Some key issues in working with pre-pubescent children with sexual behaviour issues

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RGT Training & Consultancy
I hope to…

- Identify some issues and dilemmas in defining what is age expected and what is of concern
- Explore causes and aetiology
- Consider what needs are being met via the behaviour
- Highlight some key issues in assessment and intervention
- Identify some facts and myths
- Eat some unhealthy cake during the coffee break
Sexual behaviour;
What is normal, what is of concern?
A Continuum of Sexual Behaviours
(Hackett, 2001)

- Clearly OK
- Clearly not OK: Abusive or Harmful
- Somewhere in the middle: The grey area
- Not sure: could be normal or nor normal, depending on certain things…
- Not normal for the age of the child
<table>
<thead>
<tr>
<th>Key Characteristics</th>
<th>Age expected</th>
<th>Of concern</th>
<th>Abusive / Harmful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mutual</td>
<td>Not age appropriate</td>
<td></td>
<td>Exposes /touches genitals of others with <strong>force</strong></td>
</tr>
<tr>
<td>Consensual</td>
<td>One off incident or low key touching over clothes</td>
<td></td>
<td><strong>forces</strong> others to play sex-related games</td>
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<tr>
<td>Choice</td>
<td>Peer pressure</td>
<td></td>
<td><strong>chronic</strong> exposing /porn</td>
</tr>
<tr>
<td>Exploratory</td>
<td>Spontaneous – unplanned</td>
<td></td>
<td>Sex explicit talk with pupils of <strong>lower age/power</strong></td>
</tr>
<tr>
<td>No intent to cause harm</td>
<td>Self directed;</td>
<td></td>
<td>makes sexually <strong>explicit</strong> proposals / <strong>threats</strong></td>
</tr>
<tr>
<td>Fun / humorous</td>
<td>no intent to harm, level of understanding, accept responsibility</td>
<td></td>
<td><strong>repeated</strong> simulation of intercourse with dolls, peers, with clothing on</td>
</tr>
<tr>
<td>No power differentials</td>
<td>Other children irritated or uncomfortable but not scared &amp; able to tell</td>
<td></td>
<td>simulating intercourse with clothes off</td>
</tr>
<tr>
<td></td>
<td>Parents / carers concerned, supportive</td>
<td></td>
<td>oral, vaginal or anal penetration</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td><strong>injury</strong></td>
</tr>
<tr>
<td>Age expected</td>
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<td></td>
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<td>--------------</td>
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<td></td>
</tr>
<tr>
<td>0-4</td>
<td>• exposing genitals of peers</td>
<td>• exposing genitals of peers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• plays sexual “games”, despite being told not to</td>
<td>• plays sexual “games”, despite being told not to</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• peeks at others in toilet, despite being told not to</td>
<td>• peeks at others in toilet, despite being told not to</td>
<td></td>
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<tr>
<td></td>
<td>• persistent fascination with nude pictures</td>
<td>• persistent fascination with nude pictures</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• sexually explicit talk with peers (adult level)</td>
<td>• sexually explicit talk with peers (adult level)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• preoccupied with masturbation</td>
<td>• preoccupied with masturbation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Touches genitals in public despite being told not to</td>
<td>• Touches genitals in public despite being told not to</td>
<td></td>
</tr>
<tr>
<td>5-12</td>
<td>• sporadic, private masturbation</td>
<td>• sporadic, private masturbation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Increase in ‘sex’ play</td>
<td>• Increase in ‘sex’ play</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Kiss, touching, showing,</td>
<td>• Kiss, touching, showing,</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Ask questions about periods, pregnancy, sex</td>
<td>• Ask questions about periods, pregnancy, sex</td>
<td></td>
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<tr>
<td></td>
<td>• Increased sexual or language / dirty jokes</td>
<td>• Increased sexual or language / dirty jokes</td>
<td></td>
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<tr>
<td></td>
<td>• Simulating intercourse</td>
<td>• Simulating intercourse</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• preoccupied with sexual themes (esp aggressive)</td>
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<td></td>
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</tbody>
</table>
Key dynamics

- Difficulties engaging in social communication
- Problems understanding how others think or feel
- Lack of imagination / perspective taking
- Ritualistic patterns, compulsivity and impulsivity
- Reduced opportunities for social interaction, modelling and peer experimentation
- Problems in learning and developing appropriate sexuality via practice & experimentation

Common problems

- Touching private body parts
- Removing clothes in public
- Masturbating in public areas
- Touching others inappropriately
- Discussing inappropriate subjects
- Looking up shorts, skirts, dresses or down shirts
- Obscene gestures
- Non-consensual hugging
- Inappropriate remarks and suggestions that have sexual connotations
- Echolalic repetition of sexual terms
Initial Assessment - Key questions

For all sexual behaviours

- What did the referrer actually see, hear or was told
- Context (where, when, who was present)?
- What preceded the behaviour?
- How did the adult’s react / respond?
- What were the reaction of the child when found out?
- Persistent? Did it stop when discovered?
- Any history of the child’s sexual behaviour & play?
- Was the behaviour age appropriate?
- What else is going in the child’s life (e.g. stress, changes in family, transition, incidents, and relationships)?
- What are the referrer’s fears / concerns / explanations?
- Access to any sexual imagery or adult sexual behaviours?
Initial Assessment - Key questions

Where other children are involved you should also seek:

- What took place or was reported? Context?
- How was the behaviour revealed?
- Power differences between children? Mutual?
- Nature of the children’s relationship?
- Was overt aggression used or implied?
- Was the behaviour planned or spontaneous?
- Did the child attempt to ensure secrecy?
- Effects on the other child?
- Has the behaviour changed over time
- Access to any sexual imagery or adult sexual behaviours?
- Info about other child & their family
- Any concerns about child being abused. If so by whom?
- Is the behaviour age appropriate?
How & why do children develop sexual behaviour problems
Possible Causes of Sexual Behaviour problems

- Experiencing sexual abuse
- Exposure to sexual imagery
- Living in homes with sexualised environment
- Living in homes with little or no physical, sexual or emotional privacy
- Experiencing physical abuse
- Neglect, poor parental care, domestic violence, loss
- Child used to meet parent’s emotional needs
- Multiple Trauma - emotional abuse, neglect, attachment problems, loss & loneliness, sexual & physical abuse
### Typology for Prepubescents
*(Gil & Cavanagh-Johnson)*

<table>
<thead>
<tr>
<th><strong>Group I</strong></th>
<th><strong>Group II</strong></th>
<th><strong>Group III</strong></th>
<th><strong>Group IV</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Sex Play / exploration</td>
<td>Sexually Reactive</td>
<td>Extensive Mutual Sexual Behaviours</td>
<td>Children who Abuse</td>
</tr>
</tbody>
</table>

**Group I**
- Natural & healthy curiosity, exploration, experimentation
- TV, videos etc

**Group II**
- Sexual abuse
  - Emotional abuse, traumatic sexualisation
  - History familial abuse
  - Sexual atmosphere in home

**Group III**
- Sexual, physical or emotional abuse.
  - Neglect, poor attachment, loss, discontinuity of care,

**Group IV**
- As II & III
  - Pairing sex / anger/anxiety / aggression
  - Carers with unmet needs
  - Poor boundaries
  - Sexualised environment
Ask yourself - which needs are being met through their behaviour?

- Need of sexual info
- Boredom or loneliness
- Curiosity
- Sexual excitement
- Learnt behaviour
- A need for affection
- A need for power

- A need to understand what has happened to them or what they saw
- Addiction to fear, power, eroticism
- A way to remember the person who abused them
- Revenge

**Key task:** to help the child meet these needs in appropriate and non-abusive ways
What helps?

Pre-pubescent children
| Group I  
(Sex Play /  
exploration) | Group II  
(Sexually Reactive  
Behaviour) | Group III  
(Sexualised  
Behaviour) | Group IV  
Sexually Coercive  
Behaviour |
|-----------------|-----------------|-----------------|-----------------|
| Info, advice &  
education  
of children &  
parents re what is  
normal & of concern & advice on  
boundaries | Victim /trauma-focused work.  
Parallel support & education of parents.  
Behaviour plan to modify behaviours. | As group 2.  
Also....  
Attachment / re-parenting work  
Ensuring child's needs met in more appropriate ways. | As group 2 & 3.  
Also ....  
Intensive work with carers / child  
Prevention & risk reduction work |
### Key intervention needs

#### Sex specific needs
- Age-appropriate sex education.
- Learning simple rules about sexual behaviour & physical boundaries.
- Teaching about OK and Not OK touch; Good & bad secrets.
- Teaching the inappropriateness of their sexual behaviours.
- Help to name, identify and express emotions.
- Learn strategies to help control different emotions.
- Basic sexual abuse prevention/safety skills.
- Increase understanding of their abusive behaviours & patterns.

#### Broader needs
- Identifying unmet needs and helping them meet these in non-sexual ways.
- Raising self esteem.
- Enhancing empathy (according to age).
- Anger control.
- Self-protection work.
- Sex education.
- Victim work (on child’s own experience of victimisation).
- Loss and grief.
- Work with caregivers (see next slide).
- **Promoting attachment** (probably the most important).
Focused Work with caregivers

• Developing a Safety Plan.
• Advice on supervision, risky situations & risk management strategies.
• Info about normal & abnormal sexual play & exploration
• Strategies re privacy & sexual behaviour rules
• Info about what factors help maintain the problem
• Sex education & how to talk with child about sexual matters.
• Advice on how to respond to behaviour problems.
• How to help their child use self-control strategies
• Improving relationship with their child.
• How to guide child toward positive peer groups.
• Enhancing parental coping mechanisms.
• Enhancing parental support.
Most children who have been sexually abused will develop sexual behaviour problems

Children with SBP are seeking sexual stimulation & arousal

All children with SBP are a risk to other children

They cannot be left at home with other kids

They are likely to grow up into adolescent or adult sex offenders

It's only boys

Myth

Myth

Myth

Myth
Primary Prevention Issues:

• Providing info to carers & professionals on children’s sexual development (healthy & problematic)

• Creating an environment whereby carers & professionals can openly talk about sexual issues regards children

• Integrating preventative care into school environments (e.g. issues such as boundaries, privacy, body awareness healthy relationships, respect, OK and Not OK touch)

➢ Publicity / public awareness / debate
➢ Parent Awareness Workshops
➢ Accessible information Literature
➢ Stop it Now Helpline
➢ Training for professionals
Secondary Prevention:

- Confidential Helplines (Stop it Now!)
- Improving the identification of worrying behaviours in children by carers, schools & others
- Early intervention advice for schools and parents (what to say, boundaries, strategies)
- Intervention with 'at-risk' children

- Training of key professionals (social workers, teachers, health, community agencies)
- Specific guidance & policies to be written on pre-pubescent sexual behaviour
- Consultancy to local agencies to increase their confidence in working in this area
Tertiary Prevention

• Increasing local therapeutic provision for the more concerning children (specialist workers) or consultancy to existing services with expertise in working with children.

• Better and more informed assessment and intervention practice on this client group (currently ignored).

• **Question** – what local services would you be able to access to work with a pre-pubescent child with sexual behaviour problems & their family?
Discussion Topics

• What have you learnt so far?

• What are the key practice issues for you working with young children with sexual behaviour problems and their families?

• What worries or anxieties do you have about working with this client group?

• What questions do you have?
Useful videos for children (via YouTube)

• “It's your body. You're in Charge” – educational video for young children about privacy, boundaries, secrets and good and bad touch (Sunburst media)

• “If it happens to you: Dealing with abuse” – about all forms of abuse (*Sunburst media - trailer on you tube. But direct from Suburst media)

• “My Body belongs to me” – cartoon about good and bad touch

• “Tom’s Secret” – cartoon about CSA

• “Komal. A film about child sexual abuse” – (Indian cartoon in English)

• “Jigsaw” – on-line grooming / internet safety (8-10 yrs)
Safe places for your child to get info about sex & relationships

- **Childline** - website provides young people with information and advice about online porn.
- **Think U Know** - age appropriate advice for young people, with content from ages 5-7 up to 14+. Also for adults.
- **Brook** - sexual health charity for young people under 25.
- **BBC Advice** - info from medical professionals, government charities etc.
- **The Site** - aimed at young people aged 16+. They offer "real world" advice on a range of subjects including sex and relationships, drink and drugs, and health.
Useful books & manuals

- Bateman J & Milner J (2015) ‘Children and young people whose behaviour is sexually concerning or harmful
- Cunningham C. and McFarlane K ‘When Children Abuse’ Workbook
- Hacket S (2014) ‘Children and young people with harmful sexual behaviour’
Experimental or Abusive?

• A 10 year-old girl asked a 5 year-old boy to go with her into the toilet at the childminder’s house & asked to see his ‘willie’. She reports, having seen male genitals on the Internet (advertisements for increasing the size of the penis) & wanted to see a real penis. When the boy said he did not want to take his trousers down, she asked him again & he did. There was no force, anger or yelling. She touched his penis with her hand & nothing else happened. There were no reports of any previous incidents. The girl lives with her mother & younger sister & is not known to social services. This info emerged in a casual way whilst he was having a bath & the boy has shown no sign of distress or fear of the girl & there have been no reported behavioural reactions.
Services provided by RGT Training & Consultancy

✓ Assessment, intervention, training & consultancy on children & young people who have been sexually abused

✓ Assessment, intervention, training & consultancy on children and young people who display inappropriate or harmful sexual behaviours

✓ Training and consultancy on caring for children who have been abused or have worrying sexual behaviours

✓ Assessment, intervention and consultancy on adults who might pose a risk to children

✓ Post adoption support

✓ Therapeutic life story work