Child Protection Roundtable Series, Session 1: Abuse and Neglect in the Newcomer Context

September 17, 2025

Claire Hopkins (CH): Hello, everyone, and welcome to the first session of our three-part Child Protection Roundtable Series, Abuse and Neglect in the Newcomer Context. I'm Claire Hopkins, a Training Officer with Switchboard, and I will be your facilitator today and throughout this series. Prior to Switchboard, I worked in community engagement, recruited and trained foster parents for unaccompanied refugee minors and unaccompanied children.

I also have experience supporting and advocating for domestic and sexual violence survivors, and I hold a Bachelor of Science in Psychology from Grand Valley State University. I am so grateful to introduce and be joined by our two roundtable speakers and panelists for this first session. They come with extensive experience and knowledge related to child protection.

CH: First, we are joined by Beth Farmer. Beth is the Senior Director for the Safety, Health, and Education Technical Unit at the International Rescue Committee, the IRC, which provides support to more than 30 programs across the U.S. and Europe. Beth is a Licensed Independent Clinical Social Worker with almost two decades of experience in providing clinical services, managing programs for refugees, asylum seekers, survivors of torture, and unaccompanied children.

Beth was the principal investigator on the project that developed the Refugee Health Screener-15, the first mental health screening tool developed for use with refugee populations resettling to the U.S. Beth has received numerous awards for her work, including recognition by the Robert Wood Johnson Foundation as a community health leader.

Next, we are joined by Jenna Christie-Tabron. Jenna is the Senior Training Officer with Switchboard, and is a Licensed Social Worker with nearly a decade of experience in treating adults and adolescents facing various individual and family challenges. Jenna has worked as a trauma-focused clinician, advocate, educator, and consultant in the psychiatric, health care, judicial, and education systems.

CH: Before joining Switchboard, she was the Intensive Case Management Supervisor for the IRC's Phoenix office. She holds two master's degrees in family therapy and social work, and a doctorate in education. I'm so grateful that we'll have you with us today, and you're going to be learning from all that they have to share.

Let's go into hearing about what you're going to learn today. Our learning objectives for this first series. By the end of this roundtable, we hope that you will be able to identify signs of abuse and neglect within the unique context of newcomer youth, [and] recognize how cultural beliefs and developmental stages influence newcomer youth risk and safety. Then, finally, we'll go through our third section here, which is applying strategies to ensure safe and stable newcomer youth placements.

Before we dive into all of that, I wanted to take a moment to say, thank you so much for the thoughtful questions that you all submitted at registration. Some of those are

going to be covered through our panel speakers today, or their responses to the questions, like recognizing signs of abuse in homes. We'll also be touching on that cultural context in our second learning objective.

CH: Some of the questions that you shared and asked were about trafficking and exploitation. You are in luck, because that is actually our second session. Be sure to make sure that you sign up for that second one, which is Exploitation, Trafficking, and Violence on Wednesday, October 15th. Then, you also may hear some of the questions answered in our final session of this series, which is Hear from the Experts: Foster Parents and Staff Perspectives on Wednesday, November 5th.

Another area that we received many great questions in was related to educators and students. We wanted to encourage you for an opportunity to continue learning long-term to check out our newcomer education community of practice. This is an ongoing learning opportunity that you can participate in monthly, and we're dropping that in the chat for you.

CH: Lastly, we will not be going into details of mandated reporting. However, we have a guide that touches on reporting, and then this will link many other resources for mandated reporting, and we'll drop that in the chat for you as well. With that, let's jump right in.

Here we are at Switchboard, loving our Slido, so that's where we would like to start. We want to hear from you. Throughout this time, we'll be using Slido as an interactive learning opportunity. Please pull out your smart devices, scan the QR code, or you can go into your web browser, and join at slido.com, and put in the code 2723 464.

We're assuming that all of you all are interested in learning about child abuse and neglect, considering that…as our child protection series. We want to know what comes to mind first when you think about these words, when you think about signs. Malnutrition, we'll touch on those, bruises, sadness, a lot of that physical abuse showing up here with some specific examples, seeing a lot of that mental and emotional coming through.

Let's see, emotional behavior, depression, acting out. This will be touched on a lot as well in our examples. Lack of love, change in behavior. Yes, it's one of the prime warning signs that you'll hear about. Very shy or timid, fear. You'll see it, the Slido activity really grabs onto a lot of what you all are saying similarly, which is wonderful that you are providing these specific examples, and then also capturing some of these themes that you all see from a variety of different service providers and organizations.

Anger, suicide, silence, not attending school, yes. Lack of confidence. Wonderful. Thank you all so much for sharing and setting the scene for what we're going to talk about. I'm going to pass it over to our first speaker. Jenna, take it away.

Jenna Christie-Tabron (JCT): Thank you, Claire. Thank you to all who participated in our first Slido. I have the pleasure of opening us up with the common signs of abuse and neglect. If you have worked in child welfare, or other social service areas, even outside of resettlement, you may be familiar with some of the common signs of

abuse and neglect, as they tend to be pretty comprehensive, and applicable to not just newcomer youth, but youth in general.

JCT: Some of what you have probably heard, or maybe unfortunately seen in your own practice, unexplained injuries. When we say, "Unexplained injuries," what we're talking about is non-accidental, or the reason that you might have been given for why an injury exists may not make sense, or it may not match the nature of the injury that has been observed. We want to make sure that when we're talking about abuse, we're looking at what isn't quite matching up, what isn't quite making sense.

A lot of that is that gut feelings that we tend to have, just that suspicion. Sometimes, even in unexplained injuries, you may observe a client having difficulty walking, maybe even difficulty sitting, depending upon the nature of the injury. It might not always be just the common bruising on the arm, or the long-sleeved shirts that might be in inappropriate weather, but also [take] into consideration [that] there might be a cultural context to that as well, which we'll get into a bit later on in the presentation.

Sudden behavioral changes. Perhaps, you have been working with a youth who has been previously joyful, or otherwise content with their placement, or with the way that their resettlement journey has been going, now that they have made it into the United States, and there's a sudden shift, a withdrawal. I saw someone mentioned isolation in the Slido. That's right on par with some of the signs that you might see with a sudden behavioral change, maybe even behavioral aggression.

JCT: A child who you've never known in the time working with them to have exhibited such aggressive behavior, maybe that's a new development that seemingly came out of nowhere, or behavioral regression. The most common example of this that we tend to see working in social services, or working with any potential abuse is bedwetting. The youth that you were previously working with, potty trained and had met that developmental milestone, and all of a sudden, now they're bedwetting. That's typically associated with potential sexual abuse that could have occurred.

We want to assess for all of the different factors that could be contributing to a sudden behavioral change. Poor hygiene, which could be a result of untreated medical needs, or hunger or malnutrition, and wanting to be able to differentiate between whether it's hunger or if it's malnutrition. Now, just wanting to note that malnutrition is a medical diagnosis, and it's very, very severe, so wanting to make sure that we're not using that term lightly, and that the appropriate professionals are making that diagnosis for what malnutrition really looks like.

JCT: Age-inappropriate caregiving responsibilities. We will touch on this a little bit later, as to how culture can contribute to that. Sometimes one of the signs of abuse, or neglect comes from a direct or indirect disclosure. Maybe you've developed significant rapport with your client, and they felt comfortable or safe enough to be able to disclose that information to you.

Maybe sometimes it's a situation, where it was an indirect exposure just through conversation, maybe someone else, or maybe you picked up on it, and what was said. Making sure that we are engaging in that active listening to be able to pick up on some potentially very subtle cues. Lastly, trauma and survival responses that

could be reflected in behaviors. Newcomer youth, especially URMs, have experience of exposure to chronic threats in their country of origin.

JCT: Running away might be a survival response. An inability to regulate their own emotions. I remember seeing that on the Slido as well. Those could be trauma and survival responses that are showing up in your behaviors all of a sudden with some of the youth that you might be working with, once they've been triggered by a potential abuse and neglect situation.

CH: Thank you so much, Jenna. We are going to be coming back to this case scenario a couple of times throughout the deck—or throughout this roundtable series, excuse me. We'll have it show[ing] up for you each time, but we're going to go ahead and encourage you to, while I'm reading out this case scenario for this first section, to really be thinking through some of the signs that you all noted. Think about things that Jenna just spoke on for common signs of abuse and neglect, and we'll shift our lens of viewing it throughout this roundtable.

For now, we'll start here. Ibrahim is a 17-year-old unaccompanied refugee minor, or URM, from Guinea who has been in a foster home for six months. He has generally adjusted well and previously looked forward to spending time every other weekend with an uncle he has recently connected with in the U.S. Recently, Ibrahim has started resisting these visits. He now withdraws when the weekend approaches, and appears anxious the day before.

CH: On the scheduled day, he sometimes leaves the house for many hours to avoid going. The foster parents also notice his mood has declined overall, and he has begun skipping meals. When asked why he no longer wants to go, Ibrahim shrugs it off, says, "It's no big deal," or, "I'm fine." Reflecting, the foster parents realize that on several Mondays following the visits with his uncle, Ibrahim skipped school, telling them he didn't feel well.

We'll go into another Slido here, where we want to hear from you again, and thinking about Ibrahim's situation, what possible warning signs of abuse or neglect stand out to you in this specific case scenario?

[pause]

CH: I see that we're up on Slido. Awesome. If you need to scan that QR code again, or go to slido.com, please do. Some of the things that you all are noticing, skipping meals, skipping school, decreased mood, loss of appetite, avoidance, lack of interest, really pinpointing down on that missing school and avoidance, change in demeanor, hesitation, avoiding meals.

You can see the themes popping up here on the common responses that we're getting, mood, changes in mood, avoidance, school, meals. This is really touching on all the things that Jenna just shared about as well, and some things that you identified in your first Slido. We're seeing a lot of change in behavior.

[pause]

CH: Quieter than normal. There's avoidance coming back again. Great job picking that up.

Loss of interest. Absolutely. That's a change in behavior. We're also noting some of those mood and physical signs that you've put here too. The loss of appetite, skipping school. I think you all nailed it. Absolutely. This really sets us up well for moving into our next session here, where we're going to dive into that cultural and developmental context that we need when we are working with, and walking alongside refugee and newcomer youth.

This next section here is going to touch on the Cultural and Developmental Influences on Risk and Safety. We'll explore things around discipline, supervision norms. We'll explore things around how developmental stages can affect vulnerability and protective factors, and touch on how cultural behaviors might be mistaken for different warning signs. We'll hear from our panelists and speaker, but first, I want to hear from you. Starting again, setting the scene with what you all see in your work, what are some of the cultural factors that you might consider when assessing a youth's safety?

[pause]

CH: Gender norms, gender roles. Absolutely. Religion. Verbal language and body language. Religious practices, cultural sensitivity, religion. Coming up a lot. We see so many different demographics of youth, and their practices and beliefs.

Age, humor, family structure, expectations around child labor. Absolutely. That will continue as we go into our second session. We'll talk more about that too. Comfortability sharing with someone outside of their culture. That's important to think about too. We think about norms with genders and people in position of power, religion and gender, coming up here again, your own gender in relation to the youth. That's a very client-centered, strength-based way to be thinking about things, thinking about our own biases, our own impacts, our own values, our own demographics, and how they align with— Might impact the youth that we're walking alongside of, moral values.

Not being able to express self freely. [We] talk a lot about authenticity and things like that. That's not always the most successful thing that the folks that we're working with are able to reach. Thank you all so much for sharing. We're going to go into hearing from our panelists here. The first question that we have, Beth, I'd love to hear from you. Your insight, your perspectives on how does cultural context shape how you address risk?

Beth Farmer (BF): Thanks so much, Claire. The way that parents see their role is very much shaped by culture, and it's very much shaped by context. It is very important for us to know when we're providers, what are some cultural practices that might be common in the country of origin where people come from? I'm thinking of certain things like moxibustion, scarification, cupping, things like that, coining, things that sometimes are cultural practices that can leave scars. Understanding that, I think, is really important.

BF: I also think that it's important to both understand, or hold— Be reflective about how do people view their role as parents? How do people view the role of children? How do people see supervision for both of those things? It may be incredibly common in certain cultures for the oldest child to have a primary responsibility of, let's say, being a breadwinner or taking care of younger children.

It may be as well that, in the context people were in—let's say, a refugee camp—or some other place where people were displaced that, that just-- That was the way it was, that they had no other choice than somebody to do that. That has now become normative out of necessity. Now, people are in a new environment where that is not normative. Understanding that, also—understanding how long people have been in the U.S., and what their understanding of the new context is, and the expectations around discipline and supervision.

Again, those household roles and responsibilities that we talked about—a lot of people put this in the former Slido. In some cultures, children, especially girls, engaging in after-school activities, going to sleepovers. The responsibilities at home is very much separated by gender roles. There have been times in my work, where I have seen both on the parenting discipline and supervision, an assumption that it's parentification of children, or that it is abuse of children, that a child is not being allowed to participate when it may be rooted in a cultural norm.

BF: Then, I think other things that in some cultures, making eye contact versus not making eye contact, depending on which culture, can be normative. When people see certain behaviors, and those behaviors are inconsistent, let's say with mainstream U.S. views of what is appropriate behavior, that a child make eye contact, that may be considered polite, that could be misinterpreted when a child is not making eye contact as a sign of abuse or shame, when in actuality, that may be normative, may be a sign of respect in that culture.

It's really important to, whenever you're working with different groups, to know something about how that culture views discipline, supervision, the context in which people have come from, common practices, those household roles, gender roles, religion, how all of those things come together, while also understanding that people differ in countries, and in cultures, whether they grew up in rural or urban settings, their socioeconomic class, the level of education, and then just in different households. Having that strong background and foundation, and that reflective practice when we're looking at a situation can be extremely helpful. Jenna, did I miss anything there? Would you add anything?

JCT: That was very comprehensive. I think, if I were to summarize everything you said, Beth, it really sounds a lot like what is the meaning, right? The meaning behind the observed behavior, or whatever was observed, and really as service providers taking that not knowing stance, really avoiding that initial assumption that everything that we see, we know exactly what is the purpose, or the meaning behind it.

I love that you touched on the differences, even within the cultural groups, that some cultural groups from one geographical area might have some different customs from someone in another geographical area, but might have the same overall label regarding their culture, but it still could come down to various practices, even within

their group, that subgroup. Those are pretty much the only things that I would just add to everything that has already been discussed regarding the cultural context.

CH: Thank you both so much. Yes, I was writing some things down, and I'm taking away, what could I, as a service provider do in this moment, where I'm starting to wonder? It's just, you had said a question, Beth, of, is this rooted in a cultural norm? That felt really easy for me to tangibly have as a resource, as a tool, to maybe even just stop and pause. Yes, that reflective practice. Like, "Oh, I need to use that more in my language to center the lens that we're using."

We're going to jump to this next part of this section. Beth, I would love to hear, so we've talked about the cultural context, but how does developmental context shape how you might address risk?

BF: Thanks, Claire, and thanks, Jenna. The power differential, the size differential, the comprehension and understanding of children very much depends on their age, and their developmental stage, as well as how familiar they are with the norms, expectations, and laws within the U.S. All of that feeds into how vulnerable they are, or how protected they are. Young children just are physically smaller. Their understanding of the world is much smaller, and their ability to protect themselves is much less.

They are incredibly vulnerable to what any adult, or any person with authority has. That's why we'll talk about it later, providing that comprehension for young children of what is appropriate, or not appropriate is really critical. It's also important to know that when someone has just come to the U.S., maybe they don't speak English very well. Maybe they have less permanent status.

They are also going to have a bigger power differential, and be much more vulnerable than somebody that understands the culture, that feels that sense of belonging and acceptance in that culture, that they have power in that culture. That vulnerability, especially when people are new, and their comprehension of the environment is less, that power differential is more. We do see more newcomers taken advantage of by scams and exploitation, because they just aren't really sure of what is normative, but they're also uncertain of their power in this new environment.

BF: I think adolescents as well have particular vulnerabilities. They are out on their own. They are more independent. It is really normal for adolescents to be engaging in risky behavior, often have a sense of overconfidence as well. Even though, let's say, a 15-year-old girl may know on the surface that it's not okay to engage in a romantic relationship with a 25-year-old, brain development-wise, and personality development-wise, it's really normal for a 15-year-old to think, "I'm an exception. It's because I'm so mature. I'm the exception to this situation," because that kind of self-involvement, self-referencing, that over sense of confidence is very common in adolescents.

Similarly, because they are growing into their own autonomy and independence, often with adult figures, they seek to demonstrate to adult figures that they've got it all under control. "I'm fine. I can handle it. I know what I'm doing. It's not a problem." You often see that the people that they could be turning to and trusting, they're often minimizing the concerns.

BF: Sometimes as well, because it's really common for adolescents to engage in more risky behavior, they may have done something that, then, an abuser, or somebody who's exploiting them is actually holding over their head, that they engaged in a risky behavior. This has become a leverage point in the abuse, making it more likely that they're not going to disclose. That can be very common in adolescents, because they're more independent.

They're just out there, more often by themselves. They look grown up. They often feel grown up, but that brain isn't fully formed yet. Their decision-making may not be as strong as somebody who is 25 or older. Jenna?

JCT: Thank you, Beth. Just to add to the wonderful knowledge Beth has already given, talking about the cognitive developmental differences between younger and older children. Sometimes when we're talking about newcomers, and we know that the language development might not be there due to multiple factors of development, as well as cultural context and different language differences, we're also looking at how do they tell their story?

How does a younger child tell their story, as opposed to how does an adult, an older adolescent tell their story, a teenager tell their story? Younger children might tend to tell their story through artwork, through their drawings, through their play. It may not even just be a matter of, "Well, I need an interpreter, because I don't speak the language." Sometimes that's just not where the narrative is going to come from.

We have to be very cognizant of that as to what types of activities are the children engaging in. Even with older children who might have the skills, they might have that level of development to be able to articulate what their experiences have been. What we know about trauma so far is that, how it impacts the growing brain, there could be some inconsistencies in what has been said.

JCT: It could be some memory lapses due to some areas of the brain being less developed, and others due to that chronic fight or flight response. Wanting to know, "Okay, let's inquire a little bit further," or, "I have that suspicion. Let me make the necessary report to who needs to be done," as opposed to dismissing it as someone who's just being dishonest.

I've experienced that before in practice. There were some inconsistencies in a teenager's account as to what happened. They were dismissed as being dishonest. Unfortunately, further on down the road, we found out that they were being honest about what happened, but there were some challenges in terms of, "Well, I didn't exactly remember this particular detail," or, "That one might have been a little bit off." Wanting to make sure that we're really assessing the overall cognitive development when we're having some suspicions of abuse or neglect, even down to emotional development.

We've heard of somatic symptoms that have occurred, "Oh, I have a stomach ache," or, "I don't feel good here." "I don't feel good there." I've been in situations, where caregivers have said, "Oh, they're not telling the truth," or, "They don't feel however they say that they feel. That's not true. They're just trying to avoid going to school, or going here, or going there." We have to pay attention to every way that trauma can manifest within children and adolescents.

JCT: Wanting to make sure that we are seeing where excessive fear can show up in a physical response, where that emotional numbing, or being inconsolable, how those could show up in more ways than one. Talking about the self-harm, the risky behaviors that Beth mentioned, that is something that we definitely want to pay attention to. We want to be able to give some very good assessments as to what that looks like, and how it may be very hidden.

I know there's a very common misconception that it's attention-seeking behavior, but if there's anything that you get from this one section about what those behaviors look like, especially when it comes to self-harm following trauma exposure, or abuse and neglect, is that it is not attention-seeking behavior, and we do need to treat it with the severity that it warrants.

CH: Thank you both so much. I could listen and take away so many things from each of you, and so I really appreciate your expertise. I think my biggest takeaway from that is that there's so many layers. There's so many things to consider before we jump. I know that we are moving in fast-paced environments, and we want to protect who we're working with, but then I come back to this reflectiveness of pausing, and really trying to think through.

If you start to think it's attention-seeking, maybe it's a moment for you to think through what is going on here, versus putting that label, the youth that you're working with. Maybe that's a sign for us if that's what our brain tells us, as we're learning to reframe. We'll jump back into Ibrahim here, and we'll think about this case scenario through cultural context and the developmental stages that we just talked about, and heard from our speakers.

CH: As a reminder, Ibrahim is 17-year-old URM. He has been with his foster parents for six months. He previously looked forward to spending time with an uncle that he reconnected with, but he's starting to resist those, feeling withdraws— Excuse me, he's withdrawing when the weekend approaches, appearing anxious, sometimes leaves the house for many hours to avoid going.

Then, when he's asked about it, he does the, "It's no big deal, I'm fine." As we're thinking about Ibrahim here with that cultural context, we will jump into a Slido. This one is going to be a "Select all that apply" opportunity. It's the question, what are the next steps in determining if there is a safety concern? Your options are, ask open-ended questions with Ibrahim, taking that moment to consider cultural norms that pause. Reflecting on the normative behaviors of his age and developmental stage. Consult with a cultural broker, or liaison for additional perspective. Then, the last option we have here is look at the overall pattern of his behavior over time. Select all that might apply here.

Consider cultural norms. Ask open-ended questions, absolutely. Seems like we're giving some attention here to all of these options, which does mean that we've paid attention, so that's great. There's always a little bit more to reflect on with this. I actually want to take a moment to ask you, Beth, to maybe lean into the option here of consulting with a cultural broker or liaison for additional perspective and what that might look like in this case.

BF: Yes, I think all of these answers are good and all of them have their place. I think that first part about asking open-ended questions, I love that is the first one because that's probably the first thing you want to do, is ask some open-ended questions to get more information. Based on that, do these different things. Consider the cultural norms. Consider the normative behavior. Look at the overall pattern of behavior over time. Is this every weekend? Is it just these weekends? Again, depending on all of that, possibly consult with the cultural broker or liaison.

I would say that can be appropriate, but in smaller communities, even giving general questions to consult with could identify who this child is, especially in smaller communities. Even people who are community leaders or community liaisons come with their own idea of what is normative. I think I would just put a bit of caution on that last one. You still have to protect the child and the family's privacy. They still can't be identifiable. You also have to say, "Is this the type of question that I think I can get good information from a cultural broker for an additional perspective on?"

CH: Thank you, Beth. I appreciate that additional information. Really modeling that pause and thinking further through on what a step might be. We're going to open up our last section here before we go into Q&A. We're going to stick with the Slido and hearing from you all here. What actions might help a youth feel safer in their placement? What actions might you take to help a newcomer youth feel safer in their placement?

Rapport building. Absolutely. Being a consistent, trusted adult also goes along with that initial rapport building, making sure that goes all the way through. Access to familiar items like music or TV. We might be asking the youth, what are those things? Helping create a strong sense of belong. Proactive safety planning. We love to see that. Absolutely. It's always helpful to do that ahead of time and then be able to make any adjustments to a safety plan as you learn more about the youth, that they have more time. Checking in with them frequently. Giving clear expectations. Active listening. Here's trust coming up again.

Non-judgmental listening and not interrupting when they're talking. I think that's really important to recognize silence can be hard, but we need to give grace for thinking, especially if there's multiple languages at play, learning new norms, et cetera. Enroll them in things they're interested in. Again, yes, absolutely. Asking, "These are what we have here. Do any of these sound interesting to you?" Building trust, affirming their efforts. That's a really beautiful addition. I think this has set a good stage for us to jump into our final section here. I am going to pass back over to Jenna to go over protective strategies to ensure safe and stable youth placements.

JCT: All right. Thank you, Claire. I don't really know if there's much for me to say. Everyone said it all in this Slido. Proactive safety plans. That is a very, very good, strong mechanism that we wish to utilize. I'm glad that you mentioned that, Claire, that we want to utilize it or at least develop it before an incident happens. That's something that is very protective that we want to have in place.

In order for it to be strong and in order for it to be effective, we want it to be individualized. We want to ensure that every youth has their own because no two youth are the same. They have different support systems. They process things differently. We want to ensure that the individualized safety plans are inclusive of

their emergency contacts, that they know where they can go in the event of an emergency. Whatever calming strategies, regulation strategies they have identified that is effective for them, it's included in that safety plan.

JCT: Another thing that we want to add to the safety plan that's often sometimes left out, because maybe we're just not actively thinking about it, is how to identify possible exploitation and grooming. We will be going into that a bit more with the second roundtable, but it's something to consider to add to a safety plan because you want to ensure safety on all levels, physical, emotional, mental safety.

We want to make sure that we're doing some psychoeducation. We're educating our youth on how to spot those signs, what it could look like, how to respond to it, and how to tell your caregiver. Sometimes we find that youth can be in situations where they have that gut feeling, or they know within themselves that this is an unsafe situation, but not entirely sure how to tell the caregiver. Maybe the assumption that they can get in trouble, that they did something wrong. Putting that out there at the outset, that this is the process, this is the mechanism that you can use to share things with me, goes a very long way as a protective strategy.

Fostering consistency, trust, and predictability, especially [for] those who have experienced trauma. You want to be as predictable as possible within the best way. We want to ensure that our youth know what to expect from us in terms of how we might respond to certain situations. That's also meaning that we have to self-regulate. We have to make sure that as caregivers or as service providers, that we are regulating ourselves to provide that predictable response to create that safety, and doing what we say that we're going to do. That consistency is really what's going to help to build trust.

JCT: The safe spaces and the supportive routines also aid the predictability. That routine is very helpful, especially with younger kids, that they know, "Well, this is right. This isn't right." That actually also helps when they might be exposed to things that could be potentially dangerous. They'll recognize, "Hey, this is outside of my norm," or, "You're saying something that I'm not used to hearing you say." That's like a red flag. Helping to keep that consistency might make it easier for them to recognize when things are going outside of that norm that you have helped them to build.

The incorporation of youth voice in the decision-making processes is very important for empowerment for our youth. I also want to make sure that we are mindful of how difficult that might be in the beginning. There could be a lot of coaching that is involved or that is necessary for the decision-making processes. A lot of the youth that you may encounter have come from highly controlling situations or environments where they've never had the opportunity to really explore how to make good decisions or how to make effective decisions. They may experience what could be a decision paralysis, like, "Well, I don't know. I've never had these options before."

It might unintentionally cause some withdrawal away because, "I don't want to make the wrong decision." Now I might have unintentionally produced a situation that increases anxiety. Just recognizing that initially, as a service provider, you may have to really help your client with a little bit of coaching as to how to make the right decision or how to exercise their voice. Maybe starting off with some controlled

options, saying, "Well, would you prefer this or would you prefer this?" Giving them part of the answer and helping them to make a decision that's in their best interest based off of what is provided.

JCT: Just being very proactive in non-stigmatizing in your language, in your interactions, and in the understanding of the laws regarding working alongside with any youth or alongside with URMs. Just being as clear as could be regarding what we have available, what can be done, what is possible, and not overpromising on things that we cannot deliver.

CH: Thank you so much, Jenna, for introducing this section. I know you've hit on a lot of stuff in this slide that could probably be shared with my next question for you. I'm wondering if there is maybe one or two things that you have seen consistently help youth feel safe? Either Jenna or Beth, if you have maybe one or two things that might help make youth feel safe.

JCT: Oh, yes.

BF: Oh, go ahead, Jenna. Sorry. No, please go ahead.

JCT: My apologies, Beth. Yes, I think that was for me. We wanted to be present. Being present means that you're there regularly for your check-ins, whether that is daily, weekly, whatever the cadence that is appropriate for the setting in which you're working with your young person, sticking with that. We understand that things happen, right? Sometimes that also could mean having a backup plan in the event that you're unable to do a check-in. Is there somebody else who the youth is familiar with at this point that can also do that follow-up for you?

Doing what you say you will do and not the overpromising like we mentioned in the last slide helps to really build that trust so that the youth know that you are a dependable and a trusted person and part of their safety network. That network should not just be you. It should not be isolating. It should include multiple people that are part of that URM or that youth's case, having knowledge as to who's a part of that and who they can go to and for what. Understanding the professional boundaries. "This is who you go to for this incident. This is who you go to for the next incident."

JCT: Making sure that in times of conflict, what we talked about with the regulation, regulating yourself and your emotions, because part of the work that we do is a lot of teaching and a lot of coaching. We can't teach someone to self-regulate until we can help them co-regulate. That means being in control of our responses, being in control of how we perceive certain situations, and really leading by modeling. That's one of the best teachers.

Looking at strong and confidential reporting mechanisms, adhering to your agency protocols, adhering to the mandated reporting, your code of ethics for whatever your profession is, adhering to that. I encountered a situation actually before where I learned that two colleagues were speaking about another client in front of a different client. Even though they used language that was unidentifiable, imagine being in that situation where I'm here talking to my case worker, but my case worker is speaking with their colleague about someone else who they're providing services to. It would

make me wonder, "Well, do you talk to other people about me in the front of others when I'm not around?"

JCT: How were your conversations perceived? What is that perception like? Wanting to make sure that we're confidential, not just in our formal reporting, but also in our everyday conversations, passing each other in the hallway or in the office with the door open. Just being mindful of how we're interacting with our colleagues, or we're engaging in consultation about any of our cases. Beth, anything that you would like to add to, have you seen consistently been helpful with helping youth to stay safe?

BF: Yes. I'm going to put on my hat as a foster parent and somebody who's raised three children through adolescence and say some of the things that I think are most helpful are space and time. Check-ins are great, but also just driving together and not saying anything, having dinner together, cooking together. I found, especially with adolescents, there's a warm-up period before they drop a piece of information. Space and time for that little coin to drop of information is important.

I would also say of children of all ages, they are worried often that they're going to get in trouble, that they've been bad, or someone else is going to get in trouble. Making sure that when we're doing that education, talking about they're not going to get in trouble. If anything happens to them, it's not that they're in trouble. It's not that somebody else is going to get in trouble. It's not that they've been bad. Providing that proactive reassurance is helpful.

The last thing I would say is with the reporting mechanisms and that education to children of all ages, always try to make it three deep. If you don't feel comfortable going to me, you can go to X. If you don't feel comfortable to them, you can go to X, so that they have multiple choices of who they can go to of safe, trusted adults.

CH: Thank you both so much. Because my brain is foster parent wired, I really liked that, the three that you can give them. Not only… I feel it would be helpful for youth to know, but also gives that relief from the adult too. You don't have to have all of the answers all the time, and it's good to grow support. Yes, I could go on and on reflecting on each of the things that you both said.

We're going to move here to our final reflection, remembering and revisiting Ibrahim before we move into our Q&A. We won't get to all of the Q&A questions, but we certainly hope that if you have anything, you can pop it in the chat here, and then we'll take a look at that next. Before, to close us out, let's recap with Ibrahim here. We know that he's been in his foster home for a few months. We know that he's starting to feel anxious about the visits with his uncle that he's reconnected with. His mood is declining. We know that he's shrugging that off at the adolescent stage that he's in, saying, "It's no big deal, I'm fine."

CH: Now, using our lens of grown knowledge that we all have at this point, and reflecting on the protective strategies that were discussed in this final section. This is our last time we get to hear from you on a Slido. We'd love to know what protective strategies-- whoa, 100%. I love it. What protective strategies might you use to support Ibrahim? Select all that apply. Yes, you got it. Build a protective safety plan with youth input. Ensure consistency, predictability, and routines in the placement. I really liked how Jenna added on not overpromising. I feel like that can be really easy

because we want to make sure everything is-- we want the best for them. Pausing there.

CH: Mapping safe adults, mapping out three safe adults. Let's see if I can move into— Build a proactive safety plan with youth input. Absolutely, that proactiveness is so important. Remembering to come back to it and updating it, especially as, Beth, you had said a couple of things like, their knowledge of understanding the world… Their comprehension of what developmental stage they're at and all these impacts.

Great job. Thank you so much for participating in our Slidos. We are now going to move into our Q&A section with our panelists here. I think to start us off, let me pull this up here. Beth, I am going to start with you. How do you appropriately and respectfully bring up topics like child welfare and neglect with client families? This is a question that we got, and I'd love to start there.

BF: Thanks so much. Claire, do we mean proactively or do we mean reactively? Because I think there's two different things.

CH: I think if we're sticking with this proactive— Yes, let's start there.

BF: Okay. I think in general, one of the ways that I try to bring up topics from an educational standpoint, say that I don't have suspicion that anything is happening, but I want to help educate a family or a child about something. I will generally start with, "It's very common when someone has first come to the United States that they may not understand the systems or the expectations." That might be a common way I would approach it.

Or if it's somebody who's even been here longer, say, "We tell all of our parents about X," or, "We talk to all families about X." Some sort of distance, like, it's common, or we tell all families so that people don't feel like they're being identified or targeted in that. They're talking to me because they think it's a concern. They think, "Something like this is happening in my family."

BF: Then from that distance, I say why we're giving them this information and try to have them join or align with me on that. "I think everybody here wants Child X to be safe, to feel empowered, to go to people when they're scared or they have a fear. We provide this information as a type of empowerment. I know that you join me in that." Then I provide that information.

If I have a concern, I generally start with observation before the open-ended inquiry. "I've noticed that you seem anxious before you go to your uncles. These are the behaviors that I have noticed. I wanted to ask you about that," and then an open-ended question. I start with that neutral observation. If I'm wanting to ask some more specific questions.

CH: Thank you so much. Sorry, I got wrapped up in listening to your response. I like that addition of observation and noticing. Jenna, do you have anything to add to that? Put you on the spot. I'm so sorry.

JCT: No. No apologies necessary. No, I think that is an amazing starting point. I really don't have much to add to it. The neutrality is extremely important when

working with what you're seeing and just not being subjective. Just saying very matter-of-fact, "Hey, this is what it is. I'm not making any assumptions as to what it is. You educate me. Tell me. You're the expert in your life—as the child—of what you're experiencing." I think the language that Beth recommended is extremely important and shouldn't be overlooked or deviated.

CH: Thank you so much. Yes, I absolutely agree. Let's see. Jenna, this one is for you. What actions can be taken to influence or inspire society to take responsibility for protecting children?

JCT: Oh, I really love this question because I think it goes back to the mindset of the shared responsibility of it takes a village to raise a child, to raise an adolescent. When we talk about it, sometimes it tends to be very easy for us to isolate ourselves from situations regarding children. Where we may not be immediately in their geographical environment or their community, or they come from a different cultural background. It's easy for us to take a step back and hide behind that, "Well, I don't really know. I don't have that experience."

Regardless, children have rights, and those universal rights that they have really should be the starting point or the focal point of our interest in wanting to be able to protect them, regardless of their cultural background, their country of origin, or the circumstances surrounding their resettlement. When we highlight that, that is the initial focus of, "This is our responsibility together."

JCT: Another telling way to do that is through storytelling. Sometimes we tend to take a step back because we don't know the story, or we haven't been exposed to any experiences that some of the children might have been through. That's calling on survivor voices and helping to build empathy through the stories that are being told in a trauma-informed and a very compassionate way. That's another way that we can appeal to members of our community.

Lastly, I would say, go to where they are. The schools that they're in, the community centers or the community engagement activities that might exist, go to where they are and teach them and interact with them and become mentors to them. Knowing that mentorship is not gender-specific, that caregivers can tend to be women, but male mentors are needed as well. It's a collective duty that we all have to work together towards protecting the children. That's why [what] I would say is, how do you inspire those in your local communities to really take action? Referring them to Switchboard to learn more about the population.

CH: I love the plug, but it's so true. It's like, that's why we're here. We're here to build all communities up with knowledge of how to create welcoming centers and opportunities and communities. I was trying not to use communities twice, but here I am. Okay, thank you so much. Let's go ahead and move to our next question. Beth, this one's for you. What are some ways to advocate for the safety of refugee and newcomer children within neighborhoods, schools, health care systems?

BF: Yes, thanks so much, Claire. I think that providing education to those systems, if you have the knowledge, or reaching out to Switchboard so Switchboard can connect with those systems, so that they understand the context in which people come. Some of those considerations around not being familiar with the environment,

maybe the power differential or perceived power differential when people first come, what are some unique needs people may have in those first early years of resettlement, I think is incredibly important.

BF: If you are referring people, or those are part of the coordinating bodies or care team that you're with, also understanding what they are doing. Are they providing this type of education? Who are people within their system that are trusted, that people can go to? What are their reporting mechanisms? What are their safeguarding mechanisms? I think those things are incredibly important.

CH: Thank you so much, Beth. I do want to acknowledge we had a question more on the reporting side and how we can get tied into that investigator role when that's really not our job. I do want to plug, we have so many good mandated reporting resources that are linked in the info guide that was dropped in the chat. They will also be in the recommended resources as well. That can ease that tension of feeling like you have to be the investigator and making sure that you're remaining in the role that your clients deserve and making it less stressful for both sides.

With that being said, thank you so much again to our panelists and our speakers, Jenna and Beth. We hope that we have provided enough information where you are now able to identify different signs of abuse and neglect within the unique context of newcomer youth, recognize how cultural beliefs and developmental stages influence newcomer youth risk and safety, and finally, applying strategies to ensure safe and stable newcomer youth placements.

CH: Before we jump to our recommended resources, we would like to ask you to help us help you. Yes, it's another survey, it's another QR code scan, but your input really does make a difference in the things that we produce here at Switchboard. It helps us know what goes well, what we can enhance, what are some new areas that might be beneficial. It's really important to improve those future trainings that we have. It's only six questions, it takes about 60 seconds to complete, so you're able to go ahead and get that task checked off of your list. You can do it now. We'll wait a little bit here for you to scan that code. You'll also see the link in the chat.

[pause]

CH: All right. Hopefully, some of you all were able to get that out of the way. Here are our recommended resources for this specific session. You'll get a whole set of new ones in each session throughout this series. That first one on here, the guide, "An Introduction to Child Protection", is the one that I've been referencing throughout several times. Then you'll see we have some more here, too, touching on that child labor, we had a question about that, traumatic stress, different tips to stay safe online. If you see something or if you don't see something, just let us know. You can always submit a TA request, which I'm jumping the gun to go to our next slide here.

We hope that you stay connected with us. You can do that through email. You can find us on switchboardta.org. You can also find us on LinkedIn at SwitchboardTA. We encourage you to sign up for our newsletter. Make sure that you have all the resources that you need to be able to provide holistic and well-rounded services and support for newcomers. Thank you so much again, panelists, Jenna and Beth. I

appreciate your expertise and input here. Hopefully, we get to connect with some of you all at the next session or in another capacity. Take care and have a great day.