

TIP SHEET: Responding to Sexual Behavior

Foster parents intervene daily in response to inappropriate behavior; managing conflict, reminding about rules, setting limits, and imposing consequences. But nothing stirs up discomfort more than when the misbehavior is of a sexual nature. There is a natural tendency to avoid issues and situations that are uncomfortable and it can interfere with the ability to respond effectively.

Responses to problem sexual behavior in children can range from under-reaction (Well they probably won't do it again) to over-reaction (Hello? You have to move this child out of my house NOW!)

While we realize this sort of behavior is upsetting and sometimes alarming, the **MOST IMPORTANT** thing we can do is respond in a calm, matter-of-fact way, just as you would with any other inappropriate behavior. Younger children, especially, take their cues as to the meaning of the behavior from the adult's response. A strong negative reaction, such as shock or disgust on the part of the adult, can reinforce a child's negative self-perceptions.

Every foster parent should be prepared to intervene immediately when they observe sexual behavior by a child, or when a sexual behavior is reported to them. The purpose of this document is to better prepare you to respond to problem sexualized behaviors in children. Before you read it's important to note that any sexualized behavior should be documented and reported to the staff and therapist working with the child. This does not include developmentally appropriate curiosity that children typically display as they grow. Previous training will have outlined the course of normal sexual development and ways to redirect and correct inappropriate interactions.

What Is Problem Sexual Behavior?

There is a wide range of behavior that can be considered problematic. Such behavior can include:

- A single incident that indicates a child has knowledge of adult sexual behavior beyond his/her age and developmental level
- A pattern of sexual behavior, which, although the behaviors themselves may be normal does not respond to correction by adults
- Sexual behaviors that are atypical for a child's developmental level or suggest that a child is pre-occupied with sexual matters
- Sexual behaviors that do not involve others but are a problem for the child (e.g., excessive masturbation that interferes with day to day activities and/or peer relationships)
- Sexual behaviors that bother or seriously disturb other children

Children's problem sexual behaviors can be placed in three groupings, each with different origins:

1. Reactive Sexual Behavior

Reactive sexual behavior is often a re-enactment of what the child has experienced, or an imitation of what he or she has witnessed. It occurs when a child is overwhelmed by what he or she has experienced or seen, and is unconsciously attempting to make sense of the experience.

Children who have observed adult sexual activity or seen pornographic videos (either with or without their parents' knowledge) may attempt to imitate what they have seen by, for example, pretending intercourse (lying on top of another child, or pushing the pelvis into another, etc.).

Reactive sexual behavior is spontaneous, impulsive, without planning. The child who has engaged in this behavior finds himself/herself in a circumstance that seems to trigger the memory of an earlier similar experience.

This kind of behavior is problematic because it is not usually predictable. However, responding to such behavior in a firm but helpful way is necessary

2. Sexualized Behavior

Some children have had so much trouble in their lives that they feel profoundly sad, lonely, or empty, and discover that sexual behavior helps them cope with unpleasant and negative emotions.

This sometimes happens with children identified as having “attachment problems.” They been unable maintain a consistently close emotional bond with another person. They learn that sexual feelings and arousal even at very young ages makes them feel better. They forget, for a while, unpleasant feelings of sadness or worry.

Children who have sexualized behavior often seem to find other children with similar problems, and find themselves engaged in mutual sexual behavior. While there is likely no forcing involved, this kind of situation is still a problem.

Children who engage in this kind of behavior find it reinforcing. If someone is doing it too, it seems more acceptable. This process is more complicated than reactive behavior because there is some understanding involved.

3. Coercive Sexual Behavior

A few children who have experienced a long history of powerlessness and physical and sexual abuse, or have witnessed violence, come to engage in coercive sexual behavior that mimics that of aggressive adult sexual behavior.

These children tend to not have many close friends and often engage in aggressive and bullying behavior as a way to help them feel the power that they have not experienced in more ordinary interactions. . Sometimes the aggressive behavior has sexual components. They might befriend less competent, younger, or smaller child with the plan of engaging them in some sort of sexual behavior. They might use force and intimidation to achieve goals of dominance and power. Children who engage in coercive behavior plan their actions.

A wide range of dynamics and situational factors influence children’s sexual behaviors. However, children who have problematic sexual behavior regardless of the underlying causes typically have the following in common:

- Difficulty identifying and communicating their needs and feelings
- Reluctance to talk to adults, especially about sexual issues
- Lack of understanding of and empathy for others
- Distorted thinking patterns about responsibility (“It’s not my fault”; “I don’t care, nobody does”; “It just happened”; “Everything’s OK, I didn’t get caught”).

An effective response to children’s problem sexual behaviors has three goals (Ryan, 1998):

1. **Encourage communication** — adults provide a model for the child by being able to talk clearly and calmly about the sexual behavior.
2. **Develop empathy** — adults help the child to recognize and interpret cues that signal others’ feelings and needs, and tell the child about the impact of her or his behavior on others.
3. **Promote accountability** — adults help the child develop the ability to “catch” his or her thoughts, recognize thinking errors, and understand that behavior does not “just happen.”

Responding to Problem Sexual Behavior

A child's sexual behavior may be reported to the foster parent or observed directly. When an incident is reported:

- Acknowledge the person reporting for bringing the behavior to his or her attention
- Reassure the reporter that the appropriate action will be taken
- Inform the TBF staff of the alleged incident and follow recommendations i.e. reporting to the appropriate authorities.

BEHAVIORS THAT ARE CAUSE FOR CONCERN

- Attempts to expose genitals of peers
- Plays sexual "games", despite being told not to
- Peeks at others in washroom, despite being told not to
- Engages in peeking, exposing
- uses obscenities
- Shows persistent fascination with nude pictures, interest in pornography, may take these to school
- Has sexually explicit conversations with peers that reflect adult level of knowledge
- Writes or draws sexual graffiti (especially chronic or which impacts others)
- Teases or embarrasses peers with sexual comments
- Sees sexual meaning in neutral events, pictures, etc.
- Is preoccupied with masturbation; touches, rubs genitals in public despite being told not to
- Engages in sexual behavior directed at adults touches, or stares at the breasts and or genital area/buttocks of adults
- Simulates intercourse with clothing on, with dolls, peers, animals
- Preoccupied with sexual themes (especially sexually aggressive ones)

What to do

In this situation clearly communicate, help the child develop empathy and promote accountability. Take advantage of a "teachable moment" to communicate concern about the specific behavior while demonstrating that you can and will talk in a direct, calm and matter-of-fact way about sexual behavior. Talk about the impact of the behavior on you and the other members of the household. Focus on improving the child's ability to be in charge of their behavior because of concern for others (*development of empathy*) not just because he or she anticipates consequences.

1. Talking to the Child Who Exhibited the Behavior

Describe the behavior in terms that are clear and direct. ("Jessica, I heard you talking about another child's private parts.")

Respond by pointing out the impact on others. ("It is very scary when you talk about sexual acts to Debbie. The other children feel like avoiding you, because of what you talk about to them.")

Confront the child about the behavior ("You do not have the right to speak that way to any person here.")

Prohibit the behavior or set limits. Give a consequence to the child ("This must stop. For the next week, you will sit next to me. You can do your homework in the at the kitchen table while I'm getting dinner ready. If you finish your homework, you can help with dinner.") Let the child know that you are so concerned about the behavior that his TBF staff and or therapist will be informed of the incident.

2. Talk to the Child Who Was Mistreated

Gather as much information as you can to determine the scope of the problem. Reassure the child who was mistreated that she or he is not at fault. Consult with the TBF staff and or therapist to determine the child's need for support and/or counseling. Ask the child whether this has happened before. Encourage him or her to tell you or another adult if it happens again. Sometimes it is not clear

whether one child was the initiator or whether both children were mutually engaged. *Both* children should receive a clear message about the inappropriateness of the behavior in the same manner.

3. Document the Incident

Record the facts about the incident and who was involved. Document the response of the child who exhibited the behavior and the consequences imposed. Record any statements made by the child. Make a note of the action taken. Document the statements of any child involved. Sometimes, children may exhibit more than one type of sexual behavior. Tracking the behavior and any changes help you know if your intervention is working.

4. Develop a Safety and Support Plan

Include the TBF staff and the therapist to create a safety and support plan suggested elements:

- Increased supervision of the child times of the day that are less structured.
- Designated play areas and off limits areas
- Supervision of the child's use of the washroom
- Procedures for the child to check in with a designated adult throughout the day
- A clear plan with escalating consequences in response to subsequent inappropriate sexual behavior
- Specific behavior management strategies including a plan for reinforcing appropriate behavior by including the child in positive peer activities
- A scheduled review of the plan

5. Follow-up and Monitor

Since it will take some time for the child to develop internal control over her or his behavior, the external controls and supports create an environment of safety. Observing the child and providing feedback on his or her behavior as well as taking opportunities to talk with the child about his/her friendships, interests and activities help provide a context for appropriate interaction. It will take time to so expect to have these conversations several times, especially if the child clearly has poor social skills or developmental delays.

6. Reviewing the Safety and Support Plan

A safety and support plan is not a permanent arrangement. As the interventions continue and the child continues in therapy more information is available, it should be updated to reflect the real risks. When you're unclear about the seriousness of the problem, your response may be stricter. Tracking behavior and talking with the rest of the team, will help you decide when it is ok to remove some or all of the restrictions on the child.

Strategies

Some foster parents may not be comfortable a child's sexual acting out behaviors or talking about sexual issues. People sometimes fear that talking to the child about problem sexual behaviors makes things worse. This is *not* true. You might have to practice talking about specific topics to help lower your level of discomfort (in the same way that you might go over in your head how to break difficult news to someone). This is hard work! Remember to seek support from your team, and other foster parents. Please review the list of suggestions for responding to sexualized behavior

- Teach the child about privacy and personal space. Reinforce these concepts by providing the child with a clearly designated common areas and personal space for their belongings. While teaching by telling is one way to help the child learn, modeling respect by always asking permission before entering the child's living space (yes permission, in your own house!) or touching his or her belongings goes a long way towards facilitation of change.
- When riding in the car put the child in the front seat with an adult

- Have the child sit in a chair as opposed to a couch or love seat unless they're sharing the couch with you.
- Communicate clear messages about touching others (e.g., "kissing other children at school makes them feel uncomfortable"). They also need clear and consistent limits about touching others and respecting personal space.
- Be consistent with consequences. If the child comes to think that the behavior is sometimes OK, (like not addressing a behavior because you're in public) the behavior will actually be strengthened.
- Make a plan with the child for getting help from an adult when the child is experiencing the thoughts and feelings that typically precede her or his problem sexual behaviors. This can be particularly effective if the child has progressed in therapy to the point where he or she is aware of the "warning signs or triggers" of problem sexual behavior. Included the child's therapist and the involve specified adults in other settings who are given specific strategies for helping the child deal with these feelings and regain control. It could be something as simple as hand signal that a child can use to indicate that she or he needs immediate help.
- Pay attention during times when the environment is becoming excessively stimulating for the child, and create opportunities for the child to take time out to calm down.
- Focus on enhancing specific social skills (e.g., making friends, joining groups, making conversation).
- Encourage social interaction with peers, but be aware of spending too much time with one individual particular child or adult.
- Teach other children to label inappropriate behavior and respond assertively. (James you're standing too close).
- Develop a way for reinforcing appropriate behavior and/or times when the child's sexual behavior is under control. ("James you did a really nice job when we went to the grocery store. "I noticed how well you respected the other kids' personal space.")