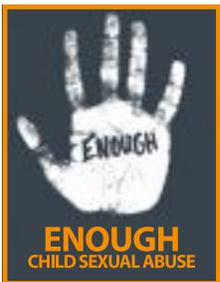


Straight Talk About Child Sexual Abuse:

A Prevention Guide for Parents





Raising a child comes with many responsibilities. Among them is the need to protect your children from sexual abuse. Keeping them away from known sex offenders in your community is one step, but since most cases of sexual abuse are never reported, how do you know who is safe? An estimated quarter to a third of sexual abuse incidents involve family members. Nearly 60 percent involve people that you or your child know and trust through school, sports, and other community activities. Less than 10 percent are strangers.

The average age of reported sexual abuse is between 9 and 10, which means that infants, toddlers, young children, and teens are all considered at risk. Children with physical or developmental disabilities are at significantly greater risk of sexual abuse. Children who are D/deaf are two to three times more likely to be sexually abused than their hearing peers.

The good news is that confirmed cases have been going down as awareness has increased. Yet the risks remain real, so parents and guardians need to jump into action and take specific steps to strengthen safety and reduce opportunities for abuse. This guide will give you the information and skills you need to do just that. So don't put off talking to your kids because you feel you don't know enough, don't know what to say, or how to approach the subject. Armed with this new information, you can confidently help your child grow up safe and free from sexual abuse and its devastating consequences.



What Is Child Sexual Abuse?

Child sexual abuse includes any sexual contact between an adult and a child or a teen. It can also include sexual contact between children when one child is more powerful than the other because of age (usually 3 years older or more), size, or intellectual development.

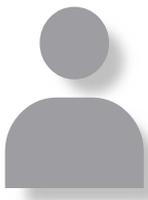
Child sexual abuse can include both touching and non-touching acts. Both are damaging to children and teens and are against the law.

Abusive touching behaviors include:

- Fondling or rubbing up against a child's genitals, buttocks, or breasts
- Penetration of the child's mouth, anus, or vagina by the abuser or with an object
- Coercing a child to fondle him/herself, the abuser, or another child

Abusive non-touching behaviors include:

- Exposing oneself to a child in a lewd way
- Inappropriately viewing or violating private behaviors of a child or teen (e.g., undressing, bathing)
- Taking sexually explicit or provocative photographs of a child
- Showing pornography or sexually suggestive images to children
- Talking in sexually explicit or suggestive ways to children in person, by phone, by Internet, or via text messages



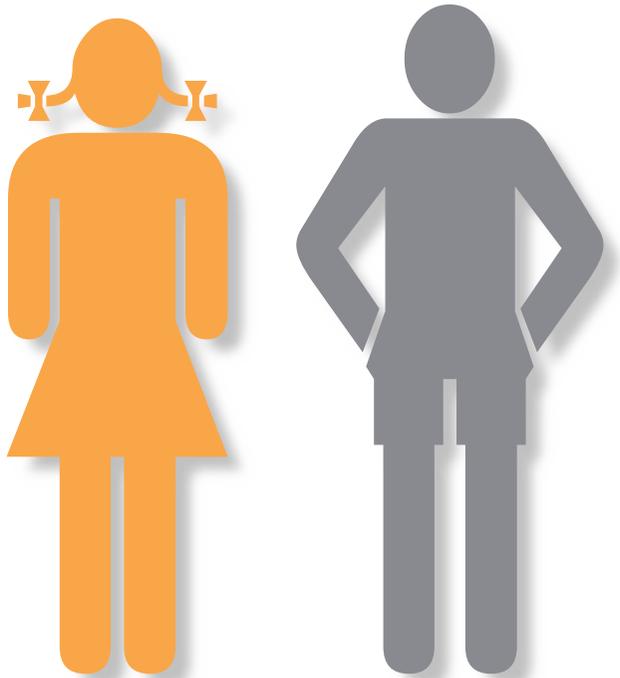
Who Sexually Abuses Children?

The majority of adults who sexually abuse children appear friendly and likeable; they mostly look and act like everyone else. Many work diligently over time to earn the trust of children, parents and other adults. They often build up to the abuse slowly, beginning with “accidental” touching, then move to cuddling, horseplay, wrestling, backrubs. They may use suggestive comments or jokes or present sex play as a game. Most children and teens do not fully understand what is happening, and when they do, many are led by their abusers to believe they are to blame for what has happened, making it difficult for children to tell.

Those who sexually abuse, are a diverse group; most are not true “pedophiles” and a third or more are juveniles themselves. Different types of abusers can present differently, but here are some behaviors that can indicate poor personal boundaries and that should be concerning. If you see these, it doesn’t prove that the person is abusing. It should, however, cause you to observe their behaviors around children or teens more closely. If something doesn’t seem right, trust your instincts. Talk with your child or other parents about any concerns you or they have, and, if warranted, report your concerns.

Are you aware of someone in your family or circle of acquaintances who:

- Finds opportunities to be alone with a child or teen when adults are not likely to interrupt (e.g., car rides, special trips, babysitting)?
- Ignores a child’s verbal or physical cues that he or she doesn’t want to be hugged, touched, kissed, or tickled?
- Doesn’t respect a child’s or teen’s privacy in the bathroom or bedroom?
- Gives a child or teen money or gifts for no particular occasion?
- Discusses or asks a child or teen to discuss sexual experiences or feelings?
- Doesn’t appear to have adult friends and prefers to spend free time interacting with children and teens who are not his own?
- Seems to have a different “special” child or teen friend of a particular age or appearance from year to year?
- Views child pornography through videos, photos, or the Internet? The majority of men convicted for possessing child porn also admit to having committed “hands on” offenses. Viewing, possessing, or producing child pornography is illegal.



Do Children Abuse Other Children?

While sexual behaviors in children are “developmentally expected” and a normal part of growing up, sometimes children are involved in activities with one another that can be inappropriate, coercive, or abusive. You can learn to assess situations by asking yourself:

- Is this behavior causing a problem for the child or other children?
- Is one child larger in size and/or is more than three years older in age?
- Does one child have greater mental, emotional, or physical ability?
- Does one child appear to have been coerced into the activity through threats, bribes, or physical force?

If you are concerned about any sexual behavior of your child that includes these, please discuss with your pediatrician and seek advice or a referral for assistance. See resources at the end of this booklet.



Tips

Tips to Help Protect Your Child

The vast majority of sexual abuse occurs when a child or teen and an adult are alone. One of the ways you can significantly increase your child's safety is to increase supervision and choose group activities rather than "one child/one adult" situations. Many children, however, benefit from and want to participate in private lessons or mentoring programs where one-on-one relationships are key, e.g. music lessons, tutoring, sports coaching, Big Brothers Big Sisters.

If you choose to enroll your child in these programs, be sure to approach the instructors or mentors confidently and tell them you want to reduce your child's risks of sexual abuse, just as you know they do. Ask what their policies are around leaving doors open during lessons, allowing parents to observe or drop in.

Share this booklet with them or suggest they learn more by visiting www.enoughabuse.org. Let them know you are an informed and vigilant parent. Encourage your child to tell you if they have concerns about interactions with any adults or children.

Waiting to have “the big conversation” with your child at 12 is too late. Begin weaving these prevention messages in everyday conversations with your child as early as three. Remember, it’s easy when you start early and talk often.

1 “All parts of our bodies are good and we can speak about them respectfully. It’s best to use the right names for private parts, like penis, vagina, breasts, buttocks or butt.” (Be aware, parents, if you are too embarrassed to use those names, your children will likely follow your lead and also be too embarrassed to tell you if someone is being sexually inappropriate or abusing them.)

2 “Grown-ups and older children have no business ‘playing’ with your private body parts. Sometimes grown-ups need to help young children with washing or wiping these private parts, but that’s not the same as playing with them. Sometimes doctors need to examine you. But it’s never without a nurse or parent in the room and it’s never a secret.”

3 “Grown-ups and older children never, ever need help from children with their private parts. If someone asks you for this kind of help, tell me right away, even if it’s someone in our family or someone we know. If anyone shows you their private parts, pictures of private parts, or asks to take pictures of your private parts, you can tell me. I promise I will listen and not be angry. If you ever feel ‘mixed up’ about secrets, feelings, or private body parts, tell me and I will help you.”

4 “It’s important that you do not touch anyone else’s private parts. It could make them feel upset, confused, or angry and could get you in trouble. If you are wondering about these things, come tell me and we can talk about it.”

5 “Surprises are fun for children but secrets are not okay. Surprises are secrets meant to be told, like a surprise party. But other secrets can be dangerous because they don’t let me know if you’re safe. If a friend is playing with matches, someone offers you drugs, or someone asks you to help them with their private body parts, I won’t be able to keep you safe unless you tell me about it.”

Pediatricians suggest additional ways that might help reduce the risks of sexual abuse.

1. Begin talking to your child about personal space and privacy by age 3 and about sex before age 10.
2. Only allow those you have trusted and have known for many years to provide toileting and bathing care for your child.
3. Encourage children’s independence in toileting and personal self-care.
4. Discourage bathing with siblings and adults once your child starts elementary school. Supervise bathing before this time.



How Can I Tell If My Child Has Been Sexually Abused?

Physical signs of sexual abuse are not common, but here are signs you can look out for. Remember, they do not confirm that abuse has occurred. Children can suffer from injuries or medical problems that might cause some of these signs. If you see any of these, explore with your child and pediatrician what might be the reasons.

- Trouble walking or sitting
- Complaints of pain upon urination
- Irritation, abrasions, swelling, skin tears, bleeding, or infection of genitals or anus
- Unexplained injuries around the mouth
- Roughened or calloused area between buttocks
- Sexually transmitted infections (STIs)
- Teenage pregnancy

Children can often show changes in behavior for any number of reasons that cause them stress, e.g. bullying, poor grades, family problems, etc. If you see behavior changes, don't assume sexual abuse has occurred. Ask your child to tell you what is bothering or hurting them, no matter what you think is the cause.

- Headaches, stomach pain, or chronic pain
- Change in appetite
- Significant weight gain or loss
- Bathroom accidents
- Sleeping problems or nightmares
- New words for private body parts that were not learned at home
- Sexual activity with toys, dolls or other children
- Mimicking adult sexual behaviors, e.g. French kissing, "humping"
- Asking not to be left alone with a certain adult, child, or babysitter. Ask your child what it is about that person or what they do that makes your child not want to be around them. Even if the child is not ready to provide details, seriously consider ending your child's contact with that person.
- Mood changes when left with a certain person (e.g., going from talkative and cheerful to quiet and withdrawn)
- Cutting, burning or self-mutilation
- Suicidal behavior



What Can I Do If I Think Sexual Abuse Has Occurred?

Say to your child: “You seem upset. I’d really like for you to tell me why, so I can help you. No matter what you tell me, I love you and I won’t get angry.” Some children may not be ready to tell, but just knowing that you are there when they are ready may give them the confidence to eventually disclose.

If your child tells you that someone is abusing them:

- Remain calm in your words and actions. Responding in an upset way may make the child feel badly that he or she told and could make them stop sharing information.
- Tell your child: “I believe you. You’re not to blame. You’re brave to tell me. I will protect you.”
- Ask open-ended questions, e.g. “It’s important that I know what you know. Tell me what happened.”
- Don’t plant ideas in your child’s mind about what you think may have happened or give your child words to use to describe what they are telling you. This could undermine any future interview or investigation.
- Don’t ask your child to repeat multiple times what they have told you.
- Contact your local Child Protective Services, Police, or Child Advocacy Center for help to determine next steps to take, such as arranging for medical treatment or for the child to be interviewed by a professional skilled in this area.
- Make a plan for safety so the child will not be left vulnerable to the alleged abuser’s actions if they learn or suspect the child has disclosed.
- Get support for yourself. Being involved in a disclosure of sexual abuse can be upsetting and you may want to seek confidential support from a trusted family member, friend, or professional.

If you are too upset or unsure about handling your concerns or your child’s disclosure, it’s best to reach out to a professional who can help.

Treatment:

For healing to begin, the child first needs to be kept safe from further abuse. Any physical symptoms resulting from sexual abuse usually heal quickly and completely. However, the emotional trauma many children experience may be more long-lasting and usually requires that they receive support from a mental health professional. See treatment resources that follow.

Reporting, Prevention, and Treatment Resources



In New Jersey, any person having reasonable cause to believe that a child has been subjected to abuse should immediately report this information to the State Central Registry (SCR). A concerned caller does not need proof to report an allegation of child abuse and can make the report anonymously.

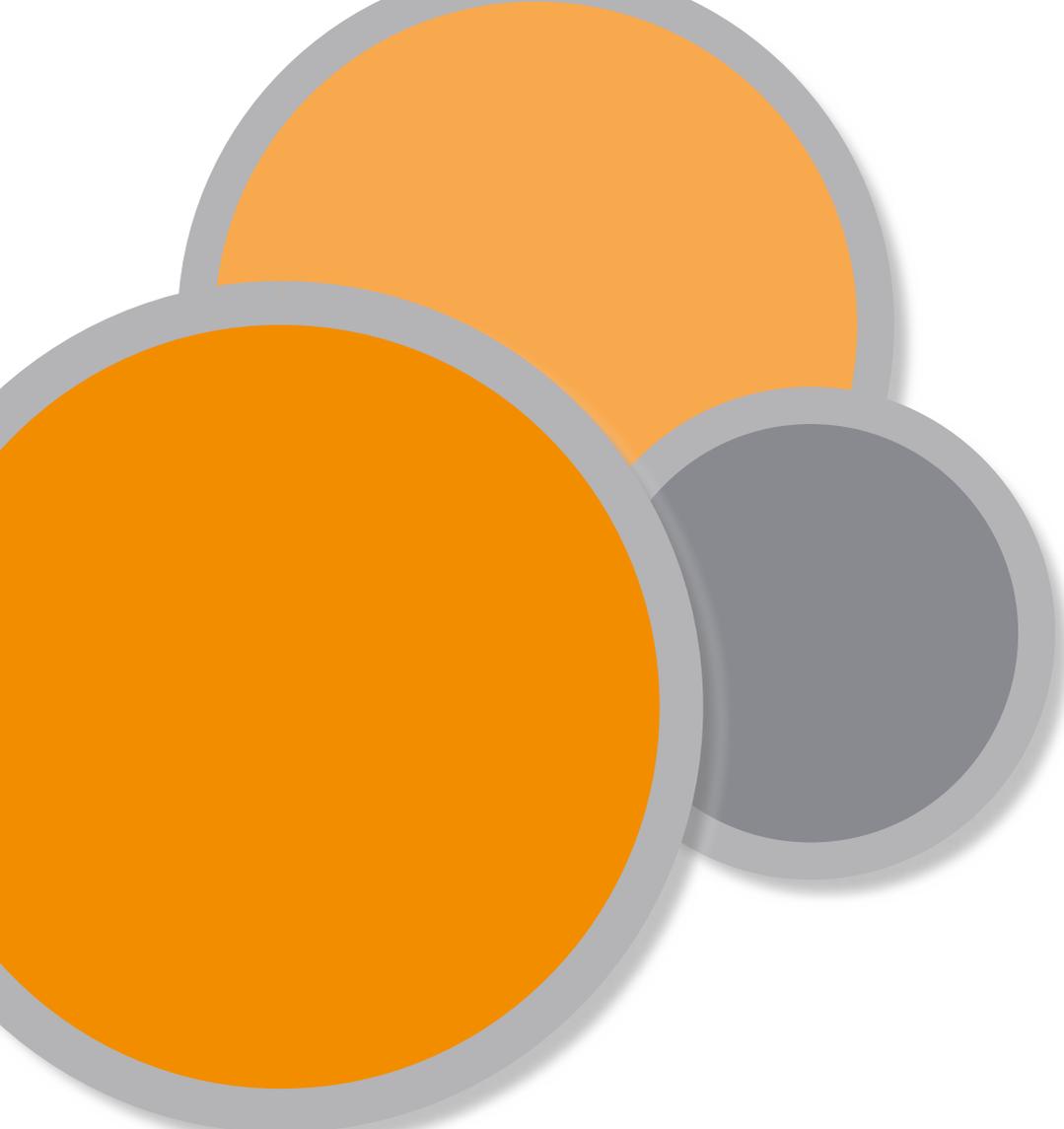
- New Jersey Department of Children and Families: 1-877-NJ-ABUSE (1-887-652-2873)

To learn how you can prevent child sexual abuse:

- NJ Enough Abuse Campaign at Prevent Child Abuse New Jersey: 1-800-CHILDREN (1-800-244-5373) or visit www.enoughabuse.org.
Subscribe to “Join the Movement” and receive the free “10 Conversations,” an email educational series about preventing child sexual abuse.

For treatment resources:

- New Jersey Children’s Advocacy Centers:
 - Union County Child Advocacy Center: 908- 965-3866
 - Ginnie’s House Children’s Advocacy Center, Newton, NJ: 973- 579-0770
 - Passaic County Child Advocacy Center: 973- 837-7650
 - Deirdre’s House, Morristown, NJ: 973- 631-5000
 - Monmouth County Child Advocacy Center: 732- 683-8660
 - Middlesex County Victim Advocacy Center; 732- 745-3328
 - Hudson County Prosecutor’s Office CAC: 201- 795-6400
 - Wynona’s House Child Advocacy Center: 973- 753-1110
 - Burlington County Child Advocacy Center: 609- 265-5881
 - Camden County Prosecutor’s Office CAC: 856-614-8000
- NJ Coalition Against Sexual Assault: 1-800-601-7200 - 24/7
- Coalition Against Rape & Abuse (South Jersey): 1-609-522-6489
Support groups for victims of sexual assault
- Children’s System of Care, State of New Jersey: 1-877-652-7624
For services for children and adolescents
- NJ Department of Health – Family Health Line: 1-800-328-3838
- NJ Association for the Treatment of Sexual Abusers: www.njatsa.org
For more information, contact: NJATSA@gmail.com



For additional information, contact:

Enough Abuse Campaign

www.enoughabuse.org

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www.preventchildabuse.nj.org | 1-800-CHILDREN



Prevent Child Abuse
New Jersey™

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