WHY SHOULD WE BE CONCERNED?

- US DHS reports that more than 60,000 children are sexually abused annually.
- Each year, approximately 1 out of every hundred children experience some form of sexual abuse. Worldwide, an estimated 25% of girls and 10% of boys are exposed to some form of sexual abuse in childhood, and reported sexual abuse numbers likely significantly-underestimate the true prevalence.

SOME THINGS THAT PARENTS SHOULD KNOW ABOUT SEXUAL ABUSE:

- Most offenders are known to the child; they may be family members, relatives, friends, teachers, coaches, babysitters, and others in positions of authority.
- Children most susceptible to sexual abuse have obedient, compliant and respectful personalities. Children from unhappy or broken homes may have higher risk of being targeted due to desire for attention or affection.
- Children who are victims of sexual abuse can display behavioral symptoms. They may withdraw from family or friends, display poor school performance or developmental regression, experience depression or anxiety, or exhibit aggressive or self-destructive behavior. Or, they may not display any outward abnormal behavior.
- Child sexual abuse often involves more than a single incident, and can go on for months or years.
- Sexual abuse includes any kind of sexual act or behavior with a child, and includes activities involving genital contact as well as non-contact events such as exposing a child to adult genitals in a sexual way, showing pornographic images to a child, or taking pornographic photographs of a child.

TIPS TO DECREASE YOUR CHILD’S RISK OF MOLLESTATION AND WHAT TO DO IF CONCERNED FOR ABUSE:

- In early childhood, parents can teach their children the name of the genitals, just as they teach their child names of other body parts. This teaches that the genitals, while private, are not so private that you can’t talk about them.
- Parents can teach young children about the privacy of body parts, and that no one has the right to touch their bodies if they don’t want that to happen. Children should also learn to respect other people’s right to privacy.
- Children should be taught early and often that there are no secrets between children and their parents, and that they should feel comfortable talking with their parent about anything -- good or bad, fun or sad, easy or difficult.
- Be aware and suspicious of adults who offer children special gifts or toys, adults who want to take your child on a “special outing” or to special events, and adults who create opportunities to be alone with kids.
- Enroll your child in daycare and other programs that have a parent “open door” policy.
- Monitor and participate in your child’s school programs and other activities whenever possible.
- As children age, create an environment at home in which sexual topics can be discussed comfortably. Use news items and publicized reports of child sexual abuse to start discussions of safety and to reiterate that children should always tell a parent about anyone who is taking advantage of them sexually.
- If your child discloses any history of sexual abuse:
  o Listen carefully, take them seriously, and intervene.
  o Support them. Let them know that they are not responsible for the abuse. Never blame them.
  o Bring your child to a physician for a medical examination to ensure that their physical health has not been affected by the abuse.
  o Most children and their families will need professional counseling to process these things and heal. Your pediatrician can refer you to community resources for emotional and psychological support.
- If you have concerns that your child may be a victim of sexual abuse, talk with your pediatrician. They can discuss your concerns and evaluate the situation more objectively. They will likely refer your child to a specialist for a comprehensive evaluation and examination, and they can make other necessary referrals and reports.
  o Commonly reported reasons that events go unreported include fear of the medical evaluation, social stigma, involvement of a family member as the perpetrator, shame, and desire for privacy.
CHILD SEXUAL ABUSE PREVENTION, RECOGNITION, AND RESPONSE

BEYOND THE BASICS

PATTERNS: Sexual abuse occurs mostly in the preadolescent years. Girls are more likely than boys to be sexually abused. Boys are less likely to report sexual abuse. Some features related to family structure and parenting have been found to have a small but significant association with increased risk. These include poor parent-child relationships, poor relationships between parents, the absence of a protective parent, and the presence of a non-biologically-related male in the home. Perpetrators are usually male and often trusted adult acquaintances. Perpetrators have reported gaining access to children through caretaking (e.g. babysitting, coaching) and targeting children using bribes, gifts, games, and systemic desensitization via touch, talk about sex, pornography, and persuasion.

SIGNS CONCERNING FOR ABUSE: Learned behaviors which are not a normal part of childhood development and play that may indicate that a child has been sexually abused include: Perpetration of sexual abuse on another child; Sexually explicit behavior; Developmentally-inappropriate knowledge of sexual activities; Developmentally-inappropriate play (e.g., repeatedly touching an adult’s genitals or requesting that an adult to touch the child’s genitals).

HOW TO TALK ABOUT THIS WITH KIDS:
- Basic Questions: Has anyone made you do anything that made you feel uncomfortable or embarrassed? Has anyone touched you in a way that made you feel uncomfortable? What would you do if someone tried to touch your private areas? What if it was someone you know?
- Tips for Teaching Kids about Okay and Not Okay Touch
  --Give them ownership of their body: “Your body is all yours, and no one has the right to touch you unless it is okay.”
  --Use appropriate language: Call body parts by correct names so kids feel more comfortable talking about their body, and so they can use accurate terms if they need to report a situation in which someone touched or hurt them.
  --Define private areas: Can use the swim suit rule - “If your swimsuit covers it, it is a private area and no one should be seeing or touching that area... If anyone touches you there, you should tell a grown up so they can help keep you safe.”
  --Don’t only use the swimsuit rule: ANY touch or intrusion in their space that makes them feel uncomfortable or seems unusual is not okay and should be reported. Predators often begin by touching other areas to condition a child to being touched (like rubbing the back or stroking the hair). Also, remember to include the mouth as a private part.
  --Explain safe or okay touch: Provide examples of okay touch such as hugs, and explain that these things are still not okay if they make them feel uncomfortable or if they aren’t okay with it.
  --Empower them to say NO: “Anytime someone touches you in a way that you don’t like, tell them to stop and ALWAYS tell an adult (mom, teacher, etc.).” Don’t force affection by making a child hug or kiss someone if they don’t want to do so. Allow them to make decisions about their body and showing affection.
- The Conversation: Keep it light but serious and unemotional so that kids feel comfortable talking about it and asking questions. Let it happen naturally in everyday life (like at potty or bath time). If needed, there are many videos available online to help explain being the boss of one’s own body and okay vs. not okay touch. Frequently remind them about this stuff and ask what they would do if something like this happened. Every time you think about or wonder about a potential abuser or are reminded of this subject, try to bring it up. Remember to review the basics again especially when they are transitioning to different care environments with new people.
- Help Them Trust Their Feelings: If a child feels uncomfortable by a situation or touch, do not try to convince them that they are wrong. Praise them for telling you. Be supportive, and do something about it.

NEXT STEPS WHEN POTENTIAL ABUSE IDENTIFIED (REPORTED OR SUSPECTED):
- Support the survivor and meet their needs to the best of your ability where you are.
- Do not cast doubts on a report of abuse or assault. Do not argue or tell the child that it didn’t happen. Too often, children are not believed and abuse goes unreported, particularly when a family member is the implicated perpetrator.
- Seek medical care and evaluation ASAP. Urgent evaluation in an emergency department is indicated if an alleged abuse occurred within 96 hours, if there are physical injuries that need treatment, if there is obvious forensic evidence on the patient’s clothes or body that could be collected, if there is danger of continued abuse or reprisal, or if the victim has homicidal or suicidal thoughts or any other emergent issues. (If in doubt, you can call your pediatrics clinic for advice, but remember that it is always okay to go to the ER for these issues.)
- Call Child Protective Services (CPS). In cases where sexual abuse is suspected, but not yet disclosed, CPS can evaluate the situation, intervene if needed, and determine if a trained forensic interviewer is needed.