



*Community Youth Volunteer Empowerment*

# TOOLKIT

sponsored through **Canada Volunteerism Initiative** **Volunteer Canada**

# Community Youth Volunteer Empowerment Toolkit

created by youth volunteers of the  
Youth Peer Transformation Program



sponsored through the  
*Canada Volunteerism Initiative*  
**Volunteer Canada**

and spearheaded through the  
partnership of 14 community organizations by

Educational Program Innovations Charity Society

[www.epiccharity.com](http://www.epiccharity.com)

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## Youth Volunteer Writer Profiles



Hello, my name is **Jocelyn Lewis** and I am currently a grade 12 student at Riverview Rural High School. My favorite pastimes include soccer, running and skiing. In my spare time I like being with my friends and being outside. I have been volunteering this year with the Youth Peer Program. My topic was Cutting and Self-Mutilation.



Hello, my name is **Amanda Burt** and I am a graduating student from Holy Angels High School. Next year I plan on attending the University College of Cape Breton where I hope to obtain my Bachelor of Arts degree. In my spare time I enjoy volunteering in the community as well as spending time with friends. I have been volunteering with the Youth Peer Program for one year. My topic was Eating Disorders.



Hello, my name is **Brenda Moore** and I am a grade 12 student at Holy Angels High School. I plan to attend university next year. I enjoy spending time with friends and I enjoy tutoring with the Youth Peer Program. I have been volunteering since the fall of 2003. I wrote on the topic of Obsessive-Compulsive Disorder and co-wrote the section about Depression.



Hi, my name is **Janice McDonald**. I am a third year Bachelor of Arts Community Studies student with a major in Psychology. I will be graduating in 2005 from the University College of Cape Breton. I have been volunteering this year with the Youth Peer Program. I wrote the article on Suicide and co-wrote the topic of Depression.



My name is **Meghan Wilson** and I am a first year student at the University College of Cape Breton. I am enrolled in the Bachelor of Arts Program with a Major in Biology. In the future I plan on becoming a teacher. This is my first year as a volunteer tutor at Youth Peer Program. My Toolkit topic was Parental Abuse.



My name is **Cathy MacInnis**. I am a fourth year student at the University College of Cape Breton. I am graduating with a Bachelor of Arts degree with a major in English this year. I plan on obtaining my Bachelor of Education degree in the fall. I have been volunteering with the Youth Peer Program this year. I wrote the articles on Attention Deficit Hyperactivity Disorder and Dyslexia.



My name is **Amanda MacPherson**. I am a grade 12 student at Sydney Academy high school in Sydney, Nova Scotia. Next year I plan on enrolling in the Bachelor of Arts program at the University College of Cape Breton. My future goal is to become a teacher. I have been volunteering at the Youth Peer Program this year. My topic was Conflict Resolution.



My name is **Beth Andrews**. I am a third year student at the University College of Cape Breton. I will be graduating this year with my Bachelor of Arts degree with a concentration in French. I plan on pursuing a degree in Education next fall. I have been volunteering in various forms of the Youth Peer Program for 6 years. My write-up is on Bullying.



My name is **Sara Beth Unsworth**. I am a 4<sup>th</sup> year student at the University College of Cape Breton. I will be graduating this year with a Bachelor of Science Degree with a major in Biology. I have been volunteering this year with the Youth Peer Program. I have also assisted with camps for youth at the university while a member of the Varsity Volleyball Team. I wrote about Positive Role Models.



My name is **Vanessa Brown** and I am attending Holy Angels High School in Sydney, Nova Scotia. I will be graduating in 2004. I plan to take a year off in the fall to travel the Maritimes painting the many beautiful scenes. This is my first year as a peer tutor. If I settle in Sydney, I will definitely come back to tutor at the Youth Peer Program. My Toolkit topic was Anger Management.



My name is **Shannon Oldham** and I am currently attending Holy Angels High School in Sydney, Nova Scotia. This June I will be graduating. Next fall, I plan to attend Memorial University in Newfoundland. I will be pursuing a Bachelor of Arts Degree with a major in English. My ultimate goal is to become a teacher so I will be pursuing my Bachelor of Education. This is my first year volunteering as a tutor and I enjoy it very much. Next year I plan on getting involved in similar activities while in Newfoundland. I wrote in the Toolkit on Self-Esteem.



**Naomi McLean** - I graduated from Breton Education Center in 2002. I am currently attending Marconi Campus of the Nova Scotia Community College. I am taking the Human Services Program. Next year I am continuing my education in Child and Youth Counseling. I have been volunteering this year with the Youth Peer Program. My articles were about Alcoholism and Schizophrenia.



**Allyson Dunlop** - I live in Sydney River, Cape Breton, Nova Scotia. I enjoy painting, swimming, tutoring and spending time with friends. I am in my first year at the University College of Cape Breton, studying in the Bachelor of Arts in Community Studies Program. I have enjoyed volunteering at the Youth Peer Program this year. In the future I plan on becoming a social worker. My Toolkit topic was Body Image.



**Meaghan Grant** - In May of 2004, I will be graduating from the University College of Cape Breton with my Bachelor of Arts Degree in Community Studies and a certificate in Social Services. My future plans are to become a social worker. I enjoy Cape Breton Celtic music as well as stepdancing, playing the fiddle and piano. I have been volunteering with Youth Peer Program in 2003 and 2004. I wrote the two sections on Gender Identity and on the topic of Peer Pressure.



**Craig Ryan** - I am a graduate of the University College of Cape Breton with a Bachelor of Arts in Community Studies with a Political Science Major. I am currently employed as a Program Assistant with the Youth Peer Program and I was a volunteer with the program initially. My other volunteer work includes: World Junior Hockey Championship 2003, Junior Achievement Canada - Economics of Staying in School, Cape Breton Minor Hockey Association and Salvation Army's Intensive Support and Supervision Program. I plan to pursue a Bachelor of Education in September. I wrote on the topic of Marijuana Abuse.



**Lyndsay Hollahan** - I am from Sydney and am a fourth year student at the University College of Cape Breton. I will be graduating with a Bachelor of Science Degree, major in Biology. I have been accepted into the Bachelor of Education Program at St. Francis Xavier in Antigonish, Nova Scotia. After obtaining my BEd, I plan to eventually pursue a career in medicine. I have been volunteering with the Youth Peer program for 2 years. I wrote about Cultural Sensitivity in the Toolkit.



My name is **Emily King** and I am currently attending the University College of Cape Breton and am in my second year of the Bachelor of Arts Community Studies program. My future plans include a Masters of Social Work and hopefully, becoming a social worker in the local area. I wrote the article on Pregnancy and Safe Sex.



My name is **Maggie Mombourquette** and I am currently attending Holy Angels High School in Sydney, Cape Breton, Nova Scotia where I will graduate from in 2004. My future plans include obtaining my Bachelor of Arts Degree with a double major in History and Sociology from St. Thomas University in New Brunswick, and also obtaining my Masters and PhD, to develop my career as a university professor. My Toolkit topic was Racism.



Hello, my name is **Suzanne Ranni**. I am graduating from the University College of Cape Breton in May 2004 with a Bachelor of Arts Degree / major in English. I plan on pursuing a career in education and am considering employment in the area of guidance counseling. I have been volunteering with Youth Peer Program for 2 years. I wrote about Child Abuse.

Community Youth Volunteer Empowerment Toolkit

## Acknowledgments

The Community Youth Volunteer Empowerment Toolkit is the product of youth volunteers engaged in the Youth Peer Transformation Program working with youth at-risk in the Cape Breton Regional Municipality in Nova Scotia from September 2003 through March 2004. We gratefully acknowledge the many contributors to the fine work of the Toolkit and the enhancements to the community provided by the program's volunteers.

We first want to thank our sponsors who have believed in our goals and provided the financial support for us to achieve them:

- **Volunteer Canada**
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- **Cape Breton Employability Partnership**
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- Cape Breton University Career Services
- Membertou Education
- Black Educators Association
- Salvation Army
- Sydney Deanery Youth Ministry
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- ✧ Janet Steele ✧ Blake MacLean ✧ Meaghan Grant ✧ Janice McDonald ✧ Emily King

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Community Youth Volunteer Empowerment Toolkit  
**Table of Contents**

*YOUTH VOLUNTEER TOOLKIT*

Toolkit Introduction.....	1
Volunteer Writings on Youth At-Risk.....	3-60
Alcoholism.....	3
Anger Management.....	5
Attention Deficit Hyperactivity Disorder.....	8
Body Image.....	11
Bullying.....	13
Child Abuse.....	16
Conflict Resolution.....	19
Cultural Sensitivity.....	21
Cutting & Self Mutilation.....	23
Depression.....	25
Dyslexia.....	27
Eating Disorders.....	29
Gender Identity - Gay.....	31
Gender Identity - Lesbian.....	33
Marijuana Abuse.....	35
Obsessive Compulsive Disorder.....	38
Parental Abuse.....	40
Peer Pressure.....	43
Positive Role Models.....	45
Pregnancy & Safe Sex.....	47
Racism.....	52
Schizophrenia.....	54
Self Esteem.....	56
Suicide.....	58
Toolkit Topic Template.....	61

Community Youth Volunteer Empowerment Toolkit

**Table of Contents**

*YOUTH VOLUNTEER SUPPORT*

Youth Volunteer Guidelines and Forms..... 63-73

- Youth Volunteer Staff Support Procedures..... 63
- Youth Volunteer Application..... 65
- Youth Volunteer Training Outline..... 66
- Youth Volunteer Training Roleplays..... 68
- Youth Volunteer Training Evaluation..... 73

*CODE FOR VOLUNTEER INVOLVEMENT*

Volunteer Program Components..... 75-79

- Introduction..... 75
- Executive Support..... 76
- Policy & Procedure Support..... 76
- Effective Coordination..... 76
- Proactive Recruitment..... 77
- Consistent Screening..... 77
- Practical Orientation and Training..... 77
- Meaningful Assignments..... 78
- Appropriate Supervision..... 78
- Planned Feedback..... 79
- Valued Treatment..... 79
- Regular & Special Recognition..... 79

*JOB DESIGN FOR VOLUNTEERS*

Volunteer Program Components..... 80-82

- Introduction..... 80
- Mandate Clarification..... 80
- Necessary Task Identification..... 80
- Quality & Skill Requirements..... 81
- Assignment Expectations..... 81
- Matching & Feedback..... 82

# Community Youth Volunteer Empowerment Toolkit

## Introduction

by Rachelle Wilson

*Volunteer Resource Developer, Youth Peer Transformation Program*

Youth Peer Transformation is a program which provides volunteer tutoring services and other extracurricular activities for at-risk youth in Cape Breton, Nova Scotia. Youth are referred by fourteen community partner agencies who prioritize which kids they consider to be at-risk. The volunteer mentor / tutors are recruited from the local university and high schools. The participants receive one hour of tutoring and one and a half hours of art, music, and other social activities five days per week. The activities focus on developing confidence and creativity for the purpose of helping these students gain self-esteem and a sense of belonging.

The centre is staffed full-time by a Director and a Volunteers Coordinator, and part-time by a Volunteer Resource Developer, a Program Assistant, and two Creative Arts Instructors, along with a team of more than 30 volunteers who live, work, and study in the community. It is the volunteers working directly with the youth on a daily basis who are truly the heart of our operation. The volunteers undergo a formal four hour training session as well as continuous on-the-job support and supervision. We strive to have students placed with the same mentor / tutor each week in the hopes that a rapport will be built and a positive relationship established.

Circumstances often evolve within the centre that require our volunteers to be well informed on a wide variety of issues which constantly challenge our youth clients. As a staff person who helps to keep things running smoothly for the volunteers working with youth at-risk, I am often approached with questions from volunteer mentor / tutors regarding how to react to certain situations. The volunteer training addresses many of the ways in which volunteers should respond to challenging situations with youth at-risk. However, the staff felt that many of the special issues that come up with individual youth at-risk could be further researched by the volunteers. Staff suggested that volunteers could take advantage of the centre's high-speed internet access to engage in meaningful research whenever the volunteer was present at the centre but their matched youth had not showed up.

After the initial mentor / tutor training sessions were completed, I organized several group brainstorming sessions with the volunteers, where concerns over the most frequently recurring topics were voiced. A list of these topics was constructed so that we would be able to develop a

Toolkit which addressed these issues from the standpoint of a volunteer. Each tutor chose a topic of interest to research and report on, with the goal of developing a standardized guide that could be used by volunteers in many situations where youth are involved. It was our hope that we would be able to ensure that volunteers in these situations would feel empowered and be better able to assist youth in crisis. It was also felt that this Toolkit could be a great tangible resource for mentor / tutors by providing contact information for locally accessible support services such as Help Lines and other community services.

This manual was created for the benefit of both the volunteers and the youth they work with. We considered it extremely important to gain perspective from the volunteers as they are the ones in direct contact with the youth and their issues. We provided the volunteers only with a sample framework to encourage point form instead of long narratives. We believed it was crucial that the topics be presented by the volunteers themselves. In this way we felt that the perspectives would be presented in a realistic manner that other volunteers would be able to relate to, as opposed to something more clinical. Simply put, we wanted something made by volunteers for volunteers.

The Toolkit will be made available to volunteers from a wide variety of organizations. It is our hope that the Toolkit will allow centres like ours to improve volunteer interaction with at-risk youth and help the youth volunteers to feel valued and valuable by providing them with a compilation of their own practical learnings.

For more information about volunteers or the workings of the Youth Peer Transformation Program, please contact:

Barbara Donovan, Director	Youth Peer Centre
Phone: (902) 539-8228	226 Whitney Avenue
Fax: (902) 539-7407	Sydney, Nova Scotia
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For information related to the sponsorship, partnerships, or administration of the program, please contact:

Barry Waldman, Supervisor	<b>Educational Program Innovations Charity</b>
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Fax: (902) 794-9225	North Sydney, Nova Scotia
Email: <a href="mailto:epic@ns.sympatico.ca">epic@ns.sympatico.ca</a>	Canada B2A 3S9

# **ALCOHOLISM**

Submitted by Naomi McLean

**Alcohol abuse** is a destructive pattern of alcohol use, leading to significant social, or mental impairment. Alcohol is one of the most popular depressants in Canada. No one person is too young or too old to have serious problems or trouble with alcohol. Alcoholism is not just a problem, it is an illness. For many people the reality of this illness is very tough to deal with. This does not just affect your own self and health. It affects everyone around you no matter if it is a friend or a family member.

## **Signs and Symptoms:**

Some symptoms or signs of an alcoholic vary from person to person. Some of the obvious symptoms could include:

- physical fights
- screaming matches
- missing school/work
- poor diet
- body pains
- numbness of legs and arms
- puffy face
- driving while intoxicated
- storing booze
- vomiting
- drinking in the morning
- red eyes
- increased tolerance

## **Ways to approach the issue if you suspect a student has an alcohol problem:**

- make sure the student knows you are there to help him
- encourage the student to quit and seek help from a professional
- inform the student of the health benefits of quitting
- tell the student you are there to help them with any conflicts that they face, or to direct them to someone who can
- reinforce that you are on their side

**Ways not to approach the issue:**

- avoid lecturing or drawing conclusions
- avoid stereotyping
- do not criticize or judge
- avoid giving too much advice

**Ways to approach the issue of another person's drinking and the consequences:**

- be a good listener
- remember you are not a counsellor, direct them to a professional
- make sure they know it is not their fault
- validate their concerns and fears
- tell them there is help out there and people who care

**Ways not to approach the issue of another's drinking:**

- do not criticize or pass judgement on the individual with the drinking problem
- do not direct! Advise them where they can seek help
- do not act like you have all the answers, admit when you do not and use it as an opportunity to find them

**Places to get help:**

Kids Help Phone - 1-800-668-6868

Alcohol & Drug Help Line - 1-800-821-HELP

Alcoholics Anonymous (Sydney) - 562-8019

Al-Anon - 1-888-4AL-ANON

**Research Source:**

<http://www.alcoholism-symptoms.com/effects-of-alcoholism.htm>

# **Anger Management**

by Vanessa Brown

**Anger:** A strong feeling of displeasure or hostility.

## **Different Anger Styles:**

### Stuffers

- They avoid conflict and try to bury their anger
- They may become depressed
- They may complain of headaches, stomach-aches or other physical pains

### Withdrawers

- They indirectly express their anger
- They may stop talking to friends for days
- They tend to 'forget' promises

### Trianglers

- They express their anger in ways that deliberately makes everyone else angry
- People who know a triangler may feel as if they did something wrong but does not know what

### Blamers

- They blame other people
- They use name-calling and other techniques to purposely put others down
- Teens whose parents are blamers may feel guilty and responsible for family problems and often become blamers themselves
- They never take responsibility for their own actions

### Exploders

- They often express their anger violently
- They are usually unpredictable in their violence

### Problem Solvers

- They admit their anger and try to understand it
- They try to solve the problem that angers them

## **Symptoms of Anger**

Impatience  
Constant hurrying  
Using a harsh tone when speaking  
Self-centred behaviour  
Cannot relax  
Cannot enjoy activities  
Verbal aggressiveness  
Mad at everyone and everything

## **Causes of Anger**

Frustration  
Feeling others do not respect them or how they feel  
Chronic anger may have roots in early childhood such as inadequate parenting

## **Things that Affect Anger**

Physical fatigue  
Pain  
Recent irritations  
Stress

## **Ways to Deal with Anger**

- The healthiest way to deal with anger is to express the feelings in an assertive, non-aggressive way. This means learning how to make needs clear and how to meet them while being respectful to others.
- Other ways are to:
  - Do calming exercise like yoga or exercise that will work off steam like running
  - Find an anger trigger and develop solutions for them
  - Practice deep breathing and relaxing imagery
  - Count to 10

## **Tips for Tutors on Dealing with Angry Students**

- Give the student a cooling off period to think about the cause of their anger
- If they are going to hit something, encourage them to hit something such as a pillow or a punching bag rather than a wall

- Encourage the student to write a letter containing their thoughts and feelings and then get them to tear it up
- Listen attentively
  - Make eye contact and nod
  - Listen and don't interrupt
  - Ask questions that may help to make it clear the source of their anger
  - Acknowledge feelings
  - Let them know in a non-judgmental manner that you know they are angry
  - Use sentences that reflect their feelings in a calm, neutral but understanding way such as such as "I can see this makes you angry." or "What he said really made you furious, didn't it?"
- Try not to take it personally
- Explore options
  - Try to brainstorm with the student for solutions
- Avoid humour
  - Using humour may give the impression you are not taking the problem and their anger seriously

### **Places to Receive Help**

Kids Help Phone - 1-800-668-6868

[www.angeronline.com](http://www.angeronline.com) <<http://www.angeronline.com>>

### **References**

[www.clarocet.com/encyclopedia/ang-intro.htm?c1=ads&source=ads&kw=2](http://www.clarocet.com/encyclopedia/ang-intro.htm?c1=ads&source=ads&kw=2)

<http://www.clarocet.com/encyclopedia/ang-intro.htm?c1=ads&source=ads&kw=2>

[www.exnet.iastate.edu/Publications/SP101B.pdf](http://www.exnet.iastate.edu/Publications/SP101B.pdf)

<http://www.exnet.iastate.edu/Publications/SP101B.pdf>

[www.apa/pubinfo/anger.html](http://www.apa/pubinfo/anger.html) <<http://www.apa/pubinfo/anger.html>>

# **Attention Deficit Hyperactivity Disorder (ADHD)**

by Cathy MacInnis

Attention Deficit Hyperactivity Disorder(ADHD) is a neurological condition in which a child has difficulty controlling some aspects of his or her behaviour leading to these three major symptoms:

- inattention
- hyperactivity
- impulsivity

These behaviors are so intense that they interfere with the child's ability to function in the classroom and with his or her ability to get along with other children. ADHD is *not* related to intelligence. It occurs in children with average intelligence and in those with above average intelligence. Adults have ADHD as well but most people learn to cope with their differences so that they are not as noticeable in adults. Sometimes ADHD is referred to as ADD (Attention Deficit Disorder).

## **How does a child with ADHD behave?**

### Attentional Problems

- find it hard to keep their mind on what they are doing
- get bored or distracted with a task in a short time
- find it hard to get started on tasks, such as homework, that require mental effort
- make what seem to be careless mistakes and seem not to care about details
- do not always follow through when they are given instruction
- are disorganized and lose things easily
- sometimes over-focus on a task especially ones they like such as video games or sports and may have a hard time changing from one thing to another

### Hyperactivity Problems

- move around all the time
- cannot sit still
- squirm in their seats, swing their legs, etc.
- talk too much
- running, jumping, climbing even when they are not allowed

### Impulsivity Problems

- are quick to anger
- get frustrated more quickly than others especially when confronted with a task they feel they won't be good at
- show poor judgement - may do dangerous things like run into the street or climb on a roof
- may have trouble with relationships because they won't appropriately censor their words or comments and may hurt other's feelings

Children with ADHD often have other conditions as well. Special learning disorders are common in children with ADHD. These include:

- Dyslexia (difficulty with reading, spelling)
- Dyscalculia (difficulty with mathematics)
- Dysgraphia (difficulty with drawing)
- Difficulty with auditory perception, such as difficulty processing what one hears

When working with a student with ADHD, remember that it is important to develop strategies that work with that particular youth. Something that works with one student may not be successful with another.

### **Tips for working with a student with ADHD:**

- Keep a set routine or schedule for activities
- Use simple rewards and consequences
- Set clear goals
- Praise the student when these goals are met or even when they are attempted
- Make eye contact often and smile to promote a safe and relaxed environment for the child. If the child feels uncomfortable or insecure they will not be able to concentrate on the task at hand
- Encourage the child to pause and think before answering
- Break assignments into smaller sections so it is not overwhelming
- Supervise the child closely and remind the child to stay focused on the task at hand
- Take a break when you see signs of building frustration
- Model organization, neatness and order to show their advantages

**For Further Information:**

- contact family doctor
- talk to teacher or guidance counsellor at school
- Kids Help Phone - 1-800-668-6868

**Resources:**

[www.audiblox.com/adhd\\_learning\\_disability.htm](http://www.audiblox.com/adhd_learning_disability.htm)

# **Body Image**

Allyson Dunlop

## **Body Image:**

how others see or picture themselves, how they feel others perceive them, how they feel about their bodies or feel in their bodies.

Millions of men and women fight a constant battle between the images they see in the mirror and the image they believe they must obtain. Poor body image affects both males and females.

## **Factors that may contribute to poor body image:**

- media's idealized version of the perfect body, as seen in, magazine ads, television shows and movies
- feelings of being judged on appearance
- pressures exerted by peers and authority figures to conform to such unrealistic ideals

## **Media can negatively impact body image:**

- the thin ideal body represented in the media is unhealthy and unrealistic
- may result in people suffering from a severe eating disorder
- altered images displayed to society are not advertised as such, resulting in totally unrealistic views of the human body

## **Symptoms which a person who has poor body image may experience:**

- become distant from friends and family
- start comparing themselves to media images more often
- dieting
- depression
- obsession with weight loss
- development of eating disorders such as anorexia and bulimia

**Ways to approach the issue:**

- help the person to understand that appearance is not everything
- support the person's right to have these feelings without agreeing with them
- reinforce their positive traits such as personality or abilities
- promote acceptance and appreciation of their bodies
- empower and educate them on the issue by providing access to relevant information
- remember that anorexia and bulimia can lead to dangerous and even fatal health issues so if you believe someone has a serious problem, seek help from an adult resource

**Ways not to approach the issue:**

- do not point out a persons flaws
- do not judge them to others, when it comes to physical appearance
- try not to make them feel uncomfortable by asking questions about weight loss or physical appearance
- do not make light of it by relating the problem to regular dieting or weight loss

**Places where they can receive help:**

- Body Images & Health Inc.  
<http://www.internationalnodietyday.com/>
- Site Linked to Help Lines  
<http://www.k94radio.com/helpline.html>
- Kids Help Phone 1-800-268-YOUTH

**Resources:**

- <http://wellesley.edu/health/body/bodyimage/todo.html>
- [http://www.edreferral.com/body\\_image.htm](http://www.edreferral.com/body_image.htm)

# **Bullying**

*by* Beth Andrews

## **Bullying defined:**

Persistent direction of harm, physical or psychological, from one child or group of children towards another child or group of children - where a CLEAR IMBALANCE OF POWER PREVAILS.

## **Who are the bullies?**

- physically stronger than classmates and victims
- feel the need to dominate other children
- are hot-tempered, easily angered, impulsive
- have problems conforming to rules
- are generally oppositional, defiant and aggressive towards adults and may frighten adults
- show little empathy with children who are victimized
- are at increased risk for criminal behaviour, alcoholism and drug abuse over the long term

## **Why do children become bullies?**

- they are searching for attention
- they are being picked on themselves, perhaps by a parent or sibling
- they have family problems
- they have no true friends and feel lonely
- bullying makes them feel powerful and in control of something, whereas other parts of their lives may seem out of control

## **Why can you do if you suspect a child is a bully?**

- try to find out why the child is behaving this way
- explain that bullying is wrong and try to get the child to understand how the victim feels
- talk about how the child might stop bullying and model how to get along with others
- praise the child when he or she interacts appropriately with others
- model non-violent behaviour

- if a situation is serious, enlist the help of a teacher, principal, guidance counsellor or other counsellor

**How do victims feel /behave, as a result of the bullying?**

- more anxious and insecure than children in general
- cautious, sensitive and quiet
- suffer from low self esteem
- look upon themselves as failures and feel stupid and unattractive
- generally not aggressive or teasing in their behaviour
- lonely and abandoned in school
- do not have a single good friend

**How do you tell if a child is being bullied?**

- they are frightened to walk home from school
- they are unwilling to go to school
- they begin to do poorly in school
- they have unexplained cuts or bruises, stop eating or begin having nightmares
- they become withdrawn, depressed or suicidal
- their belongings are regularly destroyed or missing

**What you can do if a child is being bullied.**

- listen and be supportive - take bullying seriously
- reassure the child that it is NOT his/her fault
- ask how they've been dealing with the bullying
- talk about actions they can take to help solve the problem (see below)

**How can you help a victimized child?**

- encourage the child to tell a trusted adult about the bullying and explain that this is not "squealing" because they have a right to feel safe
- encourage confidence in the child by providing opportunities for him/her to make new friends
- help them develop a list of trusted adults they can phone or go to for help
- ask them to try to ignore the bully; tell the bully to stop and then walk away

### **Where can you get more information on bullying?**

[http://www.naspcenter.org/factsheets/bullying\\_fs.html](http://www.naspcenter.org/factsheets/bullying_fs.html)

<http://www.safety-council.org/info/child/bullies.html>

<http://www.larchecanada.org/Bullying/parentsguide.htm>

[http://www.stopbullyingnow.net/bullying\\_facts.htm](http://www.stopbullyingnow.net/bullying_facts.htm)

[http://www.prevention.gc.ca/en/library/publications/fact\\_sheets/bullying](http://www.prevention.gc.ca/en/library/publications/fact_sheets/bullying)

- Contact the school's liason police officer or phone (902)565-SAVE (7283)

Parents, teachers and students can call this line.

- Contact Kid's Help Phone toll-free at 1-800-668-6868

The following information has been taken from Dr. Dan Olweus's book Bullying at School (retrieved 04/01/03 at <http://www.psych.utoronto.ca/~peterson/bullying.htm>) and "Safety at School: Bullying: What Can You Do?", produced by the Halifax Police Services/Cape Breton Police Services in partnership with "Students Against Violence Everywhere" and some parts have been slightly modified.

# ***Child Abuse***

*by Suzanne Ranni*

Abuse Allegations: someone admits they are or they know someone suffering or who has suffered physical, sexual, or emotional abuse

## **Duty to report:**

- Everyone is required to report child abuse and neglect
- All allegations must be reported, even if the information is confidential
- A person can be fined up to \$2000, get up to six months in jail, or both if they do not report child abuse
- There is a higher responsibility on professionals to report child abuse ( i.e. health care workers, teachers, and youth and recreation workers)
- Professionals must report abuse immediately
- Professionals may be fined up to \$5000, get imprisonment up to one year, or both if they do not report child abuse
- Suspicions of child abuse based on reasonable grounds must be reported
- Abuse by someone other than the parent must still be reported
- Abuse heard by word of mouth must be reported

## **What happens after abuse is reported:**

- Names are kept confidential unless you have to give evidence in court
- Legal action will not be taken against a person who reports abuse unless the report was false and malicious
- False and malicious reports can result in a fine up to \$2000 and /or six months in jail
- Agencies respond to allegations ranging from one hour to twenty-one working days, depending on the degree of risk to the child

## **Indicators of abuse:**

- Unexplained bruises, welts, lacerations, abrasions, or burns
- Unexplained fractures or dislocations
- Torn, stained, or bloody underclothing
- Pain or itching in genital area
- Child is inadequately supervised or left unattended
- Child may suffer from malnutrition

**Reasons a child may not want to tell about the abuse:**

- They are embarrassed or ashamed of the abuse
- They believe the abuse is their fault
- They are afraid of the abuser
- They are scared people will not believe them
- They feel a need to defend the person who abused them
- They are worried about what will happen to them or where they will live if they tell

**Ways not to approach the issue:**

These approaches may cause a loss of trust in a child or make the situation worse

- Panic
- Direct questions that influence what a child says about the alleged abuse
- Ignore the allegations
- Ignore the allegations because you believe the accusations are false
- Approach the accused abuser
- Confront the child you suspect is being abused
- Lie to the child and tell them the abuse will not be reported

**Ways to approach abuse allegations:**

- Remain calm
- Reassure the child that the abuse was not their fault
- Tell the child that you have a responsibility to report the abuse
- Report the abuse or suspected abuse to an agency immediately
- Tell a child that you cannot keep secrets if they are being harmed or somebody else is in danger

**Where to get help:**

Local telephone numbers for these places are listed in the blue pages of all phone books

- Children's Aid - 902-563-3400
- Crisis centres located at local hospitals
- Local Police or RCMP
- You may direct children to the Kids Phone Line while they are waiting for an agency to intervene 1-800-668-6868 (24 hours no charge)
- Children's Help Line - 310-1234(no area code needed)

**Sources:**

Department of Community Services, Child Abuse Information about the Children and Family Service Act. Nova Scotia, 1993.

Department of Community Services, Indicators of Possible Abuse or Neglect. Nova Scotia, 1992.

# Conflict Resolution

by Amanda MacPherson

Conflict is an inevitable part of life. The seeds of conflict are planted when disharmony is felt within oneself. Individuals sometimes encounter stress and negative emotion when dealing with conflict.

Conflict Resolution is the ability to resolve conflict effectively and in the least stressful manner possible

People are different. They also react differently in some situations than others would in the same situation.

- People differ in their ability to deal with stress created by conflict
- It is not good to have stress build up inside due to conflict because it will eventually affect you in a negative way.

Our Needs, Fears, and Concerns play a part in finding the best solution for how we deal with conflict.

When youth are involved in conflict they often enlist others to support their perspective and avoid trying to work out their problems directly with the person.

Ways to approach a youth on dealing with conflict resolution:

- Encourage the youth to listen and try to see where the other person is coming from

Why do youth avoid dealing with conflict?

- Often they have no idea how to deal with the situation and are afraid to ask for help
- It takes more skill, effort, commitment, and stress to face the dispute

Pros of dealing with conflict:

- Self esteem will be constructed over a firmer foundation when youth learn to deal effectively with conflict
- Working through their difficulties with people will help youth achieve a less stressful life
- Dealing with conflict is better and more fulfilling in the long run

Explain to the student that they must be willing to:

- Listen to another's point of view
- Recognize that they may have contributed to the problem
- Possibly be willing to change

Effective dialogue (talking and listening) can reduce stress, resolve challenges, and increase happiness.

Why do youth find conflict resolution hard to confront:

- Natural need to explain own side
- May be ineffective as listeners
- Fear
- The assumption that one person has to lose if the other is going to win

Tools for improved communication:

Seek first to understand, then to be understood.

- Tell youth to encourage others to explain their side first, they will be more apt to listen to theirs

Suggest that the youth take some time after the disagreement to focus on what they ideally want to gain from the resolution of the conflict. Remind them not to get caught up in fighting just to win.

- If they concentrate on their position, they tend to forget what they actually want
- The goal should be to attempt to satisfy the sum of both, their needs and your needs

Learning to disagree amicably and to work through problems is one of the most important interpersonal skills a person can develop.

The first steps in resolving conflict:

- Both people must understand and feel understood about the situation
- Then they can begin to explain their perspectives and they should be fully listened to.
- Once each person concerns have been laid out, they can focus on creating a solution

Places to get help:

School Guidance Counsellor

Teacher

Kids Help Line I-800-668-6868

# Cultural Sensitivity

by Lyndsay Hollohan

**Cultural Sensitivity:** the ability to recognize and respect differences between members of another race, religion or ethnic group. When a person is culturally sensitive they see people as individuals who deserve respect, regardless of any similarities or differences they may have with the individual.

## **Common reasons for discrimination toward people of other cultures/ races/ religions:**

- Some people hold the belief that they are “better” than people of another culture
- There is widespread ignorance in our society about other cultures, races, and religions
- Quite often people fear other cultures
- Learned behaviour often accounts for discrimination demonstrated by children (parents, older siblings, relatives, friends who are discriminatory may pass on their beliefs to children)

## **How to promote the issue of cultural sensitivity with your student:**

- Promote awareness of self and others, regardless of race, creed, or cultural background
- Teach them to avoid a condescending attitude when interacting with anyone of any culture
- Help the student gain effective communication skills with culturally different people
- Encourage the student to be more sensitive to this issue by gaining a willingness to understand others
- Promote awareness of other people's frames of reference and world views (which are influenced by culture)
- Encourage the student to gain knowledge of other cultures

## **How not to approach the issue of cultural sensitivity with your student:**

- Do not patronize culturally different persons
- Do not hold assumptions such as “assumed similarity”, which is when one assumes that people either *ought* to be like them or *want* to be like them
- Effective communication with culturally different people (via sensitivity and a willingness to understand others)
- Be aware of others’ thoughts and feelings regardless of race, creed, or cultural background

- Be aware of other persons' frames of reference and world views (and understand these views are influenced by culture)
- Gain "cognitive empathy" ... i.e. knowledge of the person's culture (to see where they are "coming from")
  - history
  - cultural values
  - current lifestyle

**Ways to obtain knowledge of others' cultures:**

- Outside speakers from different cultural backgrounds
- Culturally distinct student panels
- Educational videos, books on diversity, educational websites

**Questions to have your students ask themselves:**

- Do you view other cultures as equally valuable to yours?
- Are you culturally sensitive to your own heritage and the possibility that you were taught to be prejudiced as a part of your upbringing?
- Do you value and respect differences in people?
- Are you aware of your own values and biases and how they affect the people around you?
- Do you avoid stereotyping and labeling?
- Do you monitor your own assumptions about those different from you?

**References:**

[www.ericfacility.net/ericdigests/ed347475.html](http://www.ericfacility.net/ericdigests/ed347475.html)

<http://www.ericfacility.net/ericdigests/ed347475.html>

[www.psparents.net/CulturalSensitivity.htm](http://www.psparents.net/CulturalSensitivity.htm)

<http://www.psparents.net/CulturalSensitivity.htm>

# **Cutting and Self Mutilation**

by Jocelyn Lewis

## **What is cutting and self mutilation?**

- Deliberate, non-life threatening, self-effected bodily harm
- Cutting is the most common kind of self mutilation in teenagers

## **Understanding why people hurt themselves**

- They are overcome with pain and anguish inside
- They want to calm themselves down
- They are depressed
- They want to punish themselves for something they have done
- They want to feel that they actually exist instead of feeling like nothing
- They want to prove the pain they are feeling is real
- They want to make order out of chaos that is happening in their lives
- They are under peer group influences
- They feel numb, unreal, empty, alone, helpless and/ or powerless

## **What happens to someone when they hurt themselves**

- They get a feeling of satisfaction
- They know they are alive for that moment
- They begin to feel immediate relief, even though it may only last for a short period of time

## **How can you tell if someone is a cutter or other kind of self mutilator?**

- Fresh healing injuries or scars from old injuries
- Knives, lighters or matches in a purse or book bag
- Blood stains on the inside of clothing
- Patterns of behaviour such as:
  - Unlikely excuses for injuries
  - Asking to do their own laundry
  - Locking themselves in the washroom for long periods of time with the water running then leaving with fresh injuries
  - Defensiveness about behaviour when questioned

### **Reasons the person may not want to quit**

- Believe that not doing it will hurt more than doing it
- Feel that it is their body and they can do what they want with it or to it
- Believe that it does not hurt anyone else

### **Good ways to approach a person with a problem**

- Talk about the connections and the differences between thoughts, feelings and actions
- Explain that self respect is not compatible with hurting oneself
- Encourage communication with others and strengthening relationships
- Explain the possible advantages of therapy

### **Non-effective ways of approaching the problem**

- Lecturing
- Making fun
- Judgmental comments
- Restrictions designed to keep the person from self-mutilating (no one can be watched at all times)
- Forcing any kind of therapy

### **Things to think about when dealing with a person who cuts**

- Cutting behaviour is not logical but instead, emotional
- Trying to talk them out of it will only draw attention in an uncomfortable way
- If the person is highly frustrated they will probably cut more

### **Places you can refer the person for help**

- FHC Cumberland Hall - 1 800 467-4061
- Self Harm Alliance - [www.selfharmalliance.org](http://www.selfharmalliance.org)
- S.A.F.E. Alternatives (Self Abuse Family Ends) - 1 800 336-8288 - [www.selfinjury.com](http://www.selfinjury.com)
- Trapped Minds Depression Support - [www.trappedminds.com](http://www.trappedminds.com)

### **References**

1. [www.ncbi.nlm.gov/rntrez/query](http://www.ncbi.nlm.gov/rntrez/query)
2. [www.kypartnership.org/mental/SelfAbusive.htm](http://www.kypartnership.org/mental/SelfAbusive.htm)
3. [http://ct.essortment.com/whatisselfmut\\_rfyb.htm](http://ct.essortment.com/whatisselfmut_rfyb.htm)

# Depression

by Brenda Moore and Janice McDonald

## What is Depression?

Depression can be defined as a state of being sad, a psychological disorder marked by sadness, inactivity, difficulty in thinking and concentration, and feelings of dejection.

## Signs of Depression:

- Difficulty concentrating in school or other areas
- Loss of interest in usual activities
- Withdrawal from friends and family
- Noticeable changes in sleeping and/or eating habits
- Loss of energy
- Complaints of boredom, tiredness, or physical pain such as headaches
- Extreme use of alcohol and/or drugs
- Outbursts of anger
- Aggressive behaviour toward rules and authority
- Neglect of personal appearance
- Delinquent, dangerous, or promiscuous behaviour
- Feelings of helplessness, hopelessness, worthlessness, grief, guilt, etc.
- Comments about thoughts of death, suicide, or wanting to put an end to things
- Suicide attempts

## Factors that Place Adolescents at Risk:

- Intense anxiety caused by traumatic incidents (car accident, abuse, death, etc.)
- Chemical imbalances in the brain
- Death of someone close to them
- Substance abuse
- Some medications or diseases
- Family history of depression
- Hormonal imbalance
- Parents divorce
- Break up with a partner

**Effects of Depression on Adolescents:**

- Difficulty coping with everyday life
- Engaging in risky behaviours (alcohol and substance abuse, unprotected sex, etc.)
- Increases the risk of self inflicted injuries
- Suicide or suicide attempts

**Ways to Approach a Student Exhibiting Signs of Depression:**

- Make sure the student knows that you are on their side and want to help them
- Ask them if they want to talk to you or to someone else, such as, a counsellor or doctor
- Keep their trust by not discussing them with others, unless out of concern, to a superior
- Make them feel safe about discussing their feelings with you

**Ways Not to Approach a Student Exhibiting Signs of Depression:**

- Do not assume the student is trying to get attention
- Do not make judgements of their situation (ex. things will be okay, it's not that big a deal)
- Do not try to handle everything yourself, you are not a doctor!

**For Further Information:**

Kids Help Phone - 1-800-668-6868

Cape Breton Regional Hospital

Mental Health - Child and Adolescent Services - 567-7731

Teen Clinic

Teacher or Guidance Counsellor

Doctor or Social Worker

Family or Friends

Teen Health Centre

Sydney Academy High School

49 Terrace Street

Sydney, Nova Scotia

902-562-5464

Website: [www.cpa-apc.org\Miaw\pamphlets\youth.asp](http://www.cpa-apc.org\Miaw\pamphlets\youth.asp)

# **Dyslexia**

by Cathy MacInnis

**Dyslexia** is a disorder that affects millions of people all over the world. It is one type of learning disability that affects a person's ability to read. It is a disorder characterized by difficulty in word decoding. In addition to problems with reading, there are often problems with writing and spelling as well.

## **Youth with dyslexia may have problems in one or more of these areas:**

- concentration
- perception
- memory
- verbal skills
- abstract reasoning
- hand-eye-coordination
- social adjustment - low self esteem is a commonly observed behavioural characteristic
- poor grades
- underachievement

## **Some common misconceptions about people with dyslexia are that they may be:**

- lazy
- unmotivated
- of low intelligence
- misfits
- defiant (doing it on purpose)

**These misconceptions, without understanding the effect dyslexia has on a person's life, can lead to:**

- feelings of rejection
- isolation
- inferiority
- low self esteem
- discouragement

**Some of the well known signs or symptoms of dyslexia are:**

- confusion over the direction letters face (ex: b/d, p/q)
- difficulty with left and right
- difficulty with keeping organized
- difficulty with spelling
- difficulty with direction (east/west)
- leaving out words when reading

**Dyslexic children learn differently:**

- Using a multi-sensory teaching approach means helping a child to learn through more than one of the senses.
- Most teaching in schools is done using either sight or hearing but a dyslexic child may experience difficulties with one or both of these senses.
- The child's vision may be affected by difficulties with tracking, visual processing, or the words may become fuzzy or appear to move around.
- The child's hearing may be fine on a hearing test, but auditory memory or auditory processing may be weak. This means that they may have trouble remembering what they hear, such as instructions especially if there is more than one.
- Other senses such as touch can be used to overcome these sensory differences.

**Ways a tutor can help a student with dyslexia:**

- help your student to learn by talking and saying things out loud, identifying phonemes, spelling, recognizing letters and reading
- take breaks so the youth does not become frustrated
- encourage the youth to read, spell, etc. in everyday life for practice
- explain the disability to them so they realize why certain things are harder for them
- be patient - remember that the child lives with dyslexia all the time and is far more frustrated than you are

**For more information:**

Kids Help Phone - 1-800-668-6868

Teacher, guidance counsellor, or doctor

**References:**

[www.audiblox.com/dyslexia\\_learning\\_disability.htm](http://www.audiblox.com/dyslexia_learning_disability.htm)

# **Eating Disorders**

Amanda Burt

**Eating disorder:** A psychological disorder, such as anorexia nervosa, bulimia nervosa or compulsive overeating that involve insufficient or excessive food intake.

## **Reasons why people may have an eating disorder:**

- To feel in control of something
- To achieve what is thought to be an appropriate weight
- To fit in with a certain crowd
- To maintain a certain size
- They are addicted to drugs
- They are under a lot of stress

## **What people get out of an eating disorder:**

- The feeling of control.
- A temporary relief from other emotional problems or conflicts that may have nothing to do with what they eat or how much they weigh

## **Symptoms of an eating disorder:**

- Depression
- Obsession over body image
- Lack of an appetite
- Sudden weight loss
- Dizziness or fainting spells
- Strange diet
- Compulsive exercise
- Dressing in layers to hide weight loss
- Use of weight loss medication
- Isolation or antisocial behaviour
- Sickly appearance

**Reasons why they may not want to quit:**

- They feel they cannot
- They are worried about their weight
- They believe it is not hurting them

**Ways to approach the issue:**

- Listen to them and try to understand
- Do not try to fix their situation
- Do not be overpowering
- Do not try to be their therapist
- Give them information about the disorder and where they can find proper help
- Be sensitive
- Let them know that by talking about it they are helping themselves
- Do not act shocked or disgusted

**Places where they can find help:**

- IWK Eating Disorders  
1-902-464-4110
- Kids Help Line;  
1-800-668-6868
- QEII Eating Disorders Clinic  
1-902-473-6288
- The National Eating Disorders Information Centre  
416-340-4156

# **Gender Identity - Am I Gay?**

by Meaghan Grant

## **What volunteers should know about this topic:**

- being gay is when a man has sexual feelings for another man
- a youth may wonder if they are gay during adolescence when they may start to be attracted to members of the same sex
- the realization can come at any time in their lives
- realizing you are gay is usually difficult to come to terms with in some way
- everyone is different when it comes to this topic
- people's behaviors are influenced by their family, environment, experiences, and their sense of self
- who you are sexually is a big part of your identity but only a part

## **Ways to approach the topic:**

- let the student know that you understand that being gay is not something that someone suddenly begins to consider
- let the student know you will help them in any way you can
- with their permission, find contacts for support groups or numbers to help lines
- let the student know that you are glad they felt comfortable enough to come to you and praise them for their courage
- just be there to offer support

## **Ways not to approach the topic:**

- do not tell anyone if a student confides in you; they may not be ready to tell other people in their lives
- do not try to convince the student to tell a teacher or parent, even if you believe it would help them; they must come to these decisions on their own
- do not judge the student or advise them to change how they feel
- remember, you are not a counselor.

**Important information for safer sex for homosexuals:**

- for increased protection against AIDS and other sexually transmitted diseases *always* use condoms when engaging in oral sex
- *always* wear a condom if engaging in anal intercourse, otherwise the virus can be transmitted very efficiently

**If the youth wishes to talk to someone about it:**

- encourage them to tell someone that they trust - a friend, parent, teacher, doctor
- tell them to call a support line or join a support group to meet other people who have and are going through the same thing

**Youth resources and contact information:**

- [http://www.puberty101.com/p\\_amigay.shtml](http://www.puberty101.com/p_amigay.shtml)
- <http://www.avert.org/yh/gmy1.htm>
- Gay and Lesbian Youth Line - 1-800-268-YOUTH

**Topic references:**

- <http://gaylife.about.com/cs/amigay/>
- <http://www.mbqueer.org/teen/aig.html>
- <http://www.avert.org/hsexu2.htm>

# **Gender Identity - Am I a Lesbian?**

by Meaghan Grant

## **What volunteers should know about this topic:**

- lesbians are women loving women
- women who are sexually attracted to other women
- about 1 out of 10 female teenagers are lesbians

## **Ways to approach the topic:**

- let the youth know that during adolescence, most young women begin to be aware of sexual feelings and take an interest in dating
- tell the student it is normal to feel turned on by other women and that they should just be themselves
- it is okay if they feel out of place with their girlfriends in this confusing time
- having no interest in boys is not abnormal
- sexual orientation is only a part of who they are
- tell them not to think it controls the quality of life they will have

## **Ways not to approach the topic:**

- do not assume that the youth is ready to be open about her sexual orientation with everyone
- do not try to be a counsellor
- do not push the student to go to therapy or tell a parent
- do not judge the student or suggest that she change how she feels

## **Important information on safer sex for lesbians:**

- having vaginal intercourse with men without using condoms (it is fairly common for young lesbians to occasionally have sexual contact with men) puts you at risk of contracting an STD (Sexually Transmitted Disease) such as AIDS (Acquired Immune Deficiency Disorder).

- having oral sex with an infected women without the use of a barrier to protect against infected vaginal secretion or menstrual blood, also puts you at risk
- use of a dental dam for oral-vaginal and anal stimulation (available at dental supply store) can help protect against transmission of disease

**To further assist:**

- if they want more information, contact local feminist organizations
- many colleges / universities have gay / lesbian organizations; contact them for information on possible support groups, therapists
- check for hotlines in phonebook

**Youth Resources and Contact Information:**

- <http://www.lesbian.org/>
- <http://www.wheragirllskissgirls.com/amialesbian.html>
- <http://www.avert.org/lesbian.htm>
- Gay and Lesbian Youth Line - 1-800-268-YOUTH

**Topic References:**

- [www.youth.org/yao/docs/i-thinx-article-lesbian.html](http://www.youth.org/yao/docs/i-thinx-article-lesbian.html)
- <http://www.teenhealthfx.com/answers/2044.html>
- <http://www.angelfire.com/ny/picturecorner/1.html>

# **Marijuana Abuse**

by Craig Ryan

**Marijuana:** According to Health Canada, marijuana is the most often used illegal drug in this country. It is believed 4 out of every 10 Canadian teenagers have smoked marijuana. There are over 400 chemical compounds in the marijuana plant that has been processed for “street sale”. Of these chemicals, it is delta9 tetrahydrocannabinol or THC that is the active ingredient and produces the “high” felt by users. Research indicates about half the time teenagers use marijuana they also use tobacco products.

## **How it is used:**

- most users roll loose marijuana into cigarettes called “joints”
- it can be smoked in a water pipe called a “bong”
- it can be mixed into food and served as tea
- it can be smoked in a cigar tubing
- it can be ingested in pill form, known as Cesement

## **Reasons youth may use marijuana:**

- they are curious
- they want to calm down or relax
- they are overcome by feelings of stress or anxiety
- they are looking for an escape from the pressures of day-to-day life
- they witness family or friends using the drug
- peer pressure
- feeling of satisfaction
- feel immediate relief from their problems
- they want to be rebellious

## **Symptoms of a user:**

Marijuana has a distinct odor when burned or vaporized. Other signs that someone may be using marijuana are:

- anxiety or nervousness
- lack of focus
- red, glossy eyes
- erratic behavior

- slurred speech
- increased heart rate
- mood swings
- chronic fatigue like symptoms
- lack of motivation
- unusual sleeping or eating habits

Keep in mind that some symptoms become more prevalent with prolonged and/or frequent usage.

**Ways to approach the issue:**

- make sure the youth understands that you care about the issues, and understand the conflicts they are facing
- tell the youth you want to help
- encourage the youth to quit and explain the health benefits of doing so
- accept youthful rebellion and react appropriately
- be a good listener
- if you feel the youth has a problem, tell them where they can get the appropriate help or treatment

**Ways not to approach the issue:**

- avoid lectures
- do not talk “at” the youth but instead “with” them
- avoid perpetuating myths/stereotypes about the drug
- if you do not know the answer to a question, say so, do not provide false information. Instead, use it as an opportunity to find the answer together
- do not assume that just because a teen has experimented with marijuana that they have a drug problem

**Places where they can receive help:**

Cape Breton District Health Authority Addiction Services - 563-2060

Cape Breton Addiction Center - 563-2030

Nova Scotia Commission on Drug Dependency - 902-424-4270

[www.addictionservices.ns.ca](http://www.addictionservices.ns.ca)

<http://www.neama.com/>

**References:**

[www.healthcanada.ca](http://www.healthcanada.ca)

[www.cbpost.com](http://www.cbpost.com)

Newman, Barbara M., Newman, Phillip R. "Development Through Life" Wadsworth/ Cole, 1999

Tavris, Carol, Wade, Carole Psychology Harper Collins, 1996

# **Obsessive Compulsive Disorder (OCD)**

by Brenda Moore

## **What is OCD?**

Obsessive Compulsive Disorder (OCD) is a brain disorder that causes people to have severe obsessions and compulsions. An obsession is a persistent and recurrent thought that is extremely bothersome to the person having it. A compulsion is an almost irresistible urge to act upon a thought. These can interfere with the person's day to day life, cause physical and emotional suffering and negatively impact the way a person functions.

## **Possible Signs of OCD in Young People:**

- Continuing obsessions and compulsions throughout the day
- Constant involuntary worries
- Mood swings and irritability
- Demanding manner
- Slow at some tasks
- Indecisiveness
- Odd behaviours

## **How Young People with OCD may Feel:**

- Worried
- Fearful (their obsessions/compulsions are often linked to specific fears)
- Embarrassed
- Uncomfortable
- Secretive
- Can be unaware that their thoughts or actions are unusual
- Increasing anxiety if the compulsion cannot be acted out right away

## **Examples of Obsessions:**

- Fears of burglars/intruders coming into their home
- Worries of a loved one being hurt or killed
- Feeling something bad will happen if certain rituals or patterns are not carried out
- Worries of becoming sick

Remember - having these thoughts doesn't mean you have OCD. Everyone worries about these things from time to time. To be an obsession, the thoughts have to occur with troubling frequency and in some way negatively impact on the person's life.

**Examples of Compulsions:**

- Constantly bathing or washing one's hands
- Checking locks on windows or doors several times in a row
- Constantly arranging and rearranging, or other ritualistic means of seeking order
- Seeking constant reassurance about safety and security
- Having rituals that must be done in a certain order or an exact way or number of times before anxiety can be reduced

**How to Deal with a Student who Suffers from Obsessive Compulsive Disorder:**

- Be patient and remember that the student is not in total control of their own thoughts or actions
- Direct the student to a professional who can help them with behaviour therapy or medication
- Ensure the student realizes that you do understand their problem and are trying to help

**Things to Avoid when Dealing with a Student who Suffers from OCD:**

- Do not make light of the situation despite the fact that the obsession/compulsion may seem humorous on the surface
- Do not dismiss the situation as regular stress (You are not a doctor!)
- Maintain the student's right to privacy

**For Further Information:**

Kids Help Phone - 1-800-668-6868

Cape Breton Regional Hospital

Mental Health - Child and Adolescent Services - 567-7731

Website: [www.psyweb.com\Mdisord\ocpd.html](http://www.psyweb.com\Mdisord\ocpd.html)

# **Parental Abuse**

by Meghan Wilson

## **Parental Abuse:**

Any behaviour, displayed by the child that creates fear or causes harm to the parent can be defined as abuse. It may include any of the following:

Hitting, punching, kicking

Shoving or pushing

Yelling

Stealing

Breaking or throwing things

Put-downs

Threatening to hurt, maim or kill; or to run away, commit suicide, or hurt themselves

## **Reasons why children abuse their parents:**

Children may be abusive due to a number of factors in their background

They may have grown up in violent and abusive families

They may be affected by reactive attachment disorder, bipolar, or other disorders that can include violent behaviours

They may be filled with anguish and grief and feel their only way of release is through violence

They may be resentful towards their parents for some reason and do not know how to express their feelings in any other way

## **Reasons why children continue to abuse:**

The children are able to obtain power over their parents

Many times the children can abuse and get away with it because the parents are too embarrassed to bring it up to others

The parents become intimidated and surrender to the child's demands

## **How long will the abuse last:**

The child's abusive violence may last for a couple days, several weeks, many months or longer. The duration will depend upon the causes, personality of the child, and how quickly therapy or other forms of help are looked into

**Symptoms of an abuser:**

- They are more likely to keep to themselves
- They may show signs of having violent tempers
- They speak lowly of their parents

**Why is this topic so secretive:**

- It is hard to grasp the idea of a small child causing physical harm to an adult
- There has been such strong effort to educate people about child abuse that the reverse situation of parental abuse seems like a made up story
- Many people do not want to believe that this type of violence is becoming a problem
- Many professionals are untrained and unaware of the potential violence that young children can bring upon their parents due to their mental, emotional, and behavioural issues

**Ways not to approach the issue:**

- Restrict privileges given to the child
- Restrict visits of family and friends
- Act like a therapist by giving unwanted advice

**Ways to approach the issue:**

- Listen to everything the child has to say and hear their side of the story
- Try to find ways for them to express their feelings without the use of violence
- Explain to the parents/family that this is not uncommon and that help is available
- Try to encourage the person into a routine of therapy by explaining all of its advantages

**Places where youth abusing their parents can receive help:****Child/Adult Abuse Hotline**

1-800-752-6200

**Health and Human Services Abuse Hotline**

1-800-96ABUSE

**Teen Health Centre**

Located in Sydney Academy High School  
49 Terrace Street  
Sydney, Nova Scotia  
1-902-562-5464

**References and Places to Find Help:**

[www.silencewhispers.com](http://www.silencewhispers.com)

Child and Adolescent Services  
Cape Breton Regional Hospital  
1482 George Street  
Sydney, Nova Scotia  
902-567-7731

Kids Help Phone: 1-800-668-6868

## **Peer Pressure**

by Meaghan Grant

**Peer Pressure** - pressure from one's peers to behave in a manner similar to or acceptable to them.

### **What volunteers should know about this topic:**

- can begin as early as 2-4 years of age
- adolescents are the most likely to deal with peer pressure (sex, drugs, alcohol, etc.)
- peer pressure is also defined as being mentally pressured into fitting in with the crowd
- in adolescence peers are of the highest importance to each other
- it is important for the youth to have guidance, but decision making must be left up to them

### **Key points to consider when approaching the issue:**

- make the youth feel comfortable
- encourage them to hang around with people they know accept them for who they are
- promote self acceptance
- discourage interaction with individuals who could place them in questionable situations
- encourage them to speak out when they believe strongly about something
- maintain open lines of communication
- explain the importance of good decisions and how actions have consequences

### **What you can do as a volunteer:**

- do not take peer pressure lightly
- emphasize good judgement and individual achievement
- respect the youth
- acknowledge their feelings
- help the youth to discover his or her strengths and talents
- encourage participation in activities which strengthen social skills

### **What to avoid as a volunteer:**

- do not make judgements about situations you are unaware of
- do not try to be a counselor
- do not assume things without knowing the youth's opinion

**Youth resources and contact information:**

- <http://parentingteens.about.com/cs/peerpressure/a/peeraccept.htm>
- <http://www.safehealthyschools.org/peerpressure.htm>
- Kids Help Line - 1-800-668-6868

**Topic references:**

- <http://ianrpubs.unl.edu/family/nf211.htm>
- [http://kidshealth.org/kid/feeling/friend/peer\\_pressure.htm](http://kidshealth.org/kid/feeling/friend/peer_pressure.htm)
- <http://parentingteens.about.com/cs/peerpressure/a/peerpressure/htm>
- <http://www.melpomene.org/girlwise/Peer%20Pressure?what%20is.htm>

## **Positive Role Models**

By: Sara Beth Unsworth

**Positive Role Model** – It is very important for youth to have positive role models in their lives. Positive role models provide youth with encouragement, someone to talk to about their problems and someone to look up to. This is very important because some children and youth do not have this positive encouragement at home.

### **As volunteers, why it may be important to be a positive role model?**

- They may not get it at home
- They look up to us
- They may find it easier to talk to us, rather than a parent or teacher
- They may think we are “cool” so they might listen to our advice

### **Ways to be a positive role model to children and youth:**

- Have a positive attitude yourself
- Try to find something in common with them that you can talk about
- If they feel down, try to cheer them up
- If they have a negative attitude, try to turn it around so it is more positive

### **Ways children and youth may act if they do not have a positive role model in their lives:**

- They may be withdrawn and quiet
- They may seem uninterested in what is happening around them
- They may have low self-esteem
- They may have a negative attitude
- They may bully other youth
- They may be disruptive
- They may act out to get attention

**Things that someone may say if they do not have a positive role model in their lives:**

- I can't do it!
- I don't know how!
- This is stupid!
- I won't get it right!
- It's too hard!
- I'm not good enough!
- This is boring!
- I don't care!

**Reasons why youth may lack a positive role model in their life:**

- Both parents may work so they may not have as much time to spend with their children
- The music they listen to - their role model might be someone like Eminem (foul language and violence in his songs)
- Television and movies
- Learned behaviour - they may only have negative influences

**Places where children and youth can seek help:**

- Kids help phone 1-800-668-6868
- After school programs
- Extra-curricular activities
- Internet
- Big Brothers and Big Sisters Programs
- Teachers and Guidance Councillors

## **Pregnancy & Safe Sex**

Emily King

Teen pregnancy and safe sex are issues that all adolescents will have to address at some time in their early lives. Currently, in Canada, about 5 out of every 100 young women aged 15-19 will become pregnant. Teenagers need to be aware of the resources and information available to them in order to make sound decisions throughout their lives.

### **When a youth is considering whether they should engage in sexual activity there are any things they need to remember:**

The decision to have sex is a personal decision and should not be influenced by anyone else.

Youth should see a doctor before engaging in sexual activity.

Youth should be aware of the possible results of engaging in sexual activity, such as pregnancy or contracting an STD (Sexually Transmitted Disease) such as AIDS (Acquired Immune Deficiency Syndrome).

Certain contraceptives will only prevent against pregnancy, and will **NOT** prevent against STD.

In addition to AIDS, which is an incurable disease that can take your life, examples of other STDs are herpes, chlamydia, gonorrhea and syphilis

### **Signs of Pregnancy**

Whether teenagers have the information they need or not, many of them may still find themselves with the possibility of facing an unexpected pregnancy. Below are some signs that a young woman might be pregnant:

**Missed or late period:** This is often a strong indicator of pregnancy, but a missed period doesn't always mean you are pregnant especially in teenagers who often have irregular periods.

**Morning sickness:** This may also occur anytime throughout the day and it may be a nauseating feeling or actual vomiting.

**Increase in headaches:** This can be an indicator of pregnancy, but headaches are influenced by many other things, as well.

**Weight gain:** This may not always occur immediately in pregnancy and could just be pre-period bloating.

**Tender breasts:** This could also be related to your period.

It's important to remember that displaying these signs does not mean you are definitely pregnant. The only way to be 100% sure is to take a pregnancy test.

### **Pregnancy Tests:**

These tests are simple, painless, and available over the counter in most drug stores.

They can also be ordered over the internet.

Most pregnancy tests require a urine sample. The test stick reacts to a hormone which is present only in pregnant women.

Prices range, but typically a test stick costs several dollars.

Making an appointment to see a doctor is the best way to be certain about pregnancy and get advice about available options.

Any teen who is pregnant should be examined by a doctor as soon as possible.

### **Contraceptives:**

There are many contraceptives available to youth. Some contraceptives protect against both STD's and pregnancy and others only protect against pregnancy. To make it easier to understand, we have included a table that describes several of the available contraceptives and the pros and cons involved with each.

### **Methods of Contraception:**

#### *Birth Control Pill*

Description - Taken daily

Effectiveness - Almost 100%

Pros - Regulates periods and minimizes PMS

Cons - May cause headaches or sickness

STD Protection - No

#### *Male Condom*

Description - Latex covering for penis

Effectiveness - 85% to 98%

Pros - Inexpensive and easily obtainable

Cons - May split or tear

STD Protection - Yes

### *Female Condom*

Description - Insertable condom  
Effectiveness - 85% to 98%  
Pros - Can be inserted prior to sex  
Cons - Penis must enter condom  
STD Protection - Yes

### *Diaphragm*

Description - Insertable cup that blocks sperm from entering the uterus  
Effectiveness - 85% to 96%  
Pros - Can be inserted 3 hours prior to sex if spermicide is used  
Cons - May cause infections  
STD Protection - No

### *Injectable Contraceptive*

Description - Shot that injects hormones to stop ovulation\*  
Effectiveness - Almost 100%  
Pros - Lasts from 8 - 12 weeks  
Cons - Weight gain and irregular periods  
STD Protection - No

### *Implant*

Description - Placed under the skin and produce hormones that block ovulation\*  
Effectiveness - 99%  
Pros - Lasts for 5 years  
Cons - Irregular or stopped periods  
STD Protection - No

\*ovulation is when a woman's ovaries produce an egg which can then be fertilized by a man's sperm resulting in pregnancy.

### **Emergency Contraceptive Pill:**

The Emergency Contraceptive Pill, also known as "The Morning After Pill," is taken when a contraceptive method has failed such as a condom breaking or a pill that was forgotten .

### **Facts on the Emergency Contraceptive Pill:**

- Approximately 95% effective.
- Must be taken within 72 hours (3 days).
- May cause vomiting or a feeling of nausea.
- Should only be used in emergency situations, not as a birth control method

**Discussing the Pregnancy:**

When a volunteer is faced with discussing a teen pregnancy with a youth there are many things they should and shouldn't do.

**Do:**

Suggest the teen see a doctor/counsellor.

Be positive.

Listen and be there for her.

Provide her with information on her different options.

**Don't:**

React negatively.

Force her to tell her parents prematurely, if she's not ready for that yet.

Force your opinions on her.

**Options for Pregnant Teens:**

When a teenager discovers they are pregnant they will most likely experience many different and mixed emotions. Pregnant teenagers must be informed of all of their options in order to make their own personal decision on the outcome of their pregnancy.

**Adoption:**

Nova Scotia's Teen Health website says that "it's important to talk to a social worker early in the pregnancy if adoption is what you've chosen." Dealing with adoption may be hard for a teen mother because she will have to sign over all her rights to her child. This may be hard for some mothers to recognize and accept so therapy may also prove to be helpful.

**Abortion:**

If the mother decides to terminate her pregnancy through abortion it's very important to talk it through beforehand. Counselling both before and after is very important.

**Becoming a Parent:**

A final decision to keep the child is also a very hard decision to make. Both the mother and father must realize the effects this decision will have on their lives. Financial support may be needed, and both parents must have the child's best interest at heart.

**Local Services:**

Abortion Alternatives  
Birthright Pregnancy Service  
24 Hour: 1-800-550-4900

**Abortion Services:**

The Morgentaler Clinic  
5730 McCully  
Halifax, NS  
1-902-455-9865

QEII Clinic  
Halifax, NS  
1-902-473-7072

**AIDS Information:**

AIDS Coalition of Cape Breton  
150 Bentinck Street  
Sydney, NS  
1-902-567-1766

**Birth Control Information:**

Planned Parenthood Cape Breton  
150 Bentinck Street  
Sydney, NS  
1-902-539-5158

**Help Lines:**

1-902-562-4357 (Help Line)  
1-902-567-0330 (Teen Time)  
1-902-539-4480 (Tel-Med)

**References:**

[www.chebucto.ns.ca/health/teenhealth/sexualhealth/contraceptio/contraception.htm](http://www.chebucto.ns.ca/health/teenhealth/sexualhealth/contraceptio/contraception.htm)  
[www.betf.ca/researchreports/99sdo1/report.html](http://www.betf.ca/researchreports/99sdo1/report.html)

# **RACISM**

by Maggie Mombourquette

**Racism** is the prejudice that members of one race are intrinsically superior to members of other races. Racism is also discriminatory or abusive behavior towards members of another race.

## **Examples of racism:**

- Making fun of the clothing, food or physical appearance of people from different cultures.
- Telling jokes that are directed at a particular ethnic group.
- Using insulting language about certain cultural groups.
- Making fun of a person's accent or their name.
- Refusing to work, play or sit beside other people who are from another culture or who speak another language.
- Stereotyping people from other ethnic groups.
- Not including students from particular backgrounds in classroom activities.
- Not respecting a person's religious beliefs.
- Bullying students from different ethnic groups.
- Assaulting people from different cultural backgrounds.

## **Why people are racist:**

- Insecurity within themselves.
- Fear and ignorance of other cultures.
- Possible parental influence.
- Possible low self-esteem.
- The need to feel superior, above and better than others.
- Inability to accept others outside of their own race, religion, etc.

## **Effects of racism on a child:**

- May be afraid to go to school and may miss a lot of time.
- May have trouble focusing or concentrating in the classroom.
- May have feelings of anxiety or unhappiness.
- May have trouble making friends.
- May fall behind in schoolwork; receive lower grade.
- May reject their own culture and values.
- May be confused about his or her own identity.

- May be aggressive, angry or disruptive.
- May have feelings of resentment.

**Ways to approach the issue:**

- Help the person who has experienced racism realize that they are special and unique and that they are not inferior to any group but that they are equal.
- Explain to the person who has made a discriminatory remark that they are not superior to any such race, religion, etc. and that they should treat others the way that they themselves wish to be treated.
- If you feel that the person may need counseling, contact a responsible adult like the program director to inquire on sources that could help

**Ways not to approach the issue:**

- Do not condemn the perpetrator. This only increases hostility. Instead try to make them aware of their attitude of non-acceptance and find out how they would feel about being treated this way.
- Do not put the person down for a racist belief or comment. This will push them away. Instead try to help them see the error in their thinking.
- Instead of lecturing, try to explain the benefits of tolerance and accepting everyone regardless of race, ethnicity, religion etc.

**Where a child can seek help if they have experienced racism:**

- Kids Help Phone # 1-800-668-6868
- Teacher or adult
- Someone they trust

**Sources:**

- <http://www.racismnoway.com.au/pdfs/recognising.pdf>
- <http://www.fekids.com/article/0%2C65-3482%2C00.html>
- [http://www.eurekalert.org/pub\\_releases/1996-07//DU-SRPT-160796.php](http://www.eurekalert.org/pub_releases/1996-07//DU-SRPT-160796.php)

# Schizophrenia

Naomi McLean

**Schizophrenia** is one of Canada's most serious health problems. It is not something to be taken lightly, not to be ignored.

## **There are many different types of schizophrenia which include:**

- Paranoid schizophrenia
- Disorganized schizophrenia
- Catatonic schizophrenia
- Residual schizophrenia
- Schizo-affective disorder
- Undifferentiated schizophrenia

Schizophrenia is a severe and disabling brain disease. This disease affects about 1 percent of the population. More than 2 million Americans suffer from this illness in a given year.

## **Some signs of schizophrenia include:**

- Excessive fatigue and sleepiness or an inability to sleep
- Isolation
- Drug or alcohol abuse
- Bizarre behaviour
- Forgetfulness
- Conversation that seems deep but is not logical or coherent
- Delusions - having thoughts that are not true such as thinking that you are the King of Canada
- Hallucinations - hearing, seeing or otherwise perceiving things as real when they aren't such as hearing voices in your head or talking to people who aren't there
- Disrupted thoughts and behaviour

## **Some facts about schizophrenia are:**

- It can affect you at any time in your life but the time of onset is:
  - Most commonly between ages 16-25
  - Uncommon over the age of 30
  - Rare after 40
- If no parents have schizophrenia then there is a 1% chance that you will develop it.

- If one parent has schizophrenia, your chances of developing it are 13%.
- If both parents have schizophrenia, your chances of developing it are 35%.
- Schizophrenia can often be effectively treated with medication so that the person can function in life.

**Ways to approach a situation where you suspect signs of Schizophrenia:**

- If a student fears that someone they know has this disease, then refer the student to his/her doctor or to a school nurse or guidance counsellor to help them understand the effects and treatment that are available.
- If you believe that the student may be exhibiting signs of the disease, notify a responsible person within your organization who can make the appropriate decisions.
- Even in the case where a student is known to be schizophrenic, you should not be alarmed. You should continue to be helpful and supportive as you would be with anyone else. People with mental disorders can still respond positively to kindness.
- If their behaviour appears dangerous or is increasingly agitated, you should get help immediately.

**Ways not to deal with the situation:**

- Do not think you are capable of dealing with this alone. You are not a doctor.
- Do not discuss someone possibly being affected by this disease to anyone other than an appropriate authority figure.

**Help Sources:**

World Wide Fellowship for Schizophrenia and Allied Disorders

Telephone: 1-416-961-2855

Fax: 1-416-961-1948

Email: [info@world-schizophrenia.org](mailto:info@world-schizophrenia.org)

Web address: [www.world-schizophrenia](http://www.world-schizophrenia)

The local Schizophrenia Society

**References**

[www.helpguide.org/mental/schizophrenia\\_symptoms.htm](http://www.helpguide.org/mental/schizophrenia_symptoms.htm)

[www.schizophrenia.com/family/sz.overview.htm](http://www.schizophrenia.com/family/sz.overview.htm)

# **Self Esteem**

by Shannon Oldham

## **What is self esteem?**

Self esteem is how we feel about ourselves. It is how we see ourselves and how we value ourselves as individuals.

## **What are the benefits of positive self esteem?**

- children with positive self esteem are much healthier and happier
- they tend to do better in school and are more willing to experience new things
- having a positive self esteem builds confidence
- this can empower them to deal effectively with negative situations

## **Indicators of negative self esteem:**

- making negative comments about appearance
- lack of positive social interaction
- negative comments about intelligence

## **Ways to deal with negative comments by youth:**

- gently challenge the negativity by suggesting another way of thinking about it
- try distracting the youth by saying something nice or encouraging
- if you notice these comments becoming routine, try starting a positive conversation before the youth has a chance to say something negative
- try to discover the youth's strengths and interests and focus some time on them

## **Tips and strategies for building self esteem:**

- encourage the youth
- show your interest in their happiness
- support them when they encounter difficult situations
- listen to the youth; sometimes they just want to talk something out
- teach the youth to set goals and attain them; experiencing success and receiving praise helps build positive feelings about yourself

**Recommended support:**

[www.more-selfesteem.com](http://www.more-selfesteem.com)

Kids Help Phone: 1-800-668-6868

**Sources:**

[www.nccc.org/guidance/self.esteem.html](http://www.nccc.org/guidance/self.esteem.html)

[www.buildselfesteem.homestead.com](http://www.buildselfesteem.homestead.com)

# SUICIDE

Janice McDonald

**Definition:** Taking one's own life

## **Why a person may attempt suicide:**

- ▶ loss of boy or girlfriend
- ▶ poor grades
- ▶ unwanted pregnancy
- ▶ lack of affection and emotional support from parents
- ▶ parental divorce, step-family problems
- ▶ pressure from parents to excel
- ▶ chemical imbalance causing severe depression or other mental illness
- ▶ history of suicides in family
- ▶ lack of positive friendships with peers
- ▶ sexual identity problems
- ▶ social isolation

## **Warning signs of suicidal thinking - more than one is often seen:**

- ▶ changes in social interaction
- ▶ spending a lot of time alone
- ▶ feelings of worthlessness and lack of hope
- ▶ change in eating and sleeping habits
- ▶ impulsive actions - running away, rebelliousness or violent anger
- ▶ marked personality change
- ▶ unusual neglect of personal appearance
- ▶ sudden bursts of energy
- ▶ taking neutral comments and turning them into negative feelings about themselves
- ▶ complaints about feeling bad physically - headaches, stomachaches, fatigue
- ▶ someone close to the person has committed suicide
- ▶ giving or throwing away their possessions
- ▶ suddenly going from depression into a period of cheerfulness and high energy
- ▶ having bizarre thoughts

**Someone may say to you things like:**

- ▶ "I won't be a problem for you much longer."
- ▶ "Nothing matters."
- ▶ "It's no use."
- ▶ "I won't see you again."
- ▶ "I'm planning to kill myself."

**Why someone might deny their suicidal thoughts:**

- ▶ They see suicide as a sign of weakness in their character
- ▶ They believe suicide is a sin
- ▶ They worry that people will think they are crazy or that they will be locked up
- ▶ They believe that no one is capable or would bother to help them anyway
- ▶ They really believe they want to die and are hiding their desire

**What you should say or do:**

If the teen is in a position to actually act on their thoughts of suicide:

- ▶ Get help - call 911, get an adult, stay with the person or have someone else trustworthy stay with them while you get immediate help

**If the teen is talking about the idea of suicide or has several warning signs:**

- ▶ Always take it seriously
- ▶ Tell the responsible adult in the situation
- ▶ Remember you are not a psychiatrist but are listening to them as an older peer
- ▶ Ask only open-ended questions about their feelings
- ▶ Help them to talk about their feelings by making them feel safe
- ▶ Listen and encourage talking by saying things like, "Go on," or "I see," or "Keep going, I'm listening."

**What you should NOT say or do:**

- ▶ Do not assume they are just trying to get attention
- ▶ Do not try to handle it on your own
- ▶ Do not try to be a counsellor; the problem is too big

- ▶ Do not make judgments about their situation by saying things like:  
"Things really aren't that bad."  
"That's not a good way to handle your problem."  
"It'll be okay."  
"How can you even think about doing that?"  
"Suicide is wrong, you should be ashamed of yourself."

**Where to go for help:**

[www.adolescentcrisisteam.com](http://www.adolescentcrisisteam.com)

Kids Help Phone: 1- 800 - 668-6868

Suicide Hotline: 1- 800 - Suicide

Suicide Hotline Youth Crisis 1- 800 - hithome

**References:**

[www.adolescentcrisissteam.com](http://www.adolescentcrisissteam.com)

[www.healthpartners.com](http://www.healthpartners.com)

[www.aacap.org/publications/factsfam/suicide.htm](http://www.aacap.org/publications/factsfam/suicide.htm)

[www.cp.org/english/online/full/family/040112/U011224AU.html](http://www.cp.org/english/online/full/family/040112/U011224AU.html)

Patterson, W.M, Dohn, Bird, and Patterson, (1983, April). Evaluation of suicidal patients: the SAD PERSONS scale.

Youth Peer Transformation Program  
Community Youth Volunteer Empowerment Toolkit  
**TOOLKIT TEMPLATE**

*(The Toolkit is a resource written by volunteer mentor / tutors to help other volunteers, especially new inexperienced ones, in working with at-risk kids. The topics should be issues that apply to real kids who might come into the Youth Peer Transformation Program. The write-ups should be 2-4 pages, written in simple point form, and should be limited to the issues which might directly affect the volunteer. It is hoped that the following example will assist the volunteer in developing the framework of the topic write-up.)*

\_\_\_\_\_ (Toolkit topic)

by \_\_\_\_\_ (volunteer's name)

**What Volunteers Should Know About This Topic**

•

*(This is the background information needed to answer the question, “What do you think new volunteers should know about this topic in case they encounter this issue with a youth they are assisting?” )*

•

**What Kids Bring Up About This Topic**

Helpful Responses and Wrong Approaches

•

*(This section should address questions or comments on this topic brought up by kids. The writer should suggest what the volunteer could say or do in response to the kid, and what the volunteer should definitely not say or do. For example, if a youth said to a volunteer that she thinks she might be pregnant, you could offer suggestions to the volunteer about how the youth could find out for sure and you could coach the volunteer about what not to say.)*

•

## **What Volunteers Are Concerned About That Kids Don't Bring Up**

### **Helpful Actions and Wrong Moves**

- 

*(This section should deal with the volunteer's concerns about a youth, even if the youth has not brought up the issue. For example, if a youth came in with dilated eyes and unusual behaviour, the volunteer might suspect drug abuse. What could you suggest to the volunteer as helpful steps in dealing with the youth or what could you advise the volunteer to avoid saying or doing?)*

- 

### **Additional Tips for Volunteers**

- 

*(This is an optional section intended for situations that don't really fit as youth issues or volunteer concerns, but are reminders that could still be useful for the volunteer.)*

- 

### **Youth Resources and Contact Information**

- 

*(This section should mention any community agencies, websites, or other contact information which the volunteer should be aware of that might help provide additional expertise on issues related to the Toolkit topic. Sometimes this would be technical information just for the volunteer. In other cases, it might be practical information for the volunteer to give to the youth.)*

- 

### **Topic References**

- 

*(The last section should mention the sources for the background information or advice given to volunteers related to this topic. It will give credit to the originator of any suggestions, and make it easier for another volunteer to look up the same information. It is not necessary to write up a reference for suggestions which come from the volunteer's own experiences, and hopefully this contribution will be part of the topic write-up.)*

-

## Youth Peer Transformation Program

### **Youth Volunteer Staff Support Procedures**

1. Recruitment takes place after posting program descriptions and setting up information tables at the local high schools and university.
2. Arrangements are made for the new recruit to be interviewed by staff at the Youth Peer office.
3. The program is explained to the recruit who is then given the paperwork to fill out.
4. The volunteer fills out the Child Abuse Registry form.
5. The volunteer fills out the Police Check form.
6. The volunteer signs an Oath of Confidentiality.
7. The volunteer personally takes the Police Check to the police station and signs the form in front of witnesses.
8. Staff fill out and send the Child Abuse Registry form to Social Services.
9. Staff proceed to check the references that the volunteer has given them.
10. Arrangements are made for the volunteer to attend a mentor / tutor training workshop.
11. The mentor / tutor training is broken into segments highlighting the relationship which develops between volunteer and student. The training also provides cultural sensitivity training with a particular focus on marginalized groups such as the Mi'kmaq and Black youth in this community, who are actively encouraged to participate.
12. Volunteer training is considered an ongoing process throughout the program.
13. When tutoring is taking place, trained staff are available at all times to ensure that the volunteer is having no difficulties. This is a critical point for the volunteer and steps are taken to make sure that the volunteer is comfortable in his / her role as a mentor / tutor.

14. As the volunteer becomes more comfortable in his / her role, more training and tips are added to help make their job a little easier.
15. As an incentive to sustain the interest of volunteers, free training and workshops are made available throughout the program in areas that relate to working with youth at-risk.
16. Birthdays are recognized and a birthday cake is presented to the volunteer along with a card signed by staff and students.
17. A letter of reference is written for the volunteer whenever requested.
18. All volunteers are recognized during Volunteer Week with a special meal at a local restaurant and a certificate of appreciation for their volunteer work.
19. Staff highlight how the experience that the volunteer gets working with our organization is a valuable tool that will be an asset for them in whatever career they choose in life.
20. To keep a volunteer with our organization, ongoing contact is really important. Staff endeavour to know each volunteer individually and show interest in what is happening in their lives.
21. Staff keep in touch with volunteers if a gap has occurred since they last volunteered. Telephone contact is a valuable way to bring the volunteer up to date on the organization and to spark their interest to come back and do more volunteering.
22. Staff are always on the alert for any warning signs related to the volunteer's attitudes or level of participation. Maintaining close contact with the volunteer at their workstation makes it possible to notice concerns at a early stage so that they can be effectively resolved.
23. Volunteers are valued as being central to the achievement of program goals. Staff go to great lengths to make sure that the volunteer understands how vital their role is in creating the magical environment in which at-risk youth flourish and volunteers feel fulfilled.

**Youth Peer Transformation Program**

266 Whitney Avenue  
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Phone: (902) 539-8228 Fax: (902) 539-7407

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**Mentor / Tutor Application**

Name \_\_\_\_\_

Level of Education \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone \_\_\_\_\_

Date \_\_\_\_\_

**In case of emergency contact:**

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Phone \_\_\_\_\_

Alternate Phone \_\_\_\_\_

**Please answer the following questions:**

1. Why do you want to become a Youth Peer tutor? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What personal qualities do you have that will help you to be a good tutor? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. What previous community activities have you been involved with that will help in dealing with youth? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. What times and days are you available to tutor at the Youth Peer Centre? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **Mentor / Tutor Training Introduction Outline**

### **Section 1**

- Welcome Circle
- Introductions
- Overview of Training
- What is Peer Tutoring?
- Role of the Tutor
- Role of the Student

### **Section 2**

- Communication Skills
- Role Plays - Ineffective and Effective Tutor Communication

### **Section 3**

- Learning Disabilities

### **Section 4**

- Cultural Sensitivity

— **BREAK** —

### **Section 5**

- Social Behaviours
- Role Plays - Ineffective and Effective Responses to Anti-Social Behaviours

## **Section 6**

### Reading Process

- Role Play
- Strategies of the fluent reader
- Introduction to the less skillful reader
- Tutor tips

## **Section 7**

### Writing Process

- Strategies of the fluent writer
- Introduction to the less skillful writer
- Tutor tips

## **Section 8**

### Math Process

- Math learning strategies
- Math anxieties of students and tutors
- Tutor tips

Note: Complete Tutor Training consists of the 2 hour introductory session outlined above, 2-4 hours of direct tutor-student observation, and a follow-up 2 hour session.

Youth Peer Transformation Program  
Mentor / Tutor Training Workshop  
**Communication Skills and Conflict Management**

**Welcome Circle / Introductions**

**Housekeeping**

- Bathroom locations / rules
- Drug / smoke free building
- Pizza break for tutor trainees
- Handing out of mentor / tutor information kits
- Availability of Volunteer Community Youth Empowerment Toolkit

**Role Play - Ineffective Communication**

- Tutor is fussing with personal papers.
- Tutor is preoccupied and doesn't seem interested in youth.
- Tutor makes excuses to leave tutoring area, i.e. has to make a phone call, go to the bathroom, etc.
- Tutor gets youth to take out assignments and instead of really helping the student, does the work for him to hurry the session along.
- Youth learns nothing, feels let down and frustrated and is unlikely to come back.

— *Use Flip Chart to Record Feedback* —

**Role Play - Effective Communication**

- Tutor welcomes with a bright smile and seems genuinely interested in wanting to be helpful.
- Tutor is a good listener.
- Tutor uses body language positively.
- Tutor reviews what has to be done.
- Tutor takes each subject and uses Pause, Prompt and Praise techniques.
- Tutor helps youth to feel at ease so that the youth will come back for more help.

— *Use Flip Chart to Record Feedback* —

### **Role Play - Ineffective Conflict Management**

- Youth shows up and doesn't have any work with him.
- Youth doesn't seem interested and just wants to go on the computer and play games.
- Youth gets up and goes to the bathroom, and stops at several tutor matches along the way to say hello to his buddies.
- Youth expresses to the tutor that he doesn't really like it here and doesn't think he'll be back.
- Tutor is feeling uneasy and unsure how to handle the situation. He lets the youth push him around, feels helpless and ineffective, and consequently wants to quit tutoring this youth.

### **Role Play - Effective Conflict Management**

- Tutor recognizes that youth needs to be challenged. He is prepared for the youth's excuses and stalling tactics and is prepared to handle them with respect and thoughtfulness.
- Tutor explains that because the youth didn't bring in any work, he has something else planned (picks out a book, goes over some math, finds an educational game on the back shelf, ie. Scrabble, Boggle, or suggests they go on the computer together and research something of significance.
- If youth is persistent, tutor doesn't allow youth to dominate the situation.
- Tutor is assertive, not aggressive with youth. "I would like for us to do some work right now and after that we will look at putting in some time on the computer." or "John, I would appreciate it if you would wait for break time to visit with your friends." or "I am volunteering my time to help you, and I really would feel better if I could go home today thinking that we accomplished something. Do you think we could just try to get a few questions done?"
- Tutor encourages the youth to bring work with him for the next session. "As for our next session, I'd like your word that you will bring something for us to work on. Can I count on you for this?"
- Tutor hears from the youth that he might be coming back. "I really hope you do come back. I really think that I can help you if you give me a chance."

— *Use Flip Chart to Record Feedback* —

## **How Would You Handle the Following Situations?**

### **Five Scenarios and Suggested Responses**

The following are some possible situations which might come up in the course of your volunteering at the Centre. The guest speakers, who are trained youth workers, will be asked to address these questions as well as any others which come from the audience of tutors.

#### **Scenario 1**

Tutor match is going well, student starts to ask tutor questions, something like the following: “Where are you from? What is it like there? What kind of food do you like?”

#### **Suggested Response**

“I’m glad you’re interested in where I come from. I’d be happy to tell you more about it. I could show you a map of that area and we could look up stuff on the computer. Maybe we could even have a group exchange some time on where everybody comes from.”

#### **Scenario 2**

Student begins to ask personal questions: “How old are you? What is your last name? Do you have a boyfriend? What is your phone number? I saw you down by the corner of Centre and St. Peters Road. Do you live down there?”

#### **Suggested Response**

You could pretend you didn't hear the question. You could say something like, “Come on now, lets get back to the math.” You could make a joke and say, “In your dreams buddy.” If you are pressed, simply say, “No offence, buddy, I’m not going tell you and please don't ask again.” You could also say, “We signed an oath of confidentiality and staff told us not to talk about that stuff.”

## **General Advice to Tutors - Stay Receptive and Interested but Don't Encourage Intimacy or Give Out Personal Information!**

### **Scenario 3**

Youth fails to show up for tutor matches three times in a row without an excuse. What can you do as a tutor to deal with this problem?

#### **Suggested Response**

Get a jump on the problem before it starts. When you meet with your student, be honest and direct. Tell them that you are very busy with school and other activities and you are volunteering your time with the student. Put it directly to the student, "Are you going to come?" or "Are you going to call the office if you can't come?" or "I really need to know that I can count on you to be here if you say you will be." The volunteer could call the Youth Peer office before leaving home or university to see if there's any news from the student. Tutors could brainstorm ideas of how they could use their time productively at the centre, such as researching a new topic to add to the Community Youth Volunteer Empowerment Toolkit, if the student doesn't show up.

### **Scenario 4**

Youth starts to hit on his tutor, using sexually suggestive language or body movements. "I really like you, will you marry me?" Youth seems to be getting a crush on the tutor. "I really need some fresh air, could we go for a walk on the break, so just the two of us can talk." Youth brings a present for the tutor. Youth puts his hand on the tutor's leg or shoulder during the tutoring session.

#### **Suggested Response**

Tutor tells student that their relationship is purely friends. Tutor response could be: "I want you to know that I really enjoy tutoring you and I want to continue. I want to make it clear that I like you and we're friends and that's all we are. Do you understand what I'm saying?" Tutor could say, "Please don't do that. I'm feeling uncomfortable and a bit embarrassed so lets just forget all about this and get on with our work." Tutor could say, "Sorry, we aren't allowed to date our students so

cut it out, ok?” Tutors should be very careful that they don't give mixed messages to their students. Clothing and the way they're worn should not be considered sexy. Avoid intentionally or unintentionally stimulating your student's sexual appetite.

### **Scenario 5**

Tutor overhears students talking about something that sets off alarm bells about potential danger to a student, tutor, staff, equipment, or the building.

#### **Suggested Response**

Tell assistants or staff immediately.

#### **General Advice for Tutors**

- Don't set these youth up for failure by tempting them.
- Tutors should put their personal belongings in a safe place (in the trunk of the tutor's car or locked away by staff).
- Tutors should dress casually - please remember to leave the tight sweaters, very short or low-cut tops, torn clothing, or see-through blouses at home.
- Tutors should call the Youth Peer office if they can't come.
- Tutors should not give personal information to youth (no last names, phone numbers, addresses, or email).

#### **Volunteer Screening Packages**

Tutors must complete Tutor Application, Child Abuse Registry form, Police Check form, etc. and return to the office as soon as possible.

Youth Peer Transformation Program

**Mentor / Tutor Training Evaluation**

1. Do you think that the training introduced you realistically to the needs of the students?

Yes  No  Please further explain your response or give a suggestion:

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2. Do you feel that the 2-hour training session was enough time for you to feel prepared to start as a mentor / tutor?

Yes  No  Please further explain your response or give a suggestion:

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3. Do you feel that you have been provided with enough teaching strategies to be successful in helping your student advance through one-to-one tutoring?

Yes  No  Please further explain your response or give a suggestion:

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4. Do you feel that you have been prepared effectively to deal with challenging social situations in your mentoring the student?

Yes  No  Please further explain your response or give a suggestion:

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5. Do you feel that the staff demonstrated their supportiveness and appreciation of you as a volunteer mentor / tutor?

Yes

No

Please further explain your response or give a suggestion:

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6. What aspect of the training did you like best and why?

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7. What aspect of the training do you feel most needs improvement and why?

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8. What questions, scenarios, or suggestions do you have which might be useful to enhance future volunteer mentor / tutor training sessions?

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# Code for Volunteer Involvement

## Introduction

Toolkits are handy boxes full of a variety of useful items designed to help the worker do a specific job. This publication - as a toolkit for volunteers - is intended to provide the same kind of easily accessed, functional assistance.

Many jobs involving tools begin with a plan and a framework from which the project evolves. Volunteer Canada, a national organization dedicated to promoting volunteerism, has provided such a plan by identifying the following major topic headings as its Code for Volunteer Involvement. These are standards seen as essential to the best possible support of volunteers in any organization.

Volunteer Program Components:

- Executive Support
- Policy and Procedure Support
- Effective Coordination
- Proactive Recruitment
- Consistent Screening
- Practical Orientation & Training
- Meaningful Assignments
- Appropriate Supervision
- Planned Feedback
- Valued Treatment
- Regular & Special Recognition

In the following pages, these areas are defined and explained in simple terms to reveal the underlying framework of what makes a volunteer position fulfilling as well as providing a service to the organization. Following each definition, information is provided to illustrate exactly how Youth Peer Transformation has organized to attract a broad base of effective, dedicated and satisfied volunteers. Youth Peer Transformation utilizes all of them in its extensive collaboration with volunteers thereby providing these volunteers with a rewarding, full experience that encourages more volunteerism in the future. Volunteers may find this section useful for understanding their value and place in the organization.

## **Executive Support**

Definition: *The Board of Directors and senior management acknowledge the vital role of volunteers*

In other words: **You matter to the people at the top.**

- Management expresses that the relationship of volunteers working one-to-one with at-risk youth is central to the program
- Management considers the fulfillment of the needs and preferences of volunteers as the best way to recognize their contributions
- Management designs procedures which are respectful of the strengths of volunteers and provides regular opportunities for volunteers to respond to them
- There is on-going communication and support between and among management, staff, tutors and students
- There is evaluation of each volunteer's role with the goal of enhancing both the program and the volunteer's sense of satisfaction and contribution to the overall success of the program

## **Policy and Procedure Support**

Definition: *These provide a framework that defines and supports volunteer involvement*

In other words: **Everyone knows what to expect and why.**

- There is a book that outlines everyone's role and responsibilities, ways of operating, and rules and reasons, and it is explained in the training how to use it as a reference
- Volunteers are given copies of the policies and procedures and shown where to look for the book that will remind them of anything they forget from their training
- Staff are consistent in explaining and reinforcing program standards
- If a volunteer is uncertain how to handle a situation, the volunteer knows who to ask and where to get the resources needed

## **Effective Coordination**

Definition: *One person is dedicated to being responsible for all volunteers*

In other words: **You know who to go to if you have problems or questions.**

- The Volunteers Coordinator oversees the volunteer program ensuring that volunteers receive continuous support from the Resource Developer and the Program Assistant
- All staff interact with and help guide volunteers while being clear on who is responsible
- Recruitment, training, scheduling, evaluation and coordination are overseen by the Director with ongoing input and feedback from volunteers, staff, and the Supervisor

### **Proactive Recruitment**

Definition: *Recruitment and selection methods involve a broad, diverse range of volunteers*

In other words: **We try harder to find the right people.**

- Staff make repeated personal visits and presentations to high schools and universities
- Additional and ongoing efforts are made to recruit volunteers from marginalized groups
- References are carefully checked with teachers, professors, and guidance counsellors
- Police background and child abuse registries are checked
- Individual interviews are done not only to familiarize the volunteer with the program but to ensure a good match between program and volunteer

### **Consistent Screening**

Definition: *A process for choosing volunteers is consistently communicated and delivered*

In other words: **You were carefully and fairly chosen for this job.**

- An application form is filled out by all prospective volunteers
- Individual interviews are conducted prior to training
- Criminal background checks are done
- References are checked
- An Oath of Confidentiality is explained and signed by the volunteer
- Information that is gathered is used to assess the appropriateness of the assignment

### **Practical Orientation & Training**

Definition: *Volunteers receive an orientation and training that is appropriate to their assignments*

In other words: **By the time you get to work, you know what to do and how to do it.**

- A multi-step approach is taken so that the volunteer is comfortable and familiar with the program prior to beginning work
- Tutors are welcomed in to visit the centre in order to get a feel for it and to meet the staff and other volunteers
- Formal training sessions focus on teaching communication, conflict management, and tutoring skills by modelling through entertaining and reality-based roleplaying examples
- Role playing is done by young staff who are former volunteers
- There is time for on-site observation and orientation
- New tutors are given the opportunity to shadow a staff person
- Time is built-in for volunteer tutors to interact in a casual, relaxed way with students and staff each day before beginning the tutor-student matches

### **Meaningful Assignments**

Definition: *Volunteer jobs address the purpose of the program in relevant ways*

In other words: **What you do, counts!**

- Staff collaborate thoughtfully to arrange the best matching of volunteers and clients
- Volunteers are encouraged to provide feedback about their assignments
- Changes are willingly made to benefit the volunteer, the student, and the program
- Communication flows both ways and is conducted casually as well as formally
- Whenever a conflict occurs between the volunteer and the client, the volunteer is offered suggestions for resolution including the option of being matched with another youth

### **Appropriate Supervision**

Definition: *Volunteers have appropriate supervision*

In other words: **How you do it your job, is our job.**

- Before each tutoring session, the staff work with the tutors to plan specific learning activities as well as to discuss any concerns or issues the tutor or staff has
- Staff focus on a positive relationship between tutor and student and make changes where necessary to ensure the best possible experience for both
- Staff maintain steady contact with the tutors through telephone calls to remind them of their scheduled volunteer day and time

## **Planned Feedback**

Definition: *Volunteers are given regular opportunities to give feedback*

In other words: **You are listened to and you get regular instruction and help.**

- Feedback is given to the volunteer regarding lesson plans and suitability of tutor matches
- There is ongoing monitoring of the volunteer's schedule with opportunities for the volunteer to request changes in client matches and scheduled days
- Tutors are encouraged to telephone if they cannot come in as scheduled and also to check in with the centre to make sure their student is coming that day
- Tutors always know that a staff member is available to speak with them privately about any concerns they have about their volunteer role or their relationship with their student
- Meetings are held periodically to provide ongoing assistance and to provide volunteers the opportunity to share concerns and successes with the staff and other volunteers

## **Valued Treatment**

Definition: *Volunteers are welcome and treated as valued, essential members of the program*

In other words: **You feel safe, secure and important.**

- Staff are always in attendance so there is ongoing supervision and guidance
- The building is secure; no one enters the building without being invited in
- Volunteers are reassured that their encouragement and acceptance is what gives students the sense of belonging and self-esteem needed to go beyond previous obstacles
- Staff & management express that the volunteer's commitment is the heart of the program

## **Regular & Special Recognition**

Definition: *Volunteer contributions are regularly acknowledged formally and informally*

In other words: **You know you are valued, even loved!**

- Every social activity feels like a party and all volunteers, staff and students are invited
- Tutors and students are given birthday cakes, recognition, and token gifts at break time
- Holiday parties include Halloween, Christmas, Valentines Day and Easter
- Workshops are held periodically to allow the volunteers new opportunities for learning
- A Volunteer Appreciation Luncheon is held every year at a local restaurant
- A year-end Closing Party - usually an outdoor barbecue - is held for tutors and students
- Personal Certificates of Merit, signed by the Supervisor, are awarded to every volunteer

# Job Design Theory

## Introduction

Did you ever think that your volunteer job had to be “designed?” It does. The following areas must be explored by senior management and management teams in order to assure that volunteers are given meaningful jobs that are essential to the purpose of the organization they are serving.

In the Youth Peer Transformation Program, careful thought is given to personality types, learning styles, and compatibility for each tutor - student match to ensure the best possible outcome for both.

## Mandate Clarification

Definition: *Review the mandate of the organization to make sure everyone is clear on the purpose.*

In other words: **Why does the program exist?**

At Youth Peer: To help youth, ages 8 to 18, who are considered to be at-risk. Youth have a wide range of problems related to the law, mental health, family situations, social behaviour, and school. They need a place where they feel accepted so their self-esteem can be enhanced and they can function better in the community.

## Necessary Task Identification

Definition: *Identify the functions that support the mandate.*

In other words: **What are the specific tasks the program needs to carry out?**

At Youth Peer: One-on-one tutoring  
Interactive, fun and educational activities in addition to academic tutoring  
Art and guitar lessons  
Peer mentoring in a supervised place and time

## Quality & Skill Requirements

Definition: *Establish the types of qualities and skills needed to perform the functions*

In other words: **What people do we need to do the tasks?**

At Youth Peer: High school to university-aged people who have a genuine personal interest in and capacity for working with youth

These people should be able to:

- provide basic academic tutoring with patience and accuracy
- work with others in a non-judgmental way
- work independently but ask for help without hesitation
- model integrity and high self-esteem
- interact easily with people of all ages

## Assignment Expectations

Definition: *Develop job descriptions identifying the work assignments, the qualifications and specific expectations of the volunteer*

In other words: **What is the job that needs to be done?**

At Youth Peer: To skillfully deliver one-on-one academic tutoring the volunteer needs:

- academic competence and confidence
- knowledge of learning styles
- reasonable expectations for the student's progress
- skills in using encouragement and motivators

To provide personal mentoring and companionship with at-risk students while at the Centre tutors must:

- be willing to interact with the students informally as well as in tutoring sessions
- be non-judgmental in their approach
- have skills in listening and communication
- have an understanding of the academic and personal needs of students
- have personal integrity so they can be good role models

## Matching & Feedback

Definition: *Recruit, train and manage volunteer assignments by insightfully matching the right volunteer with the right job*

In other words: **The right person in the right place makes a job well done.**

At Youth Peer: Tutor skill sets are matched with student academic needs - for example, a tutor who does not feel as confident in math would not be matched with a student needing extra help in math.

Personalities are taken into consideration with each and every match - an extremely quiet tutor would not be a good match for an assertive, confrontational student.

Learning styles must be well-matched - tutors are taught about differing learning styles and can assist the staff in adjusting matches when necessary.

Matches are flexible and can be adjusted when it will benefit the student or the tutor; this easy flexibility keeps everyone - student, tutor and staff - feeling successful.