



Greetings,

You are invited to participate in Citizens for Safe Schools "Pride Circle", a new circle mentoring program for LGBTQ+ and Two Spirit Individuals and allies here in Klamath County.

The Oregon Alliance to Prevent Suicide and the Association of Oregon Community Mental Health Programs in partnership with the Oregon Health Authority's COVID-19 response team for suicide prevention, are supporting this project with funding. The goal of the project is to reduce risk for suicide and suicide attempts among LGBTQ+ people. The aim is to build protective factors by increasing opportunities for life-affirming connection, resources and healthcare to vulnerable and isolated LGBTQ youth and adults during this time of increased isolation and stress.

As an isolated, rural, underserved community this new project is vital to Klamath County. This grant award ensures our agency, Citizens for Safe Schools, has the capacity to insert critical supports into the lives of our at-risk LGBTQ+ and Two-Spirit youth. We are looking forward to creating positive spaces, community, and connectivity during a time where life is chaotic and lonely.

The CFSS "Pride Circle" is for LGBTQ+ and Two-Spirit youth age 8-24 and supportive adults. Adult Mentors will go through a screening process and criminal background check. The Pride Circle will include youth led peer mentoring and resilience activities through Zoom to include a comprehensive curriculum, social support, identity exploration, LGBTQ+ history, medical supports and resources, healthy relationship information, self-advocacy, and social-emotional skills building.

We believe our "CFSS Pride Circle" has the potential to greatly impact the landscape in our underserved community. Peer-led peer mentoring will allow youth to question, explore, accept, and share their identity and experience- centering emotional, social, and informational supports to build and amplify protective factors against suicide risk. The need in Klamath County is incredibly high. Klamath County is a rural, isolated community with staggering statistics in relation to youth mental health and suicide rates. It is imperative our community continues to build sustainable systems to address the burden of mental health and bullying on today's youth, specifically our LGBTQ+ and Two Spirit youth; and to implement youth suicide prevention and protective factors in partnership with youth serving organizations who seek to serve LGBTQ+ and Two Spirit youth, like CFSS.

Thank you for your interest in the Pride Circle, and please contact our office at 541-882-3198 or [info@citizensforsafeschools.org](mailto:info@citizensforsafeschools.org) if you have any questions. We look forward to working with you.

Sincerely,

**Robyn Pfeifer**

Executive Director



...Where Character Counts and Mentoring Matters | P.O. Box 243 | Klamath Falls, OR 97601 | 541-851-3597  
[www.citizensforsafeschools.org](http://www.citizensforsafeschools.org) | [www.facebook.com/citizensforsafeschools](https://www.facebook.com/citizensforsafeschools)



# Citizens PRIDE Circle Mentoring Program

## Checklist for Referral

The Citizens PRIDE Circle allows youth to question, explore, accept, and share their identity and experience- centering emotional, social, and informational supports to build and amplify protective factors against suicide risk. This program is developed with guidance of MENTOR, One Circle Foundation, Trauma Informed Oregon, and The Oregon Alliance to Prevent Suicide to ensure best practices specifically for this age and identity group to achieve aimed outcome of reduced suicide risk. LGBTQ+ youth can be referred by community partners, counselors, educators, friends, or self-initiated.

### Youth Profile Guidelines

- Should be between the ages of 8-24
- If under 14 years of age, *must* have parental consent (per Oregon State law)
- Identifies as Two-Spirit, LGBTQ+ or Questioning
- May not have adequate family or social supports
- May have struggled with suicidality or lost a family member/ peer to suicide
- Would benefit from an affirming space and network of LGBTQ friends, allies, and mentors- and interested in learning more about themselves and their community.
- Willing to participate via virtual groups until OHA COVID restrictions are lifted
- Agrees to *always* uphold confidentiality and trust of peers within the Circle

### Procedure for Program Enrollment

- Explain program to Youth, and ensure their interest. Would they like a supportive network of new friends and Mentors to help them navigate challenges, connect with their community, and participate in fun and engaging activities?
- *If under 14 years of age*, obtain express consent from Youth to speak with parent/guardian. Connect with parents/guardians to gauge willingness to support the concept and then: obtain all necessary forms: Mentee Info & Profile (Youth); Referrer Questionnaire (Referrer); Authorization for Release of Info (Youth/Parent); and Informed Consent (Youth/Parent).
- *If over 14 years of age*, obtain all necessary forms from Youth: Mentee Info & Profile (Youth); Referrer Questionnaire (Referrer); Authorization for Release of Info (Youth); and Informed Consent (Youth).
- Send forms to Citizens for Safe Schools, P.O. Box 243, Klamath Falls, OR 97601 or drop off at 731 Main St. Suite 207. Questions? Call us at (541) 882-3198.
- Citizens Staff will follow up with Initial Youth Assessment and process for enrollment in the Citizens PRIDE Circle Mentoring Program.



# Citizens For Safe Schools PRIDE Circle Mentee Information & Profile



Tell us about you!

## INFO

Preferred Name:

Preferred Identifiers:

Are you comfortable with disclosure of identifiers to parents/school staff/counselors/peers?

Phone:

Address:

Email:

Birthdate:

School:

Ethnicity:

Parent or Guardian Name:

Mental Health Provider (if applicable):

Probation Officer (if applicable):

Do you have internet access?

Do you have a device?

Will you have privacy while participating in virtual groups?

What are some goals and hopes for yourself within the PRIDE Circle?

On a scale of 1-5 (1 being poor, and 5 being strong) please rate your level of:

Accessible Behavioral Health _____	Social Connection _____
Strong Coping Skills _____	Community Connectedness _____
Sense of Hopefulness _____	Positive Accepting Adult _____
Purposefulness in Life _____	Family Acceptance _____
	Spirituality: _____

How did you hear about us?

- School Counselor
- Other School Personnel
- Other Youth Program
- Parent/Family
- Peer
- Mental Health Provider
- Social Media
- Support Group

Please identify a supportive emergency contact:

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

## **Citizens For Safe Schools Informed Consent and Permission Form**

Dear Youth, Parent or Guardian:

Citizens For Safe Schools, its Mentors, and Volunteers *will make every effort* to uphold your/your Youths safety, confidentiality, and well-being. CFSS and Mentors will assume responsibility for their own willful negligence when involved with mentoring. However, it is important to note that participation in the Citizens PRIDE Circle may involve some risk. Due to the sensitivity of topics discussed within the Circle, there may be information shared in relation to suicide, orientation, and identity that have potential to trigger emotional distress. CFSS Staff will ensure topics to be discussed are available for review prior to each Circle to allow for opt-out and harm reduction- but cannot guarantee topics of discussion or commentary among peers within the Circle. All disclosure of identity and orientation with outside agencies, family, and school personnel will be made strictly with consent, and all Youth will be provided with education, guidance, and direction to respect confidentiality of one another- but CFSS cannot guarantee conduct of peers outside the Circle. Youth will have access to an on-call Mental Health Therapist should they require emergent clinical support. Risk may also include physical harm or injury while Youth are engaged in community activities- ball games, hiking, car accidents during transport, etc.

The potential benefits of mentoring, however, are great.

Please know that all Mentors have undergone extensive screening and criminal background checks to exclude those with criminal, predatory, or non-affirming histories. Each Mentor involved in the Citizens PRIDE Circle is themselves of the Two-Spirit LGBTQ+ community, or a strong supportive Ally. CFSS requires all Mentors who transport Youth to have valid drivers licensure as well as current car insurance with medical coverage for passengers. CFSS also maintains liability coverage for all participants enrolled in our programs. During COVID, all Public Health guidelines will be strictly adhered to by Staff, Mentors, Volunteers, and Youth- including social distancing, mask wearing, and sanitization of spaces.

While CFSS provides Mentors with relevant training, Youth and Parents should realize that all are volunteers and not paid professionals.

Please sign below indicating that you/your Youth consent to participation in the program, its related activities, and assessments measuring risks and outcomes. Your signature(s) also indicate permission to seek emergency medical help, and that you have read and understood the risks involved; and, you agree not to bring legal action against CFSS and its mentors for any harm resulting from the identified risks.

Thanks for all your support!

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of Youth

\_\_\_\_\_

Signature of Parent/Guardian

**Citizens for Safe Schools**  
**Authorization for Release and Exchange of Information**

Preferred Name of Mentee: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Legal Name of Mentee: \_\_\_\_\_

I authorize and consent to the mutual exchange of information between the staff and mentors of Citizens For Safe Schools and the agencies or individuals indicated below for the purpose of supporting the health, safety and wellbeing of myself/ my Youth participating in the Citizens PRIDE Circle Mentoring Program. Information may be shared by and with:

School(s)

Klamath Basin Behavioral Health

Department of Human Services

Lutheran Community Services

Juvenile Detention

Other \_\_\_\_\_

**Information to be disclosed may include:**

School Record

Family History

Medical Record

Psychological Evaluation

Court Record

Other: \_\_\_\_\_

To exclude: \_\_\_\_\_

This consent is valid for the entire duration of enrollment in the Citizens PRIDE Circle Mentoring Program and can be used as a release of information at all of the schools I/they may be enrolled in during my/their time in the program. However, this consent is subject to revocation at any time, except to the consent that the program which is to make the disclosure has already taken action in reliance on it. If you prefer that any of the above information not be released, please indicate by writing it in the "to exclude" section.

**I recognize the information named above may contain specifics that are protected by federal and state law, and I specifically consent to disclosure of such information.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Mentee

\_\_\_\_\_  
Mentee Signature

\_\_\_\_\_  
Parent/Guardian Signature