 

timely techniques to help your child get through the school year

Sexuality in Children and Adolescents

 Understanding the sexual behaviors of children and adolescents is a complex and intricate pattern that ranges from appropriate and healthy development to concerning yellow and/or red flags. During early development, children learn six core strengths including attachment, self-regulation, affiliation, attunement/empathy, tolerance and respect. Between ages 6 – 7, if a parent/caretaker has provided appropriate experiences, these core strengths should be present. However, it is important to keep in mind that these behaviors/experiences may not all development equally and/or be fully developed by this age. Additionally, sexual libido is inborn/innate, but people learn how to display those behaviors through modeling. Below is a list of normal, yellow flag and red flag behaviors for children and adolescents. For the sake of this information, the term “adolescent” will be used when talking about students 12 years and older or when he or she has begun puberty.

Childhood – Normal:

* Genital or reproductive conversations with peers or similar aged siblings
* Looking at their own bodies and the bodies of others (“I’ll show you mine, you show me yours”)
* Touching genitals to explore anatomy and sensation
* Playing “doctor”
* Imitating hugging/kissing behaviors
* Asking sexual questions about their bodies, others bodies, conception, reproduction, birth, arousal, marriage, intercourse
* Acting out sexual behaviors with dolls or stuffed animals

Childhood – Yellow Flag:

* Preoccupation with sexual themes (especially sexually aggressive)
* Attempting to expose other’s genitals (lifting other’s skirt, pulling other’s pants down)
* Sexually explicit conversations with peers
* Sexual graffiti (especially chronic or impacting individuals)
* Sexual innuendo/teasing/embarrassment of others
* Precocious sexual knowledge
* Single occurrences of peeing/exposing/obscenities/pornographic interest
* Preoccupation with masturbation
* Mutual/group masturbation
* Simulating foreplay with dolls or peers with clothes on (French kissing, petting)

Childhood – Red Flag:

* Sexually explicit conversations with significantly younger or older students (outside of their peer group)
* Touching the genitals of others
* Degradation or humiliation of self or others with sexual themes
* Forced exposure of other’s genitals
* Inducing fear/threats of force
* Sexually explicit proposals/threats including written notes
* Repeated or chronic peeping, exposing, obscenities, pornographic interest
* Compulsive masturbation causing task interruption
* Simulation intercourse with dolls/peers/animals (humping)

Adolescent – Normal:

* Explicit conversation with peers
* Obscenities/jokes within cultural norm
* Innuendo/flirting
* Erotic interest/masturbation
* Courtship/hugging/flirting/kissing/holding hands
* Foreplay
* Solitary/mutual masturbation
* Monogamist intercourse

Adolescent – Yellow Flag:

* Preoccupation/anxiety
* Pornographic interest
* Indiscriminant sexual contact with more than one partner during the same period of time
* Sexually aggressive themes/obscenities
* Violating body space
* Single occurrences of peeping/exposing
* Mooning/other sexual gestures

Adolescent – Red Flag:

* Compulsive masturbation
* Degradation/humiliation of self/others
* Attempting to expose others
* Sexually aggressive pornography
* Conversation/contact with younger students
* Grabbing other sexual gestures (repeated)
* Explicit threats

Several questions should be asked by parents, caretakers and/or professionals in order to determine if the behaviors are appropriate (while possibly still feeling awkward for the adult) or inappropriate and need to be reported to an administrator or law enforcement immediately. Please keep in mind that these questions and answers are not black and white; however, they are here to serve as a guide to help the adult best analyze and plan next steps.

If you can answer “NO” to several of these questions, then the behaviors are not considered a high priority problem. However, you may want to still have a conversation with the student, parent, caretaker and/or administrator – whomever you feel needs to be involved to discuss alternatives to these behaviors, especially in the school setting.

* Is the behavior putting the child at risk for physical harm? Disease? Exploitation?
* Is the behavior interfering with the child’s development, learning, social or family relationships?
* Is the behavior violating a rule?
* Is the behavior causing the child to feel confused, embarrassed or bad about him or herself?
* Is the behavior causing others to feel uncomfortable?
* Is the behavior abusive because it involves a lack of consent, a lack of equality or some type of coercion?

Sexual behaviors can be a problem for the child and/or for others in the following instances…

When is sexual behavior a problem *for the child?*

* When the behavior is placing the child at risk of harm or is causing harm to their body (inserting objects into private areas)
* When the behavior is interfering with the rest of their development (difficulty concentrating in class because of sexual preoccupation)
* When the behavior interferes with social or familial relationships (choosing to spend long periods of time alone to pursue sexual interests and misses out on other social activities)
* When the behavior violates a family and/or community rules
* If the child believes the behaviors are problematic

When is sexual behavior a problem *for others?*

* Behaviors may cause others to feel uncomfortable (sexual overtures, sexual innuendo, seductive behaviors)
* Sexual behaviors may occur in the wrong place or time (masturbation in the classroom)
* Sexual behaviors may be in conflict with the beleifs, values, sensibilities or rules of a family, other adults or peers

When is sexual behavior *abusive?*

* Lack of consent
	+ Knowing what behavior is being proposed
	+ Knowing the possible consequences of the behavior
	+ Knowing the standard for the behavior (what is expected in the family, community)
	+ Freedom to choose without repercussions
* Lack of equality
	+ Balance of power or authority in the relationship; implies that two participants are operating with the same level of power
* Coercion
	+ Interaction is not consensual; secrecy, manipulation, trickery, peer pressure, threats, bribes, physical force, weapons

Common/Potential Motivators for Sexual Behavior:

* Survival and protection
* Feel safe, secure and in control
* Anxiety and tension reduction
* Sign of Post-Traumatic Stress Disorder (PTSD)
* Reduce confusion
* Indirect ways to express feelings of anger and resentment
* Make sense/master previous sexual victimization
* Decrease isolation
* Decrease loneliness/neediness
* Sense of connection, getting close to others
* Distancing, pushing people away

What to Do: Depending on the age of the student and the level of the behavior, the following is a list of interventions to help guide a conversation and prevent further incidents

* Minimal reaction: if the behavior is clearly within the range of normal behaviors and is isolated or infrequent and does not involve other students
	+ Reinforce appropriate peers with positive statements
	+ Redirect group
	+ Engage in competing behavior
	+ Redirect individual
	+ Directional prompts
* Label and Educate: if the behavior is within the normal range, but involves other students or is thought to be due to a lack of understanding on the part of the student
	+ Label: “the bus driver told me that you were touching each other’s private parts when you were on the bus. It is not ok to touch another student’s private parts, even if they have their pants on.”
	+ Educate: “if you have questions about your body, you can ask me or your parents or you can look at your body when you are alone at home.”
* Confront and Prohibit: if the behavior is outside of the normal range, is nonconsensual or manipulative or is intended by the student to be kept secret
	+ Confront: “you need to stop pushing and rubbing against other children. As soon as you finish using the bathroom, you should wash your hands and come to the line.”
* Monitor: if the behavior is one that you have reacted to by labeling, educating or prohibiting
	+ Document occurrences of same and/or similar behavior; note date, time, location, others involved
* Refer and/or Report: if the behavior may be outside of the range of normal; is chronic or dangerous; consult with staff to determine the appropriate intervention
	+ Talk to administrators, legal professionals, school district liaisons, mental health professionals, etc. to determine next steps
* Advocate: if the behavior is one that has victimized another student(s), provide support to the victim; can also include whole class interventions

Body Safety Rules: are good to create with all students to set boundaries and expectations in a preventative manner. However, it is especially important to have parents and/or school professionals have these conversations with students after an incident has occurred or allegedly occurred.

* No one is allowed to touch your private parts, expect to help you clean them or if the doctor or nurse needs to examine them (includes siblings)
* You are not allowed to touch someone else’s private body parts
* It is ok to touch your own private body parts as long as you do it in private
* No one (adult or teenager) is allowed to take pictures of your private body parts or show you pictures of naked people
* When playing with friends, keep your clothes on
* You and all of your family members are allowed to have privacy when bathing, dressing and using the toilet
* No one is allowed to make your kiss or touch him or her if you don’t want to. No one is allowed to kiss or touch you if you don’t want him or her to, including relatives. You are allowed to choose whom you kiss and touch and when you kiss and touch people.
* You have permission to say “no” and get away if anyone tries to touch your private body parts or tries to break any of your body safety rules. You never have to do what an adult or anyone tells you to do if the person is breaking a body safety rule or is making you unsafe.
* If someone tries to or does touch your private body parts, try to get away and then go tell an adult you trust.
* If someone tells you to keep a secret about touching private body parts, tell an adult.

Resources…

Websites 🡪

ChildTrauma Academy (CTA): **The ChildTrauma Academy (CTA) is a not-for-profit organization based in Houston, Texas working to improve the lives of high-risk children through direct service, research and education.** The Child Trauma Academy (CTA) engages in Clinical Services, Clinical Research, Program Development and Systems Consultation. Understanding children and the impact of experiences, positive and negative, on the child, family and community have been at the heart of our work for many years. Our research, clinical experiences, training activities and program development have helped influence the direction of research on neurodevelopment, trauma and maltreatment; clinical practices and programs and, indirectly, public policy and practices.

Contact Information:

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| 5161 San Felipe, Suite 320Houston, Texas 77056  |

Phone: 866.943.9779

Fax: 713.513.5465

Email: ChildTrauma@ChildTraumaAcademy.org

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Website: [www.childtrauma.org](http://www.childtrauma.org)

National Children’s Alliance: provides [training, support, technical assistance and leadership](http://www.nationalchildrensalliance.org/index.php?s=19) on a national level to local children’s and child advocacy centers and communities responding to reports of child abuse and neglect. National Children's Alliance strongly believes that the combined professional wisdom and skill of the [multidisciplinary team approach](http://www.nationalchildrensalliance.org/index.php?s=34) results in a more complete understanding of case issues and the most effective child- and family-focused system response possible.

Contact Information:

516 C Street, NE
Washington, DC 20002

Phone: (202) 548-0090 or (800) 239-9950
FAX: (202) 548-0099

Website: www.nationalchildrensalliance.org

Local Agencies 🡪

Denver Children’s Advocacy Center: provides a continuum of care for traumatized children and their families. Several types of services are provided:

* Bilingual and bicultural services in English and Spanish
* Services for traumatized children and their non-offending family members at no cost
* Assessment and treatment services for children ages 1 – 17
* Specialized assessment and treatment services for very young children ages 1 – 6
* Child-friendly forensic interviews and evaluations
* Open Saturdays 9:00am – 3:00pm
* Affordable trainings for parents and profesisonals
* Prevention programs and support services for at-risk children and families
* Contact information:
	+ 2149 Federal Blvd
	Denver, CO 80211
	Phone: 303-825-3850
	Toll Free: 1-800-644-3850

Fax: 303-825-6087

Email: **info@denvercac.org**

Website: [www.denvercac.org](http://www.denvercac.org)

Denver Children’s Home: cares for Colorado’s abused and neglected children.

* Provides effective, but least restrictive treatment based on the individual needs of each child
* Progresses children through several levels of care to return home or to an alternative community based setting
* Offers a positive alternative to hospitalization, combining intensive therapy, individualized academic support and advanced drug treatments
* Helps students take ownership of their treatment; understand their reactions and responses to life events, accept responsibility for their actions, control their behavior and develop coping mechanisms
* Contact information:
	+ 1501 Albion Street
	Denver, Colorado 80220
	Phone: 303-399-4890; 877-895-4890
	Fax: 303-399-9846
	Email: info@denverchildrenshome.org

Website: [www.denverchildrenshome.org](http://www.denverchildrenshome.org)

Books For Kids 🡪

Brown, L.K. (2000). *What’s the big secret? Talking about sex with boys and girls.* Lake: United States of America.

 How can you tell a boy from a girl? What are the proper terms for genitalia? How do you make a baby? Where does a belly button come from? The Browns answer these and similar questions in an honest, but superficial way that will satisfy some youngsters, but leave others with many questions unanswered. Overly detailed for younger children and too incomplete for those nearing puberty, this information will be most useful as a bridge between books meant for preschoolers describing birth and those that tackle the process of maturation, sexuality, and the responsibilities and choices that come with growing up.

Harris, R. (2011). *Who has what? All about girls bodies and boys bodies.* Candlewick: MA.

Launching the series is WHO HAS WHAT?, a simple story following Nellie and Gus on a family outing to the beach. Humorous illustrations, conversations between the siblings, and a clear text all reassure young kids that whether they have a girl's body or a boy's, their bodies are perfectly normal, healthy, and wonderful.

\*\*(This author has several other books about similar topics)

King, K. (2008).  *I said no! A kid to kid guide to keeping your private parts private.* Boulden: CA.

 Helping kids set healthy boundaries for their private parts can be a daunting and awkward task for parents, counselors and educators. Written from a kid s point of view, I Said No! makes this task a lot easier. To help Zack cope with a real-life experience he had with a friend, he and his mom wrote a book to help prepare other kids to deal with a range of problematic situations. I Said No! uses kid-friendly language and illustrations to help parents and concerned adults give kids guidance they can understand, practice and use. Using a simple, direct, decidedly non-icky approach that doesn't dumb down the issues involved, as well as an easy-to-use system to help kids rehearse and remember appropriate responses to help keep them safe.

Saltz, G. (2008). *Amazing you! Getting smart about your private parts.* Penguin Group: NY.

 Picture book designed especially for young children who are becoming aware of their bodies, but aren’t ready to learn about sexual intercourse. Written with warmth and honesty, *Amazing You!* presents clear and age-appropriate information about reproduction, birth, and the difference between girls’ and boys’ bodies.

Books For Teens 🡪

American Medical Association. (2006). *American Medical Association’s boys guide to becoming a teen*. Jossey-Boss: CA.

 Becoming a teen is an important milestone in every boy’s life. It’s even more important to get answers and advice to the most common health issues boys face from a trusted source. The *American Medical Association Boy’s Guide to Becoming a Teen* is filled with invaluable advice to get you ready for the changes you will experience during puberty. Learn about these important topics and more:

* Puberty and what kinds of physical and emotional changes you can expect—from your developing body to your feelings about girls
* The importance of eating the right foods and taking care of your body
* Pimples, acne, and how to properly care for your skin
* Your reproductive system—inside and out
* Thinking about relationships and dealing with new feelings

American Medical Association (2006). *American Medical Association’s girls guide to becoming a teen.* Jossey-Boss: CA.

 Becoming a teen is an important milestone in every girl’s life. It’s even more important to get answers and advice to the most common health issues girls face from a trusted source. The *American Medical Association Girl’s Guide to Becoming a Teen* is filled with invaluable advice to get you ready for the changes you will experience during puberty. Learn about these important topics and more:

* Puberty and what kinds of physical and emotional changes you can expect—from your developing body to your feelings about boys
* The importance of eating the right foods and taking care of your body
* Your reproductive system inside and out
* Starting your period—what it means and how to handle it
* Thinking about relationships and dealing with new feelings

Bailey, J. & McCafferty, J. (2004). *Sex, puberty and all that stuff: A guide to growing up.* Barron’s Educational Series: United States of America.

 This friendly book talks to teens in their own language, with emphasis on the subject that is foremost in the minds of just about every adolescent boy and girl: Sex. Separate chapters titled *Boy Stuff and Girl Stuff describe body changes that occur during puberty, with frank and open* explanations of male and female genitals, how they feel and how they function. Chapters that follow discuss typical teen problems, as well as those entirely new feelings that come with sexual development. Among them are, having a crush on that attractive boy or girl, coping with controlling parents, menstruation, dating and sexual activity, contraception, pregnancy, sexually transmitted infections, homosexual impulses, and generally surviving those difficult yet exciting teen years. Line drawings on most pages.

Gravelle, K., Castro, N., Castro, C., & Leighton, R. (1998). *What’s going on down there?* *Answers to questions boys find hard to ask.* Walker Childrens: United States of America.

 Why is my voice making such weird sounds? When will I be able to start shaving? Why do I keep getting pimples? What is a wet dream? Your body has been behaving very strangely lately. You hardly know what to expect from one day to the next. Karen Gravelle, with some help from her two young advisors, Nick and Chava Castro, has written a down-to-earth and practical book that will help guide you through this confusing time in your life. *What's Going On Down There?* answers any questions you might have about puberty, from what it is and what it feels like, to what puberty is like for girls, to how to handle the sexual feelings you may be starting to experience. Robert Leighton's funny and informative cartoons ease the confusion and exasperation you might feel. Part manual, part older brother, *What's Going On Down There?* will give you the facts you need to feel comfortable and confident about this new phase of your life.

Loulan, J. & Worthen, B. (2001). *Period: A girls guide.* Publisher’s Group West: Hong Kong.

 The start of hormonal changes can be troubling, even traumatic, for young girls. Now fully revised and updated with a parents' guide, Period explains in a straightforward manner the changes all girls go through, answers common questions, and includes a brief description of a pelvic exam.

Madaras, M. & Madaras, A. (2007). *My body my self, for boys.* 3rd Ed. NewMarket Press: United Sates of America.

 *"My Body, My Self" for Boys* is filled with activities, checklists, illustrations, and plenty of room for journal jottings, plus lots of personal stories in which boys share their concerns and experiences about growing up. For ages 10 and up.

*\*\*Most of this information was taken from three sources:*

Denver Children’s Advocacy Center (2010). *Childhood Sexuality.* Training attended by School Psychologist in May 2010.

Kempe National Center. (Date Unknown). *Understanding and Responding to the Sexual Behavior of Children.* (Presentation).Received by school psychologist at a DPS training in February, 2010.

Parenting Safety Children. (Date Unknown). *Body Safety Rules.* Sent by parent to school psychologist.