame.

What to Do If Someone Opens Up:

- **Offer Practical Support:** Ask, "How can I support you?" or "What do you need?".
- **Follow Up:** Check in with them a few days later to show you care.
- **Suggest Resources:** Encourage professional help, such as a GP or therapist, and connect them to one of the pastors to help them find the care they are seeking.

Slide 28:

Do NO Harm: Use "And" not "But"

When validating, use "and" to acknowledge two feelings at once, rather than "but" which can minimize their feelings. Such as: If someone says "I'm really feeling anxious right now; I need a moment." It is helpful to respond with "I understand that you are feeling anxious and it is ok to take a moment." DO NOT respond with "I understand you are feeling anxious right now, BUT all your friends want you to join them to have fun." While both of these statements can be true, the "But" signifies that the second part of the statement is more important than the way the person is feeling. People want their feeling validated. Your response should be about them.

Slide 29:

Persons with Dietary Restrictions

Dietary restriction awareness and etiquette focuses on treating individuals with respect and mindful hospitality, to ensure that all are welcome and will be fed at the table.

Slide 30:

- **Ask in Advance:** When planning food for an event, proactively ask about restrictions, e.g., "Are there any dietary restrictions I should be aware of?".

- **Don't Ask for Private Details:** Avoid asking if someone has "health issues," just focus on what they can and cannot eat.
- **Provide Options:** Try to include at least one dish everyone can eat, rather than separating out a single guest.
- **Label Food:** If hosting a buffet, put small cards identifying ingredients (e.g., "vegan," "contains nuts").
- **Communicate the Menu:** Let people know what is being served so they can prepare to bring a supplement if necessary.
- **Keep it Simple:** Don't stress or try to remake the entire menu. A simple meal with one safe option is better than a stressed host.
- **Communicate with Clarity:** Do not downplay a severe allergy as just a "preference," and try not to treat a minor preference as a severe allergy. Clarify what the dietary needs are and how you can help make sure they will be included in the mealtime without unnecessary public attention.
- **Do not Pass Judgement:** Do not criticize someone or act inconvenienced by a person's dietary needs.

Slide 31:

Transfers and Mobility Assistance

Transfer and mobility assistance awareness and etiquette helps people maintain safety, dignity, personal boundaries, and agency while receiving help.

Slide 32:

- **Ask First, Then Listen:** Never assume help is needed. Ask, "How can I best assist you?".
- **Communicate Clearly:** Explain each step of the transfer before acting.
- **Respect Autonomy:** Encourage the person to do as much as they can to maintain independence.
- **Positioning:** Position wheelchairs at a 45 degree angle to the bed or chair and lock the brakes.
- **Protect Joints:** Never pull on a person's arms, shoulders, or neck.

Transfer Techniques

- **Use a Gait/Transfer Belt:** Use a transfer belt for safe lifting, which provides sturdy handles to hold onto, rather than grabbing under the arms.
- **Body Mechanics for Helpers:** Keep your back straight, bend at your knees, and use a wide stance. Move your feet instead of twisting your torso.
- **Plan the Move:** Clear the area of obstacles (rugs, cables) and ensure transfer surfaces are prepared.
- **Pivot Transfers:** For individuals who can stand, use a pivot technique, allowing them to turn and sit back onto the new surface.
- **Car Transfers:** Seat the person in the front passenger seat. Position the walker/wheelchair close, have them sit down first, then help lift their legs into the car.

Mobility Assistance

- **Walk Beside and Behind:** When assisting with walking, stand on the person's weaker side, slightly behind them.
- **Avoid Rushing:** Take your time; rushing is a primary cause of falls.
- **Watch for Pain:** Constantly check if the person is in discomfort.

Safety Guidelines

- **Use Equipment:** Use slide boards, lifts, or walking frames as necessary.
- **Know Your Limits:** Stop and seek help if a transfer requires more strength than you can safely provide.
- **Stability:** Ensure the person is wearing stable shoes with good treads

Slide 33:

Medical Events and First Aid

Medical events and first aid awareness and etiquette focuses on treating individuals with safety, respect, support, and dignity as they face a difficult situation.

Slide 34:

- **Check, Call, Care:** Assess the scene for safety, call 911 immediately for serious issues, and care for the person.

- **Obtain Consent:** Ask for permission to help if the person is conscious. If unconscious, consent is implied.
- **Stay Calm and Respectful:** Provide a calm presence, remain nonjudgmental and supportive.
- **Protect Privacy:** Create a barrier around the patient to give them privacy from crowd onlookers.
- **Do Not Move Injured Persons:** Avoid moving someone with potential head, neck, or back injuries.
- **Don't Give Medication:** Do not offer medication (even over-the-counter) or food/drink, as this can cause choking.
- **Serious Emergencies: IF TRAINED-** Initiate CPR or use an AED for unresponsiveness and lack of breathing.

Slide 35:

Conclude this training by taking the online quiz.

Online quiz: <https://forms.gle/wj9eL9TMoAvAuVQG8>

SESSION 1: Youth Training



SAFE SANCTUARY



Why?

God calls us to make our churches safe places, protecting children and other vulnerable persons from abuse. God calls us to create communities of faith where children and adults grow safe and strong. Therefore, in covenant with all United Methodist congregations, our church adopts this Safe Sanctuaries Policy for the prevention of abuse of children, youth, and older/vulnerable adults.

Baptismal Covenant



Our Christian faith calls us to offer both hospitality and protection to those who cannot protect themselves. We affirm this responsibility at each person's baptism by our congregational response, pledging: "With God's help we will so order our lives after the example of Christ, that this person, surrounded by steadfast love, may be established in the faith, and confirmed and strengthened in the way that leads to life eternal"

(Book of Worship, Baptismal Covenant, Congregational Pledge, 105).



Inclusivity

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- Make no assumptions about a person's sexual orientation or identity
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- Educate themselves and train their volunteers on proper use of terminology
- Be intentional about creating a safe environment and culture by awareness and training around homophobic language and bullying



Scope

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Youth Volunteers

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- Be five years older than the oldest participant in the group
- Never be alone with children without an Adult

As part of the selection process, applicants must follow these steps:

1. Submit a Youth Volunteer application
2. Complete a Youth oriented Safe Sanctuaries training which shall be retaken every three years
3. Sign the Youth Volunteer Covenant



Safe Sanctuary Training



A record of completion and the Volunteers attending shall be kept on file for 7 years.



Every 3 years, each person working with children, youth, and vulnerable adults must:

1. Be Safe Sanctuary trained
2. Undergo a background check



Something feels “off”- what should I do?

If you suspect, witness, or experience: an incident, accident, or any form of abuse, what do you do?

Tell either the adult leader in charge of the area of ministry, an adult volunteer, or another trusted adult.

The trusted adult will then report this to the Senior Pastor.



What NOT to do.

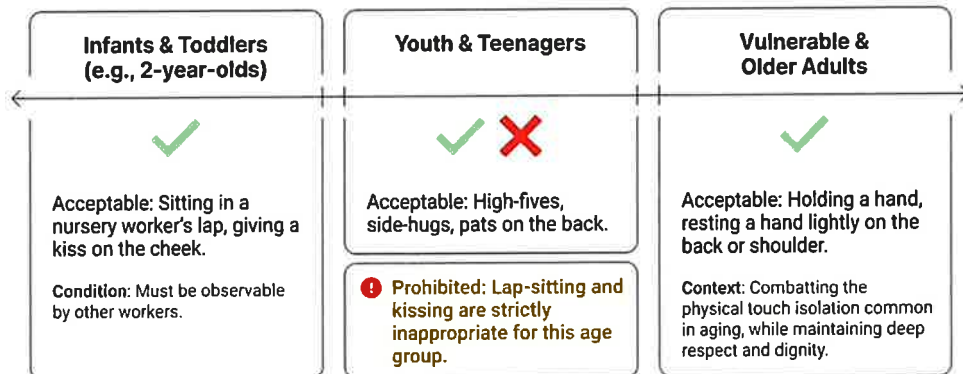
If you suspect, witness, or experience: an incident, accident, or any form of abuse:

- Do NOT text a friend about it
- Do NOT record it with your phone
- Do NOT post anything on Social Media



Age Appropriate Healthy Touch

The Age-Appropriate Touch Spectrum





✓ **Child-Initiated:** Touch must be a response to the child/youth's need for comfort or encouragement.

✓ **Peer Accountability:** Promptly discuss any questionable behavior by other workers with a ministry leader or pastor.

✗ **Adult-Driven Needs:** Touch must never be based upon the adult's emotional needs.

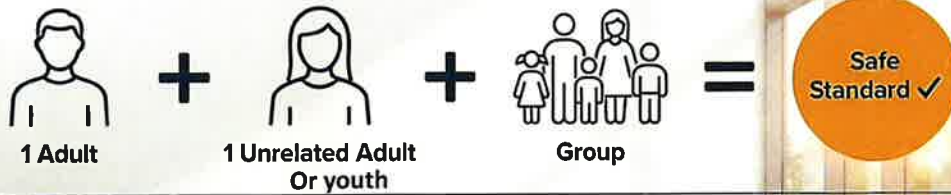
✗ **Appearance of Wrongdoing:** Behavior must foster trust at all times and remain above reproach.

✗ **Forced Affection:** Never ignore a child, youth, or adult's reluctance to be touched.

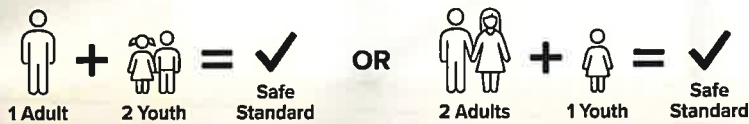


Supervision

The baseline requirement for any church activity is the presence of two unrelated adults. or one unrelated adult and one unrelated youth.



The Rule of Three for Grade 7+



Are the adults married or related? You must add +1 unrelated adult to the equation. (Note: This requirement may be waived for paid Staff).

If it is not possible to have two adults always present, the activity must take place in an open space.

It is **NOT acceptable** to have only one adult present with children, youth or vulnerable adults in a private space, or any space where other adults are not able to witness the activities and interactions of all involved.



During a church-sponsored event



Nursery Care

Ratio: 1 Staff to 5 Children maximum.

Environment: Door must remain open or feature a visible window.

Support: A designated staff member must be "on-call" for emergencies.



Youth Small Groups

Ratio: 1 Adult is permitted IF they are a Staff member (not a volunteer).

Environment: Room door must be open or have an unobstructed window.



Special Needs

Action: Diaper changing, toileting, and clothes changes.

Protocol: Strictly follow the guidelines set forth in the Church's Teacher Training Manual.

At no time should windows be obscured or doors locked to areas where Children, Youth or Vulnerable Adults are meeting. Exception: Active shooter drills or incidents.

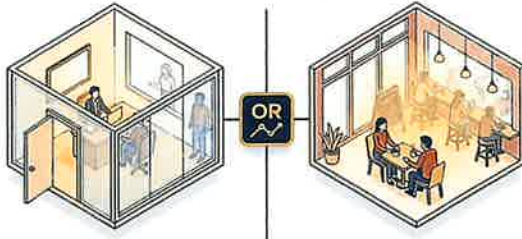


Individual Counseling

The Visibility Balance in Individual Counseling

One-on-one interactions are sometimes necessary for pastoral care, but they must never happen in the dark. All clergy must abide by Ohio law (ORC 4757.41) regarding pastoral counseling.

The Setup



The Rule

The meeting must take place in a public space
OR an office where someone can reasonably see all persons in the room.

#9 NotebookLM






Communication

Any communication via text, email, etc. between a staff or volunteer and youth or child must include that person's parent/guardian in the communication as well.



Navigating Social Media Boundaries

Social networking is a positive medium for self-expression, provided we carry our Safe Sanctuary principles into the online environment.

	DO NOT	Submit "friend" or "follow" requests to Children or Youth. Use platforms to harass, bully, or intimidate. Post anything contrary to the mission and ministries of the church.
	ASK FIRST	Accept inbound requests from youth (requires parent/guardian permission first). Post pictures of congregation members, staff, or volunteers (requires written permission).
	DO	Be respectful in all communications. Remember that if you identify as an employee online, readers view you as a church representative.



Transportation



Departure: Minimum 2+ Participants + Adult Driver.
Driver must have an Auto-Safety Form on record and written/signed parent permission.



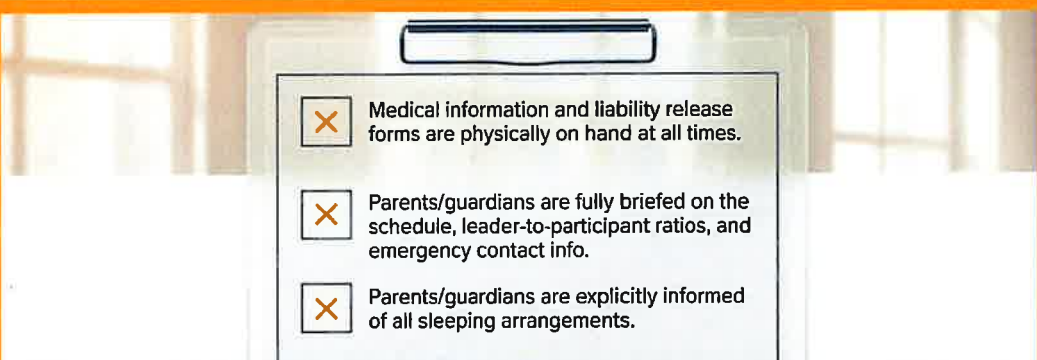
Third-Party Transit:
Using a charter bus? The carrier must certify the driver has passed a background check within the last 3 years.



The Final Stop (The Last Drop-Off Rule): The last remaining participant in the vehicle **MUST** be related to the driver.
If impossible, the parent/guardian must be informed of the drop-off process and grant pre-approval.



Off-Site & Overnight Events

- 
- ✗ Medical information and liability release forms are physically on hand at all times.
 - ✗ Parents/guardians are fully briefed on the schedule, leader-to-participant ratios, and emergency contact info.
 - ✗ Parents/guardians are explicitly informed of all sleeping arrangements.

“Under no circumstances shall an Adult share a bed with an unrelated Child, Youth, or Vulnerable Adult.”

Contextually appropriate awareness and etiquette

- LGBTQ+ Inclusion
- Persons with Disabilities
- Mental Health
- Persons with Dietary Restrictions
- Transfers & Mobility Assistance
- Medical Events & First Aid

LGBTQ+ inclusion awareness and etiquette focuses on affirming each person's identity, welcoming all people, and treating individuals with respect and dignity.



LGBTQ+ Inclusion



Vocabulary Flashcards

Sexual Orientation: Who you are attracted to (e.g., lesbian, gay, bisexual, straight).

Gender Identity: An internal, deeply held sense of one's gender (e.g., woman, man, non-binary).

Gender Expression: How a person presents their gender outwardly (clothing, hair, behavior).

Transgender: Gender identity differs from the sex assigned at birth.

Ally: Someone who supports and advocates for the LGBTQ+ community.

Actionable Checklist

- ✓ **Normalize Pronouns:** Share your own to normalize it; ask rather than assuming.
- ✓ **Handle Mistakes Gracefully:** If you use the wrong pronoun/name, apologize briefly, correct yourself, and move on.
- ✓ **Maintain Confidentiality:** Never "out" someone's sexual orientation or gender identity.
- ✓ **Exercise Respectful Curiosity:** Do not ask personal questions about anatomy, medical procedures, or "deadnames".
- ✓ **Be an Active Ally:** Gently correct colleagues who use incorrect pronouns, and challenge/report homophobia or transphobia.



Disability awareness and etiquette focuses on treating individuals with respect, dignity, and independence.



Disability Awareness & Etiquette

Vocabulary Flashcards

Person-First Language: Focus on the individual, not the disability.

Extensions of Space: Wheelchairs, canes, scooters, and service animals are personal space. Do not touch or move them.

Working Animals: Service animals are on the job. Do not feed, pet, or distract them.

Assumed Competence: Do not underestimate someone's abilities or treat adults with pity.

Actionable Checklist

- ✔ **Ask Before Helping:** Never assume help is needed. Offer, wait for acceptance, then listen to instructions.
- ✔ **Speak Directly:** Address the person directly, even if an interpreter or companion is present.
- ✔ **Adjust Positioning:** If a conversation lasts more than a few minutes with a wheelchair user, sit or kneel to speak at eye level.
- ✔ **Communicate Patiently:** If you do not understand someone with a speech impairment, ask them to repeat. Do not finish their sentences.
- ✔ **Gain Attention Properly:** For hearing impairments, gain attention (e.g., a light tap on the shoulder) and face them directly before speaking.

Do No Harm

Diagnostic Matrix: Help vs. Harm

Good Intention Gone Wrong (Harm)	Empowering Action (Help)
Situation: Visual Impairments	
Grabbing the person's arm to steer them.	Identify yourself upon entering. Offer your arm for them to take.
Situation: Speech Impairments	
Finishing their sentences to save them time.	Listening patiently without interrupting.
Situation: Everyday Conversation	
Awkwardly avoiding phrases like "see you later" or "gotta run" around disabled individuals.	Using common phrases naturally; treating them as you would anyone else.
Situation: Uncertainty	
Guessing what they need and acting without permission.	Admitting you are unsure and asking, "What makes you most comfortable?"



Mental health awareness etiquette centers on empathy, active listening, and reducing stigma by using person-centered language.



Mental Health

Vocabulary Flashcards

Person-Centered Language: Focus on the person, not the diagnosis.

Active Validation: Believing what they share without interruption or judgment.

Normalization: Treating mental health with the same seriousness as physical health, without shame.

Actionable Checklist

- ✔ **Listen & Validate:** Say, "I can understand how frustrating that must be," or "Thank you for sharing."
- ✔ **Ask, Don't Assume:** Ask how you can help. Not everyone wants to discuss challenges at length.
- ✔ **Respect Boundaries:** Never force disclosure. If the conversation requires privacy, you must still follow all Safe Sanctuary Guidelines.
- ✔ **Avoid Dismissive Phrases:** Do not say "calm down," "you'll be okay,"
- ✔ **Do Not Diagnose:** Do not suggest solutions unless you are a professional.
- ✔ **Offer Practical Support & Follow Up:** Ask "What do you need?", check in a few days later, and suggest professional resources.



Do No Harm

The Validation Scale: 'And' vs. 'But'

"I understand you are feeling anxious right now, ~~BUT~~ all your friends want you to join them."

The word 'But' mathematically deletes the first half of the sentence. It signals that the second part is more important than the person's feelings.



"I understand that you are feeling anxious, **AND** it is ok to take a moment."

The word 'And' holds two emotional truths in equal balance. It validates the feeling while focusing the response entirely on the person.



Dietary restriction awareness and etiquette focuses on treating individuals with respect and mindful hospitality, to ensure that all are welcome and will be fed at the table.



Dietary Restrictions

Vocabulary Flashcards

Mindful Hospitality: Ensuring all are welcome and fed at the table without feeling like a burden.

Safe Options: Providing at least one inclusive dish rather than separating a single guest.

Clear Labeling: Using small ingredient cards (e.g., “vegan,” “contains nuts”) on buffets.

Actionable Checklist

- ✔ **Ask in Advance:** Proactively ask, “Are there any dietary restrictions I should be aware of?”
- ✔ **Protect Private Details:** Do not ask if someone has “health issues”; focus strictly on what they can/cannot eat.
- ✔ **Communicate Clarity:** Never downplay a severe allergy as a “preference,” and avoid treating a minor preference as a severe allergy.
- ✔ **Communicate the Menu:** Allow people to prepare or bring a supplement if necessary.
- ✔ **Keep it Simple & Judgment-Free:** Do not stress, remake the entire menu, act inconvenienced, or draw unnecessary public attention to their needs.



Transfer and mobility assistance awareness and etiquette helps people maintain safety, dignity, personal boundaries, and agency while receiving help.



Transfer & Mobility Assistance

Vocabulary Flashcards

Autonomy: Encouraging the person to do as much as they can to maintain independence.

Gait/Transfer Belt: A belt providing sturdy handles for safe lifting, avoiding grabbing under arms.

Joint Protection: The strict rule to never pull on a person's arms, shoulders, or neck.

Pivot Transfer: A technique for those who can stand, allowing them to turn and sit on the new surface.

Actionable Checklist

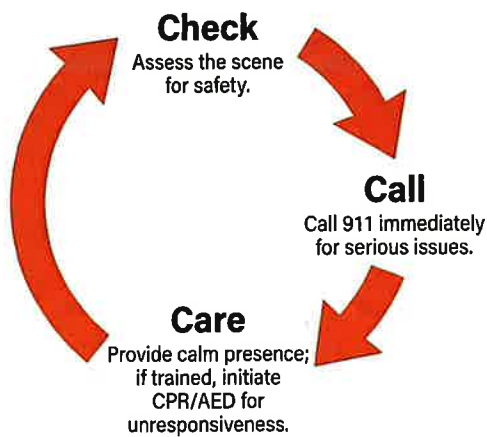
- ✔ **Communicate Clearly:** Explain each step of the transfer before acting.
- ✔ **Walking Assistance:** Stand on the person's weaker side, slightly behind them.
- ✔ **Pacing & Pain:** Do not rush (rushing causes falls); constantly check if they are in discomfort.
- ✔ **Car Transfers:** Seat them in the front passenger seat. Have them sit down first, then help lift their legs into the car.
- ✔ **Know Your Limits:** Stop and seek help if a transfer requires more strength than you can safely provide.



Medical events and first aid awareness and etiquette focuses on treating individuals with safety, respect, support, and dignity as they face a difficult situation.



Medical Events & First Aid



Actionable Checklist

- ✔ **Obtain Consent:** Ask for permission if conscious. If unconscious, consent is implied.
- ✔ **Protect Privacy:** Create a physical barrier around the patient to shield them from crowd onlookers.
- ✔ **Do Not Move:** Never move someone with potential head, neck, or back injuries.
- ✔ **Restrict Intake:** Do not offer medication (even over-the-counter), food, or drink, as this poses a severe choking hazard.
- ✔ **Stay Calm:** Remain a supportive, nonjudgmental presence throughout the event.

Only perform CPR or use an AED if you are trained!



**Conclude this
training by taking
the quiz online!**

