

JESUS

SOMEONE WHO CARES

A Guide for Mentors



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Introduction:

Key Facts About American Children:

- 1 in 2 will live in a single parent family at some point in childhood.
- 1 in 35 lives with grandparents (or other relative) but neither parent.
- 1 in 4 lives with only one parent.
- 1 in 3 is born to unmarried parents.
- 1 in 9 is born to a teenage mother.
- 1 in 5 is born to a mother who did not graduate from high school.
- 1 in 5 was born poor.
- 1 in 6 is poor now.
- 1 in 14 lives at less than half the poverty level.
- 1 in 3 is behind a year or more in school.
- 1 in 7 never graduates from high school.
- 1 in 2 never complete a single year of college.
- 1 in 8 has no health insurance.
- 1 in 8 lives in a family receiving food stamps.
- 1 in 12 has a disability.
- 1 in 13 will be arrested at least once before age 17.
- 1 in 60 sees their parents divorce in any year.
- 1 in 83 will be in state or federal prison before age 20.
- 1 in 146 will die before their first birthday.
- 1 in 1,339 will be killed by guns before age 20.¹
- 1 in 5 is overweight or obese.²
- 12 in 1,000 children were victims of abuse and neglect.³
- 1 in 4 girls and 1 in 8 boys experience sexual abuse in some way before they are 18.⁴
- 1 in 7 children will experience the death of an immediate family member.⁵
- 1 in 45 (1.35 million) children are likely to experience homelessness in a given year.⁶
- 1 in 18 is exposed to violence by family members against their mothers or female caretakers.⁷

You don't have to look far to find a child who is hurting. They walk in and out of our lives everyday. You find them in all racial, social, and financial classes. They all have one thing in common – they need to know that there is someone who cares, someone who can make a difference, someone who can bring hope and healing.

During times of crisis and trauma, children look to their parents for security and comfort. Unfortunately, the parents may be physically or emotionally unavailable to provide comfort and care. The parents are often preoccupied with their own emotions and physical needs and don't have the time, strength, or ability to help their children process the crisis.

This is why your role as a mentor is so important. These children need someone to care, someone who will listen, and someone who will walk with them toward healing and hope. You are that person and you will also point them to Jesus, the One who cares more than any person. You may wonder if you are qualified or able to mentor children. Be assured that this manual will give you helpful information and very clear instructions for you to use as you meet with the children. Thank you for committing to make a difference in the lives of hurting children.

What is a Mentor?

A mentor can be a friend of a child, family member, teacher or pastor. A mentor is a person who likes to help others and is concerned about the welfare of children. A mentor is friendly, a

good listener, and patient with children. A mentor is not qualified to treat children who are dealing with serious mental and emotional issues. It is not the mentor's responsibility to "fix" the children's problems. A mentor simply listens to their stories and thoughts while offering them hope and comfort. If you feel a child is dealing with a serious emotional problem, you can help him best by referring him to a mental health professional.

"Jesus, Someone Who Cares" Book Overview:

The "Seekers", a group of multi-ethnic children, are giving a report on Christianity at the annual Seeker Convention. Using stories of personal crisis or trauma, accompanied with stories from the Bible, they present the Christ of Christianity as someone who cares for us and desires to have a relationship with us. They share that Jesus cares about their needs, fears, loss, hurts, feelings and their future. The story contains a clear, child-friendly presentation of the gospel and the eternal hope that only Jesus can give. The story ends with a clear explanation of how to receive Christ and live for Him.

You need to read the book first so that you are familiar with the story and how the mentor's guides can be used with it. Then you will go through the book with the children. Older children may be able to read the book. Young children may need you to read the story to them. If you are reading the story, point to the speech bubbles as you read so they can follow along.

Since the characters in the book share stories of trauma, the children may need your support and comfort as they read it. If the children become upset while reading the story, take a break and encourage them to share their feelings. When they are ready, continue reading the story.

"Jesus, Someone Who Cares" Trauma Specific Mentor's Guides:

We have prepared several trauma specific mentor's guides to assist you as you meet with children. These mentor's guides are a supplement to the "Jesus, Someone Who Cares" book. Each guide will provide you with discussion questions and resources that deal with specific issues that children face such as divorce, death, natural disasters, poverty and abuse. As you read the "Jesus, Someone Who Cares" book with the children, the guides will help you apply specific content of the story to their area of emotional hurt.

Personal Preparedness:

It is never easy to see a child hurting. Before you mentor children, it is important to take care of yourself and your own emotional and physical needs. Here is a checklist of questions to ask:

- ☐ Have I experienced a crisis in my own family? If so, have I sought help and experienced healing?
- ☐ Do I have unresolved trauma from my childhood? If you answered yes, please seek professional help before meeting with a child.
- ☐ Am I too emotionally overwhelmed to offer help and hope to others?
- ☐ Do I have a tendency to get too emotionally involved in the hurts of others?
- ☐ Am I taking care of my physical needs (sleep, food, etc.)?
- ☐ What will cause me to have strong emotional reactions?
- ☐ Who can I go to for help as I mentor the children?

How Children Communicate:

If you are going to effectively mentor children, it is necessary for you to understand how they communicate. When mentoring children, you need to use methods that they commonly use to communicate. When you allow children to share their feelings through these common methods, you will get a better understanding of their feelings.

Ages 3 to 6: Children ages 3 to 6 years old may not be able to express their feelings with words. They haven't fully developed the verbal and mental skills required to correctly label their feelings. However, they will express their feelings through behaviors, play and art. So when observing children in this age group, you will pick up clues from their behavior, play and drawings. Reading stories, like the "Jesus, Someone Who Cares" book, to children and having them draw pictures are effective tools to use when talking with 3 to 6 year old children.

When talking with children in this age group, it is also important to use simple words and small sentences. When children express a strong emotion, label it for them. For example, if a boy is being physically aggressive, you can say *"your actions show me that you are angry. Do you feel angry?"* This helps him connect his feelings with words. Children in this age group are aware of four general feelings: happy, sad, angry and scared.

Ages 7 to 11: Most children ages 7 to 11 can name their feelings using words. They are also developing stronger social skills. They will share their feelings through writing, art, behaviors, stories, and discussion.

When talking with 7 to 11 year old children, encourage them to express their feelings with words. Reinforce their feelings by stating their feelings. For example, if a girl says, *"I was scared when my parents told me they were going to have a divorce"* you might say, *"It sounds like you were afraid."* This helps the child know that you understand her feelings.

At this stage, small group discussions with children in the same age group can be very effective. As a child hears other children sharing their stories he may feel comfortable sharing his own story. It is good for them to know that other kids have the same feelings.

Techniques for Talking with Children:

The following list of techniques will help you as you meet with a child.

- Position yourself at the child's height. If the child is sitting on the ground, sit on the ground with them.
- Body language should communicate care and comfort. Do not sit with arms crossed over your chest.
- In some situations, you may not previously know the child. If this is the case, introduce yourself and tell him that you care about him, want to be his friend, and want to hear his story.
- Express interest in the child. Ask questions about his hobbies, interests, family, etc.
- Do not force the child to talk with you. Sometimes children want to play and draw what they are feeling rather than talk.
- Silence is okay. Do not feel like you need to speak all the time.

- Remember that communication with children does not always mean using spoken words. If he seems resistant to talking with you, ask him to draw a picture showing how he feels.
- Be aware of your tone of voice. Use a soft, gentle voice. Avoid using a harsh or loud voice.
- Use discussion starting/open questions rather than questions that can be answered with “yes” or “no.” For example, ask *“What is the hardest part about this divorce for you?”* rather than asking *“Is it hard for you to live with only one parent at a time?”*
- It is okay for the child to ask questions. Answer his questions honestly and simply. Do not give more information than he is asking for. If you don’t know how to answer a question, be honest and tell him that you don’t know.
- Use simple words and sentences that children can understand.
- Be prepared to repeat yourself several times. If the child doesn’t seem to understand the first time, rephrase your question differently.
- Use the principles of active listening. Listen to what the child says and then rephrase what the child has said in simple words.
- Affirm her feelings, thoughts and reactions. Tell her that her questions and/or feelings are important and normal (even bad or negative feelings).
- Help the child express what she is feeling. Some children are more comfortable drawing pictures, playing with toys, or writing stories to communicate their feelings than openly talking about them.
- Try to look at the issue as though you were a child. Think back to when you were a child and had to deal with a difficult and frightening experience. The more you can think as a child, the better you will communicate with children.
- Share your own feelings with the child and what you have done to feel better. Children watch how adults deal with their feelings and adopt some of the same coping skills (ways to deal with their feelings).
- Assure the child that what happened is not his fault. Young children often believe that they may have somehow caused this to happen. “I was bad, so this bad thing happened.”
- Help him plan a daily routine and schedule. He needs to do things that are familiar and structured. It helps to establish security and a sense that things are getting back to normal.
- Suggest ideas of things the child can do to regain a sense of control. The trauma has left her feeling powerless to change anything. A sense of self-control can be developed by the child taking ownership of her own behaviors, assisting around the house, or taking care of a pet.
- Offer hope and a positive view of the future.

Words That Heal – Words That Hurt:

What you say to children while they are hurting or sharing their deep feelings can either help them or hurt them. If you say healing words, they are encouraged to continue sharing their feelings. If you use hurtful words, they will withdraw and not share how they truly feel. Here are a few examples of words that heal and words that hurt.

Words that heal:

- I am so sorry.
- I care.
- I am here for you.
- I am listening.
- I feel so bad.
- I share your sorrow.
- It is alright to cry.
- It is okay to be angry.
- I know you are hurting right now.
- What are you feeling right now?
- How may I help you?
- This must be very painful for you.
- This must be so hard to accept.

Words that hurt:

- You don't need to feel that way.
- You don't really mean that.
- Don't cry.
- It's not that bad.
- Be brave.
- You'll get over it.
- You should be over this by now.
- There must be some reason for this.⁸

Other Activities for Helping Children:

Drawing Pictures. Many children have difficulty expressing the way they feel (emotions) in words. Drawing pictures, painting, finger painting and other forms of creative art can be an easier way for children to express how they feel inside. Taking this approach helps children express themselves in a positive manner and helps parents, caregivers, and mentors know what they are thinking and feeling. After the child has drawn a picture, ask questions about the drawing. Encourage him to explain what he has drawn and why. Be sure to keep your questions and comments positive and supportive. Things to have the child draw pictures of (the blanks represent the type of trauma – divorce, abuse, etc.):

- What does _____ look like?
- How does _____ make you feel?
- Draw pictures of different feelings such as anger, sadness, fear, loneliness.
- Draw a picture of your family, including anyone you feel is part of your family. Write each person's name by his or her picture.
- What would you wish for your family? Draw a picture of your wish.

Writing Stories. Many children enjoy writing and illustrating stories or creating comic books. If you are meeting with a child that enjoys this kind of activity, suggest that she write a story about the traumatic event. If the child is willing, have her share her story with you. This activity will also provide several opportunities for discussion. Be attentive and watch for the teachable moments.

Make Puppets. Some children may feel more comfortable expressing their feelings through the use of puppets. Create finger puppets, puppets from brown paper sacks, or use simple puppets you can purchase at a toy store. Using the puppets, children can talk about their feelings, role play difficult situations that come out of the crisis, and share their story.

Play Games. When children are occupied in playing a game, it may be easier for them to talk about their feelings. “The Game of Life”, “Operation”, and similar games can be fun to play and provide guided discussions. There are also several games on the market that specifically address various childhood traumas.

Personal History Timeline. During and after a significant loss, children commonly worry about the future. They are concerned about what will happen to them and if their lives will ever be normal again. Creating a timeline can help a child put the current events of her life in perspective. It helps her to see that many good things have happened in the past and good things are in store for the future. Younger children may need your help creating the timeline. When the child has finished, talk about the timeline, pointing out that she has experienced many different events during her life. Some of the events were good and some were bad. Help her to see and understand that she can and will make it through this difficult time and that there are happy and good times in the near future. Here’s how to create a personal history time line:

- Draw a long horizontal line on a sheet of paper.
- Label your birth at one end with a star (★).
- Label the present time somewhere in the middle.
- Mark and write down significant events that have happened in your life between birth (★) and today (the present). Possible events to include: births of siblings, getting pets, starting school, moving, learning to read, death of a loved one, learning to ride a bike, spiritual experiences (salvation, baptism), difficult loss or traumatic experience, vacations, joining clubs, special holidays, etc.
- Then mark and label events that you hope will happen in the future.⁹

Emotional Reactions and Suggested Intervention:

As you are talking with children about traumatic events, they may act out with strong emotional responses. Remember that these are normal reactions for children who have been traumatized. However, some children may act out their emotions in inappropriate ways (i.e., harm to self or others). The following suggestions will help you to properly respond to the children’s emotions and behaviors.

Fear: Position yourself at the child’s height. Talk to the child in a calm, gentle voice. Have her tell you what is causing her to be afraid. Assure her that she is safe with you. Try to start a conversation with her about something pleasant to get her mind off of her fear.

Anger: Position yourself at the child’s height. Do not yell or raise your voice at him since that may increase his anger or aggressive behavior. Rather, speak in a soft and gentle voice. Have him tell you what is making him feel angry. Tell him that it is okay to feel angry – anger is a normal emotion. However, guide him to appropriate ways to express his anger. For example, you might say, *“It is okay to be angry. I would be angry about that, too. But it is not okay to use your hands to hurt others when you are angry. Instead, try using your words and saying ‘it*

makes me angry when...". By doing this, you are validating a child's feeling while also suggesting a good way to express that emotion.

Guilt: Children will often believe that they somehow caused the traumatic event to happen. If a child tells you she is to blame for what happened, you need to ask her why she believes that to be true. After hearing her reason, you can tell her that none of this was her fault. Then explain the facts about why it happened.

Sadness/Crying: Say to the child, *"I can see that you are feeling sad. I have felt sad, too. I'd like to hear about what is making you sad. What are you thinking about right now?"* If a child is crying you might say, *"It is okay to cry. Crying is one of the ways that our body shows how we feel."*

Using "Faces of Feelings" Pictures:

Some children, especially children ages 3 to 6 years, are still learning to name or verbalize their feelings. It may difficult for them to explain with words, spoken or written, what they are feeling. To help children identify their feelings, use the "Faces of Feelings" pages in the back of this guide.

Mentoring a Small Group of Children:

The use of small group meetings can be a very effective form of counseling. This format helps a child see that other children have also been affected by similar traumas. As the children hear others tell their stories it may encourage them to share their story. It also allows them to see the feelings of other children to help normalize what they are feeling.

A small group should have about five to seven children. If there are too many children in a group it will take too long for all the children to share their story. It will also make it difficult to develop a caring relationship with each child.

At the beginning of the group meeting, it is important to establish rules for the small group. Here are basic rules that should be used in your group.

- Tell the children not to repeat other children's stories after the group meeting today, but its okay to tell their own story.
- One child speaks at a time.
- Everyone will get a turn to share.
- There are no wrong answers or responses. Criticizing or teasing other children is not acceptable.

When to Refer a Child to Professional Help:

Some children will need additional help from a mental health professional. This does not mean that you have failed as a mentor. Rather, they need help from a professional who specializes in childhood trauma/crisis. If any of these behaviors and symptoms continues beyond three to six months following the traumatic event, refer the child to a mental health professional.

- Withdrawal from friends and usual social activities
- Sleep disturbances, reoccurring bad dreams
- Problems at school – poor behavior, unable to keep up with school work
- Outbursts of anger
- Depression – unhappiness, lack of energy, hopelessness

- Lack of hope or optimism concerning their own life and the future
- Anxious behaviors caused by reminders of the event
- Consistent complaints of headaches and/or stomachaches
- Lack of desire to eat or take care of personal needs
- Participation in dangerous activities with no thought of personal danger

¹ Children's Defense Fund, *Key Facts About American Children*, <http://www.childrensdefense.org/data/keyfacts.aspx>, August 2004, adapted.

² Center for Nutrition Policy and Promotion – US Department of Agriculture, *Childhood Obesity: Causes and Prevention*, <http://www.usda.gov/cnpp/Seminars/obesity.PDF>, October 1998.

³ National Clearinghouse on Child Abuse and Neglect Information, *Child Maltreatment 2003: Summary of Key Findings*, <http://nccanch.acf.hhs.gov/pubs/factsheets/canstats.cfm>, April 2005.

⁴ National Adoption Information Clearinghouse, *Parenting the Sexually Abused Child*, http://naic.acf.hhs.gov/pubs/f_abused/index.cfm.

⁵ The Children's Bereavement Center of South Texas, <http://www.cbcst.org/default.asp>.

⁶ National Coalition for the Homeless, *How Many People Experience Homelessness?(NCH Fact Sheet #2)*, <http://www.nationalhomeless.org>, June 2005.

⁷ American Psychological Association, *Violence and the Family: Report of the American Psychological Association Presidential Task Force on Violence and the Family* (1996), p. 11.

⁸ Mother Oak's Child. *Words that Heal... Words that Hurt*, <http://motheroaks.com/resources/manual/wordsthatheal.htm>, 2005.

⁹ Sharon Leigh and Janet Clark, *Activities for Helping Children Deal with Divorce* (Published by MU Extension, University of Missouri-Colombia, 2000), pgs. 1-4, adapted.

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