

Safety Contract

I was **sexually abused**. My therapist told me that sometimes kids who are sexually abused have a problem with **sexually touching** other people. I am one of those kids. It is not easy to talk about my touching problem. I don't have to do it alone. My therapist is going to help me learn to make choices that are safe and this will help me feel better inside. I have also asked other important people who I trust to help me make choices that are safe. They are:

1. _____
_____ (initials)
2. _____
_____ (initials)
3. _____
_____ (initials)

The best way for me to make choices that are safe is to follow the safety rules we created together. These rules will help me at home, in school, and at activities when I am in the community. My safety rules are:

Privacy Rules

1. _____ .
2. _____ .
3. _____ .

Bedroom and Bathroom Rules

1. _____ .
2. _____ .
3. _____ .

Touching Rules

1. _____ .
2. _____ .
3. _____ .

House Rules

1. _____ .
2. _____ .
3. _____ .

School Rules

1. _____ .
2. _____ .
3. _____ .

Neighborhood Rules

1. _____ .
2. _____ .
3. _____ .

My therapist and I will talk about my contract each week. I will add new rules if I need more help with making choices that are safe. My therapist will also talk to the other people who I chose to help me make choices that are safe.

Signed _____ Date _____

Therapist _____ Date _____

Parent/Caregiver _____ Date _____