

Western Kansas Child Advocacy Center

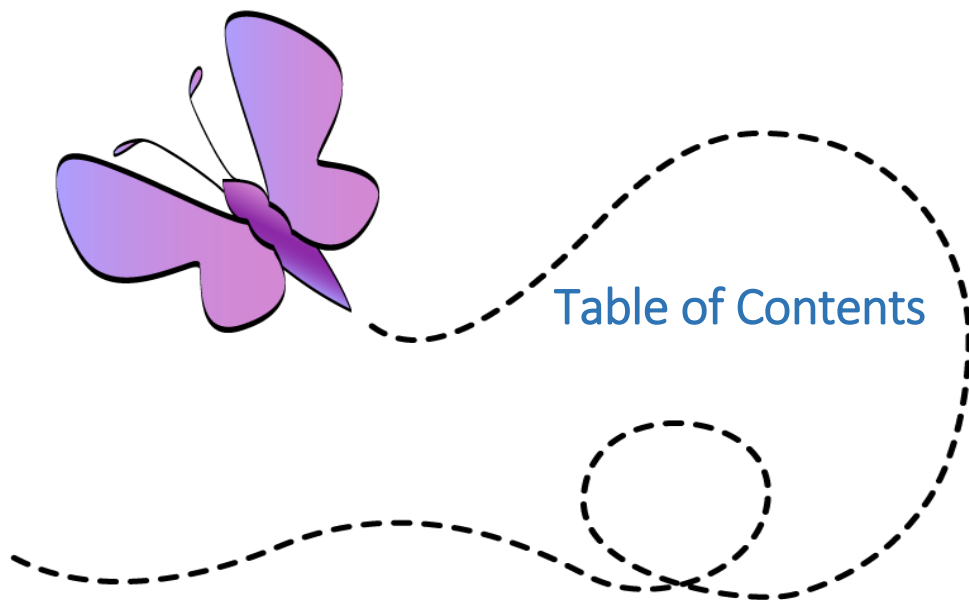
**The Mission
of the
Western
Kansas Child
Advocacy
Center is to
help children
and adults
heal from
abuse
through
prevention,
support, and
services.**



Email: Wkcac@wkcac.com

Office Number: 620-872-3706

Website: Wkcac.com



Kansas Crime Victims' Bill of Rights	3
Branches of Healing	6
Stats & Facts	12
Healthy Sexual Development	19
Myths about Male Sexual Abuse	22
Power of the Wheels.....	25
Tips & Resources.....	30
Resources on the Internet.....	39
Internet Safety Quiz For Adults	40
Suggested Reading for Children	51
Parent Handbook	54

KANSAS CRIME VICTIMS' BILL OF RIGHTS

Pursuant to K.S.A. 74-7333, a crime victim has the following rights in Kansas:

- (1) Victims should be treated with courtesy, compassion and with respect for their dignity and privacy and should suffer the minimum of necessary inconvenience from their involvement with the criminal justice system.
- (2) Victims should receive, through formal and informal procedures, prompt and fair redress for the harm which they suffered.
- (3) Information regarding the availability of criminal restitution, recovery of damages in a civil cause of action, the crime victims' compensation fund and other remedies and the mechanisms to obtain such remedies should be made available to victims.
- (4) Information should be made available to victims about their participation in criminal proceedings and the scheduling, progress and ultimate disposition of the proceedings.
- (5) The views and concerns of victims should be ascertained and the appropriate assistance provided throughout the criminal process.
- (6) When the personal interests of victims are affected, the views or concerns of the victim should, when appropriate and consistent with criminal law and procedure, be brought to the attention of the court.
- (7) Measures may be taken when necessary to provide for the safety of victims and their

families and to protect them from intimidation and retaliation.

- (8) Enhanced training should be made available to sensitize criminal justice personnel to the needs and concerns of victims and guidelines should be developed for this purpose.
- (9) Victims should be informed of the availability of health and social services and other relevant assistance that they might continue to receive the necessary medical, psychological, and social assistance through existing programs and services.
- (10) Victims should report the crime and cooperate with law enforcement authorities.

Western Kansas Child Advocacy Center (WKCAC)

The WKCAC does not discriminate on the basis of race, color, national origin, ethnicity, culture, religion, gender, disability, sexual orientation, age or any other legally protected basis in its programs, activities, services or hiring practices. Furthermore, the WKCAC supports the on-going development, implementation and evaluation of culturally competent policies and practices in the professional response to child abuse.

WKCAC strives to be culturally competent by responding respectfully and effectively to people of all cultures, races, classes, ethnic backgrounds, sexual orientations, disabilities, and faiths and religions. WKCAC aims to value, recognize, and affirm the worth of individuals, families, tribes, and communities, and to protect and preserve the dignity of each.

The WKCAC staff, volunteers, Board members and multidisciplinary team members shall not discriminate against clients or community members based on any attribute or belief and shall make every attempt to become educated and knowledgeable about the members of the communities we serve.

WKCAC services will be accessible to members of all socio-economic statuses. Staff shall ensure that WKCAC facilities are comfortable for those of any faith and accessible for those with varied physical abilities.

The following person has been designated to handle inquiries regarding the non-discrimination/harassment policies: David Fyler 620-874-8555. WKCAC receives grant funding from the Kansas Governor's Grant Program. They may also be contacted if you have concerns regarding any of the above statements.

Branches of Healing



MENTAL HEALTH SERVICES AVAILABLE

INS = Insurance accepted **MC** = Medical Card accepted

CVC = Crime Victim Compensation accepted.

*Western Kansas Child Advocacy
Center*

**INS, CVC, MC-Western
Kansas Child Advocacy
Center**

Kelly Robbins	620-874-2272
David Fyler	620-874-8555
Kelli Steele	620-214-4851
Amanda Brown	620-295-0710
Laurie Barber	620-295-0858
Don Eves	620-260-5333
www.wkcac.com	



Northcentral Kansas

Hays

**INS, MC, CVC-High Plains
Mental Health Services**

785-628-2871

www.highplainsmentalhealth.com

Michelle Fairbank MS, LPC

785-628-3575

Liz Pilster, LCPC

785-294-6677

www.resiliencementalhealth.com

Osborne

**INS, MC, CVC-High Plains
Mental Health Services**

www.highplainsmentalhealth.com

785-346-2184

Phillipsburg

**INS, MC, CVC -High Plains
Mental Health Services**

785-543-5284

www.highplainsmentalhealth.com



Northwest Kansas

Norton

INS, MC, CVC-High Plains
Mental Health Services
785-877-5141
www.highplainsmentalhealth.com

Colby

INS, MC, CVC-High
Plains Mental Health
785-462-6774
INS, MC, CVC Heartland
Rural Counseling
Services-Elaine Ptacek
785-460-7588

Goodland

INS, MC, CVC-High
Plains Mental Health
785-899-5991
INS, MC, CVC
Heartland Rural
Counseling Services-
Elaine Ptacek
785-460-7588

Quinter

INS, CVC-Turning
Point-Jamie
Kinderknecht
866-463-2679

Southwest Kansas

Garden City

INS, MC, CVC-Compass
Behavioral Health Center

620-276-7689

INS, CVC-Christian
Counseling Associates

Bernard Ashlock 620-276-
1500

TF 877-206-2673

Scott City

INS, MC, CVC-
Compass Behavioral
Health Center

620-872-5338

www.compassbh.org/

Ulysses

INS-Southwest Psychiatric
Clinic Dr. Sue Dowd 620-
424-4554

INS, CVC, MC-Compass
Behavioral Health Center
620-356-3198



Southwest Kansas

Hugoton

INS, MC, CVC-Southwest Guidance
Center 620-624-8171

TF 866-624-8171
www.swguidance.org
Nicole Crites, LMFT
620-544-4357
swksmft@gmail.com

Liberal

INS, MC, CVC –
Southwest Guidance Center

620-624-8171

TF 866-624-8171

www.swguidance.org

INS- Southwest Psychiatric
Clinic Dr. Sue Dowd 620-

624-2900

INS, CVC MC

Johnson

INS, MC, CVC-

Southwest

Psychiatric

Clinic-Dr. Sue

Dowd 620-492-

4250

Sublette

INS, MC, CVC -
Southwest
Guidance
Center

620-624-8171

TF 866-624-
8171

Stats & Facts



*Life is 10% what happens to you and 90% how you
react to it*

-Charles R Swindoll



Western Kansas Child Advocacy Center Statistics 2016

- The WKCAC has interviewed approximately 3,000 children since its inception in 2004
- 373 interviews in 2016; approximately 1.5 Interviews per working day of the year
- The five Mobile Units, two Mobile CACs & 3 Mobile Therapy Units, have traveled over 40,000 miles;
- 88% of the cases were for sexual abuse; 8% for physical abuse; 3% for emotional abuse and 1% were interviewed for other types of abuse.
- 66% of the children interviewed were female - 34% were male.
- The highest age category of children interviewed was 7-12 years old (41%).

<u>Ages</u>	<u>Race/Ethnicity</u>
2-6 years = 23%	76% were Caucasian
7-12 years = 41%	22% were Hispanic/Latino
13-17 years = 35%	2% were African American
18+ years = 2%	26 were referred for Sane/Medical Exams

- Perpetrator Info: 98% Known by child; 38% Related to the child

<u>Age</u>	<u>Race/Ethnicity</u>
4-12 years = 19%	81% were Caucasian
13-17 years = 19%	18% were Hispanic/Latino
18-29 years = 21%	1% were Other
30-59 years = 40%	
60+ years = 1%	

- 42 counties in Kansas and 5 counties out of state and the US Army along with the KBI have utilized the WKCAC for forensic interviews. 32 counties have signed interagency agreements with the WKCAC to provide services in their counties.

The Statistics are SHOCKING

- Experts estimate that **1 in 4 girls** and **1 in 6 boys** are sexually abused before their 18th birthdays. This means that in any classroom or neighborhood full of children, there are children who are silently bearing the burden of sexual abuse.
- **1 in 5** children are sexually solicited while on the Internet.
- Nearly **70%** of all reported sexual assaults (including assaults on adults) occur to children ages 17 and under.

Sexual abuse can occur at all ages, probably younger than you think

- The median age for reported sexual abuse is **9 years old**.
- Approximately **20%** of the victims of sexual abuse are **under age eight**.
- **50%** of all victims of forcible sodomy, sexual assault with an object, and forcible fondling are **under age twelve**.

Understand Why Children Are Afraid to Tell

- MOST CHILD VICTIMS NEVER REPORT THE ABUSE.
- Sexually abused children who keep it a secret or who "tell" and are not believed are at greater risk than the general population for psychological, emotional, social, and physical problems, often lasting into adulthood. **It is also likely** that you know an abuser. The greatest risk to children doesn't come from strangers but from friends and family.
- The abuser shames the child, points out that the child let it happen, or tells the child that his or her parents will be angry.
- The abuser is often manipulative and may try to confuse the child about what is right and wrong.
- The abuser sometimes threatens the child or a family member.
- Some children who do not initially disclose abuse are ashamed to tell when it happens again.
- Children are afraid of disappointing their parents and disrupting the family.
- Some children are too young to understand.
- Many abusers tell children the abuse is "okay" or a "game."

Even within the walls of their own homes, children are at risk

- **30-40%** of children are abused by family members.
- As many as **60%** are abused by people the family trusts- abusers frequently try to form a trusting relationship with parents.
- Nearly **40%** are abused by older or larger children.
- People who abuse children look and act just like everyone else. In fact, they often go out of their way to appear trustworthy to gain access to children.
- Those who sexually abuse children are drawn to settings where they can gain easy access to children, such as sports leagues, faith centers, clubs, and schools.

CONSEQUENCES to children and to our society begin immediately

- 70-80% of sexual abuse survivors report excessive drug and alcohol use.
- One study showed that among male survivors, 50% have suicidal thoughts and more than 20% attempt suicide.
- Young girls who are sexually abused are more likely to develop eating disorders as adolescents.
- More than 60% of teen first pregnancies are preceded by experiences of molestation, rape or attempted rape. The average age of the offenders is 27 years old.
- Approximately 40% of sex offenders report sexual abuse as children.
- Both males and females who have been sexually abused are more likely to engage in prostitution.
- Approximately 70% of sexual offenders of children have between 1 and 9 victims; 20-25% have 10 to 40 victims.
- Serial child molesters may have as many as 400 victims in their lifetimes.

CHILD SEXUAL ABUSE BY THE NUMBERS

17million

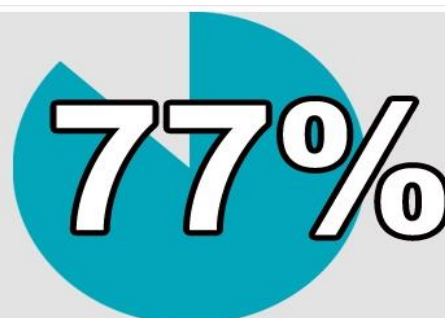
children will be
sexually abused
over the next **18** years



of child molesters
were sexually
abused as children

42million

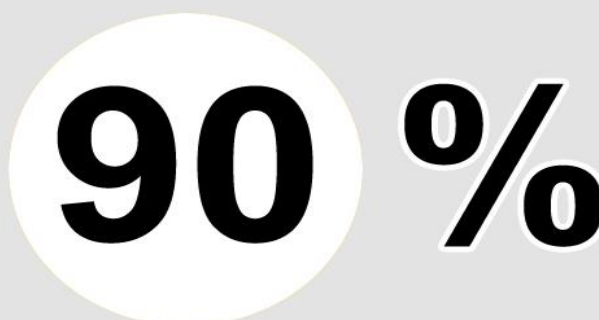
Number of sexual
abuse survivors in
the U.S. today



of child molesters
are married

93%

of child molesters
consider
themselves religious



of children
know their abuser

400,000

Number of convicted pedophiles living in the U.S.



Only 1 in 10 children
will tell someone
they were molested

80%
*of sexual abuse
survivors have
drug/alcohol problems*

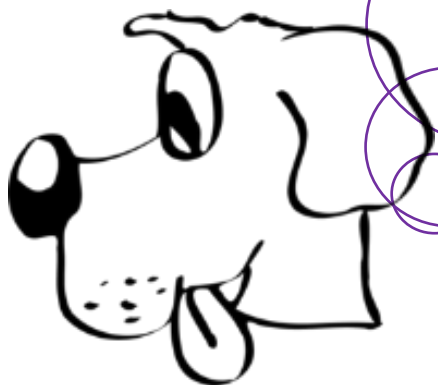


20%
*of male sexual abuse
survivors will
attempt suicide*

\$20 billion
Estimated annual mental health
care cost of child sexual abuse in the U.S.

Facts about Sexual Abuse

- ✚ It has been found that the majority of sexual abuse cases are perpetrated by people extremely familiar to the victim
- ✚ Each child will react differently and uniquely to a traumatic situation depending on the situation depending on factors such as family support, getting professional therapeutic help, past traumatic history
- ✚ It has been estimated that only between 20 and 50 percent of abuse cases are reported. Lack of reporting is often due to fear, guilt, embarrassment, suppression and lack of information
- ✚ The majority of offenders are physically nondescript and appear to be quiet normal in most areas of functioning.
- ✚ Children rarely fantasize about being abused in any way. It is also extremely rare that children ever lie about sexual abuse.
- ✚ About 5% of sexual abuse of girls and 20% of sexual abuse of boys are perpetrated by older females. Victims are most likely to report assaults by males
- ✚ Repressing the negative experience poses serious emotional problems, at the time of the abuse and over the years. Victims need to work through the trauma experienced with trauma focused therapy



Healthy Sexual Development from Birth to Age 18

Birth to 2

- learn about love and trust through relationships with their parents and caregivers
- explore their bodies, including the genitals
- have erections or lubricate vaginally
- experience genital pleasure
- start to notice differences between the bodies of boys and girls and children and adults
- begin to learn expected behavior

Ages 3 to 5

- become very curious about their bodies and the differences between girls and boys
- play house, doctor or other body exploration activities
- learn they are female or male
- learn female and male roles by observing others
- enjoy learning about and talking about body parts and functions
- find adult bathroom activities very interesting
- ask questions about pregnancy and birth
- learn words related to sex and attempt to use them in conversations
- mimic adult sexual behavior
- begin to masturbate

Ages 6 to 8

- develop strong friendships with children of the same sex
- react to stories they hear in the media (AIDS, abuse, violence)
- increase their ideas about female and male roles
- have a basic sexual orientation and identity
- desire to be like their peers
- engage in name-calling and teasing
- continue body exploration activities
- begin and/or continue to masturbate



Ages 9 to 12

- onset of puberty
- grow to be more modest and want privacy
- value same sex friendships
- experience increased sexual feelings and fantasies
- develop romantic feelings toward the same sex and/or the opposite sex
- explore sexual activities with peers
- may masturbate to orgasm
- face decisions about sex

Ages 13 to 18

- continue and complete the changes of puberty
- value independence
- experience increased sexual feelings and want physical closeness with a partner
- continue to face decisions about sex
- chose romantic relationships over close friendships
- may encounter violence in relationships



Range of Sexual Behaviors

Sexual behavior ranges from
Common Sexual Play to Problematic Sexual Behavior.

Sexual Play

- is exploratory and spontaneous
- occurs occasionally and by mutual agreement
- takes place with children of similar ages, sizes or developmental levels
- decreases when children are told the rules, mildly restricted, well supervised and praised for appropriate behavior
- is controlled by increased supervision

Problematic Sexual Behavior

- is a frequent, repeated behavior
- occurs between children who do not know one another well
- occurs with high frequency and interferes with normal childhood activities
- is between children of different ages, sizes and developmental levels
- is aggressive, forced or coerced
- does not decrease after the child is told to stop
- causes harm to the child or others



Myths about Male Sexual Abuse

Myth 1: Boys and men can't be victims

This myth, instilled through masculine gender socialization and sometimes referred to as the "macho image," declares that males, even young boys, are not supposed to be victims or even vulnerable. We learn very early that males should be able to protect themselves. In truth, boys are children – weaker and more vulnerable than adults. This power is exercised from a position of authority, using resources such as money or other bribes, or outright threats – whatever advantage can be taken to use a child for sexual purposes.

Myth 2: Most sexual abuse of boys is perpetrated by homosexual males

Pedophiles who molest boys are not expressing a homosexual orientation any more than pedophiles who molest girls are practicing heterosexual behaviors. While many child molesters have gender and/or age preference, of those who seek out boys, the vast majority are not homosexual. They are

Myth #4 - Boys are less traumatized by the abuse experience than girls

While some studies have found males to be less negatively affected, more studies show that long term effects are quite damaging for either sex. Males may be more damaged by society's refusal or reluctance to accept their victimization, and by their resultant belief that they must "tough it out" in silence.

Myth 6: The Vampire Syndrome that is, boys who are sexually abused, like the victims of count Dracula, go on to "bite" or sexually abuse others

This myth is especially dangerous because it can create a terrible stigma for the child, that he is destined to become an offender. Boys might be treated as potential perpetrators rather than victims who need help. While it is true that most perpetrators have histories of sexual abuse, it is NOT true that most victims go on to become perpetrators. Research by Jane Gilgun, Judith Becker and John Hunter found a primary difference between perpetrators who were sexually abused and sexually abused males who never perpetrated: non-perpetrators told about the abuse, and were believed and supported by significant people in their lives. Again, the majority of victims do not go on to become adolescent or adult perpetrators; and those who do perpetrate in adolescence usually don't

Myth 5: Boys abused by males are or will become homosexual

While there are different theories about how the sexual orientation develops, experts in the human sexuality field do not believe that premature sexual experiences play a significant role in late adolescent or adult sexual orientation. It is unlikely that someone can make another person a homosexual or heterosexual. Sexual orientation is a complex issue and there is no single answer or theory that explains why someone identifies himself as homosexual, heterosexual or bi-sexual. Whether perpetrated by older males or females, boys' or girls' premature sexual experiences are damaging in many ways, including confusion about one's sexual identity and orientation. Many boys who have been abused by males erroneously believe that something about them sexually attracts males, and that this may mean they are homosexual or effeminate. Again, not true. Pedophiles who are attracted to boys will admit that the lack of body hair and adult sexual features turns them on. The pedophile's inability to develop and maintain a healthy adult sexual relationship is the

Myth 3: If a boy experiences sexual arousal or orgasm from abuse, this means he was willing participant or enjoyed it

In reality, males can respond physically to stimulation (get an erection) even in traumatic or painful sexual situations. Therapists who work with sexual offenders know that one way a perpetrator can maintain secrecy is to label the child's sexual response as an indication of his willingness to participate. "You liked it, you wanted it," they'll say. Many survivors feel guilt and shame because they experienced physical arousal while being abused. Physical (and visual or auditory) stimulation is likely to happen in a sexual situation. It does not mean that the child wanted the experience or understood what it meant at the time.

Myth 7: If the perpetrator is female, the boy or adolescent should consider himself fortunate to have been initiated into heterosexual activity

In reality, premature or coerced sex, whether by a mother, aunt, older sister, baby-sitter or other female in a position of power over a boy, causes confusion at best, and rage, depression or other problems in more negative circumstances. To be used as a sexual object by a more powerful person, male or female, is always abusive and often damaging. Believing these myths is dangerous and damaging. So long as society believes these myths, and teaches them to children from their earliest years, sexually abused males will be unlikely to get the recognition and help they need. So long as society believes these myths, sexually abused males will be more likely join the minority of survivors who perpetuate this suffering by abusing others. So long as boys or men who have been sexually abused believe these myths, they will feel ashamed and angry. And so long as sexually abused males believe these myths they reinforce the power of another devastating myth that all abused children struggle with: that it was their fault. It is never the fault of the child in a sexual situation - though perpetrators can be quite skilled at getting their victims to believe these myths and take on responsibility that is always and only their own. For any male who has been sexually abused, becoming free of these myths is an essential part of the recovery process.

Resources specifically for Male Survivors of Sexual Assault

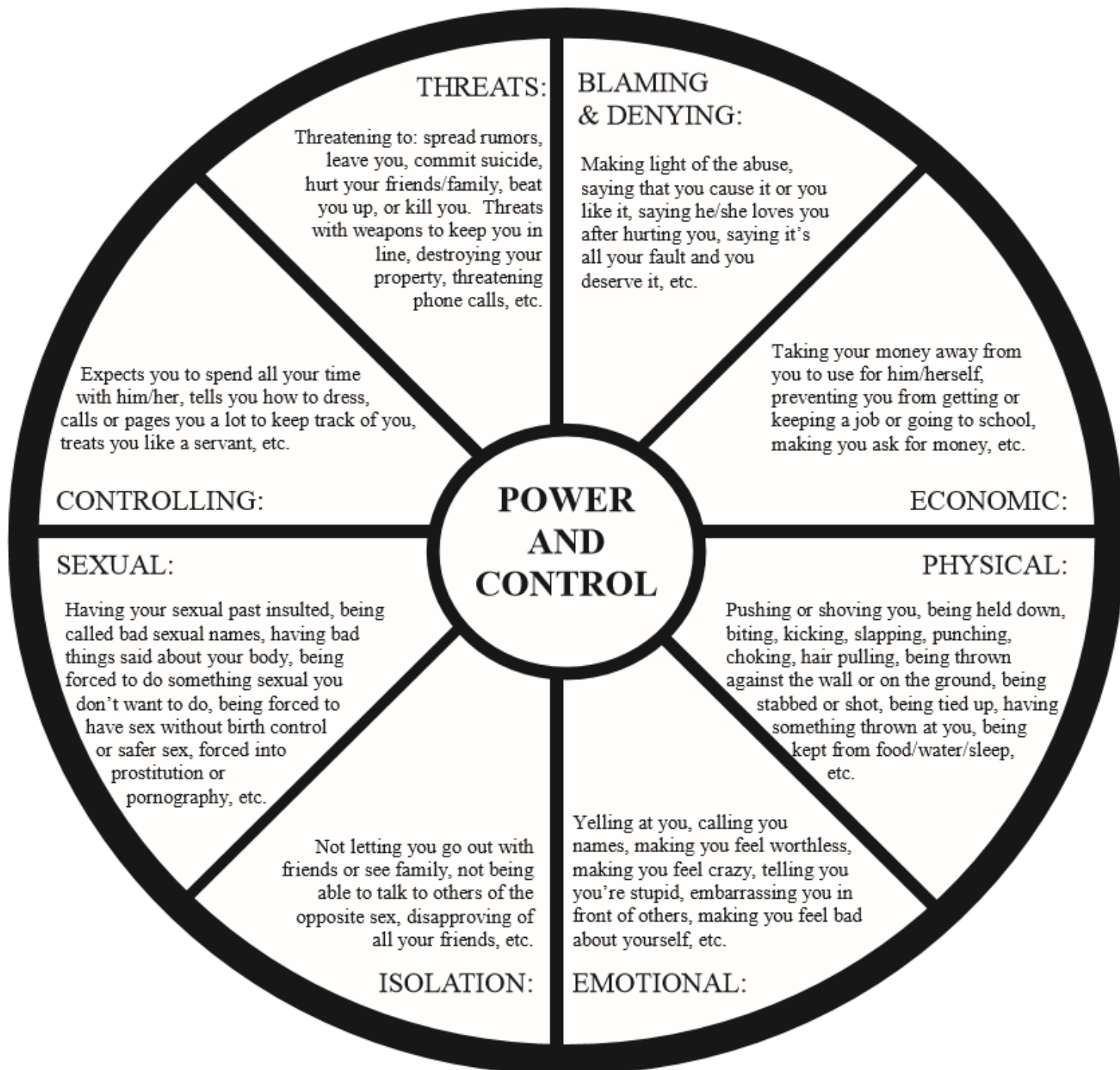
- **www.aardvarc.org/rape/about/men.shtml** An Abuse, Rape and Domestic Violence Aid and Resource Collection. Gives suggested reading books, article ect.
- **www.MaleSurvivor.org**: online community and information, including chat, message boards, articles and more. HIGHLY RECOMMENDED!
- **www.Men-Stopping-Rape.org**: an organization of men working in to promote education for men about sexual assault.
- **www.MenWeb.org**: Men helping men on a variety of topics, including battered men, and male victims of childhood sexual abuse. Great message boards and support.
- **www.rapecrisiscenter.com/education_articles** articles, fact sheets, date rape drug info.
- **www.richardgartner.com/newlinks.html**
- **www.mencanstoprape.org/index.htm**
- **www.jimhopper.com/male-ab/**
- **www.xris.com/survivor/msa/**

Power of the Wheels

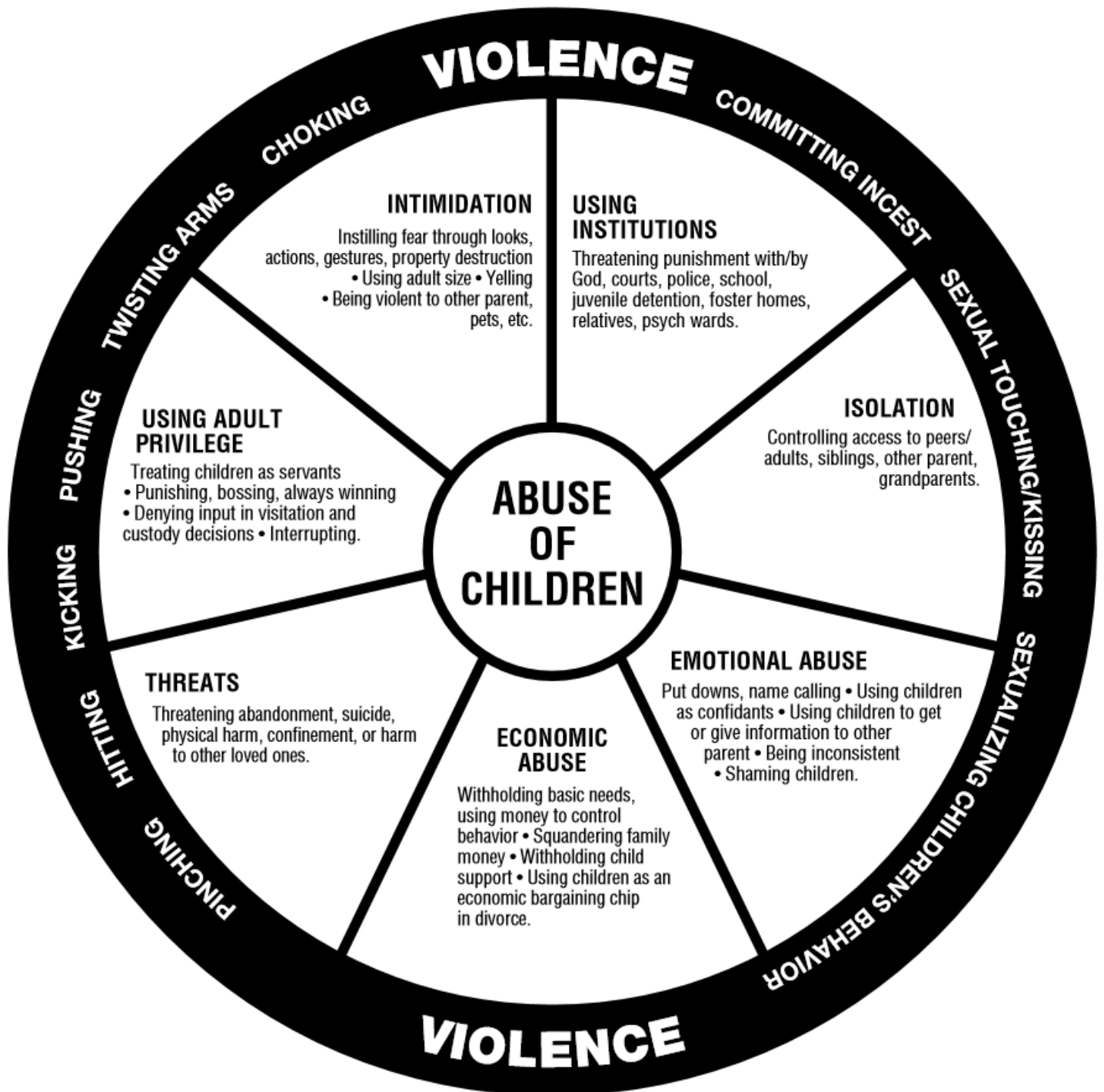
**When the whole world is silent,
even one voice becomes powerful
-Malala Yousafzai**



Power and Control Wheel for Dating Violence



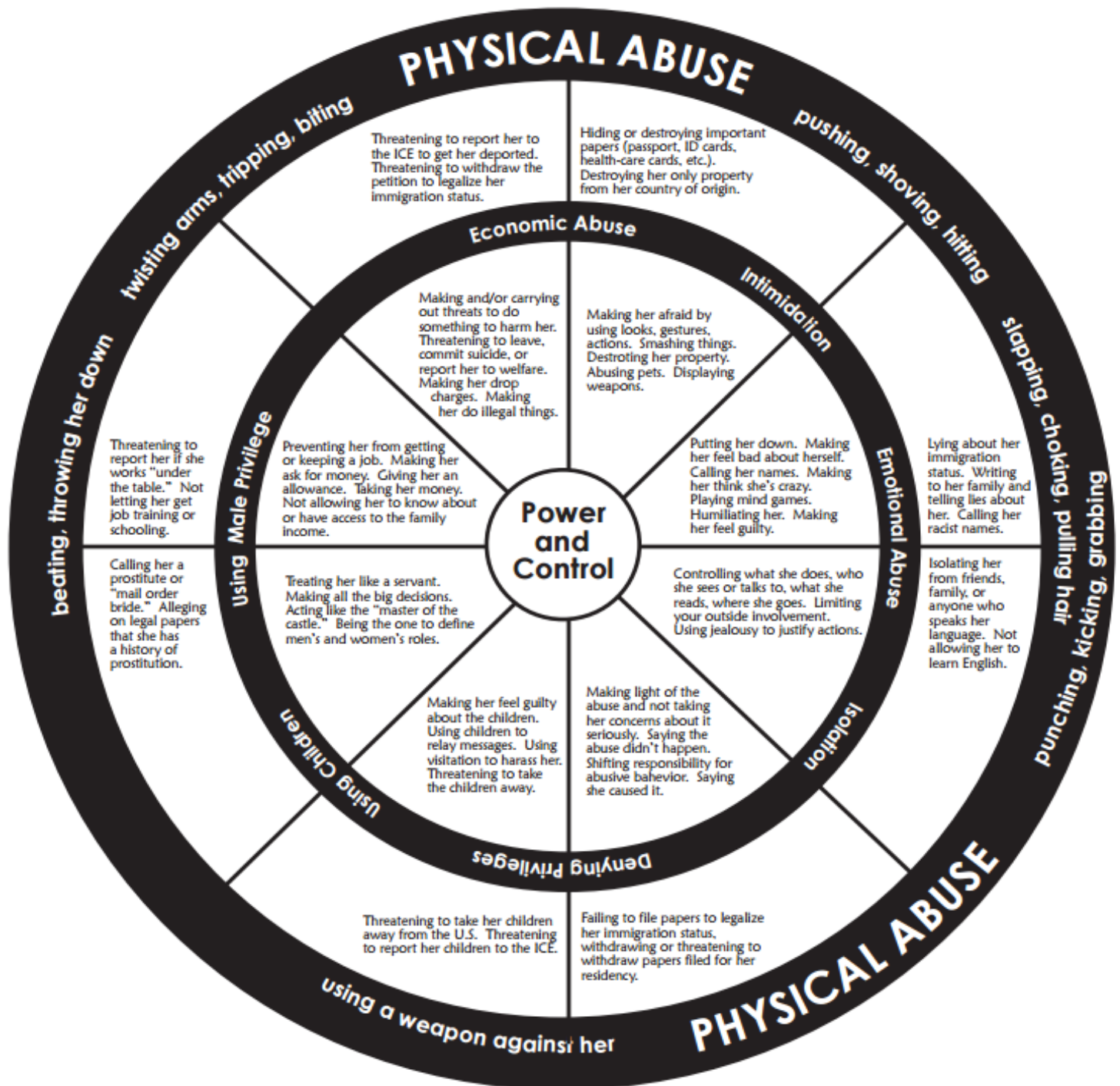
VIOLENCE AGAINST CHILDREN



Nurturing your Children



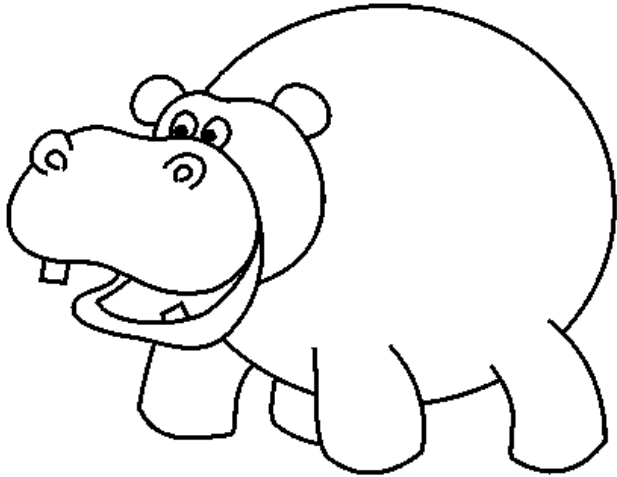
Immigrant Power and Control



Sex Trafficking

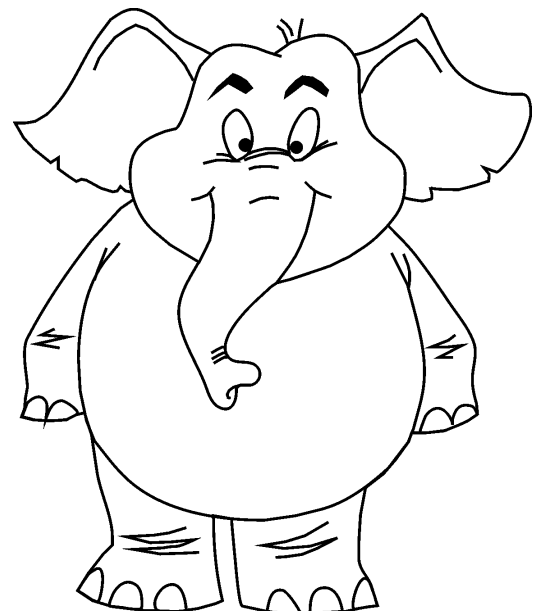
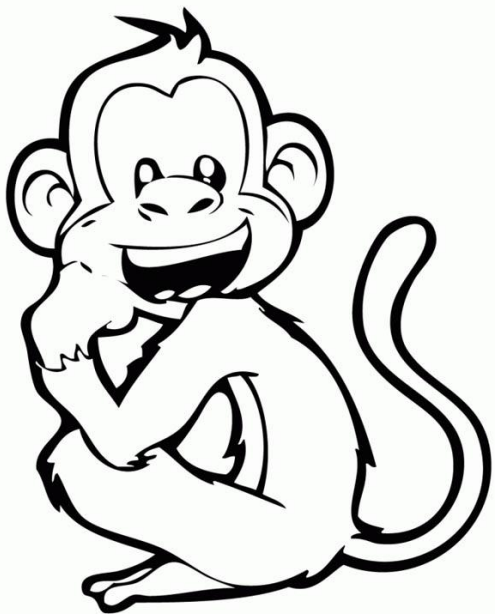


Tips & Resources



“Instead of saying, "I'm damaged, I'm broken, I have trust issues" say "I'm healing, I'm rediscovering myself, I'm starting over.”

— Horacio Jones



TIPS FOR PROTECTING CHILD ATHLETES from Sexual Abuse

Every child athlete deserves a safe and fun sports experience.
Use these tips to help your child have one.

Make a game plan

Ask these questions to find out if preventing child sexual abuse is a priority for your child's youth-sports program.

- Are background checks performed on all staff with access to youth?
- Does staff receive training on recognizing and reporting child sexual abuse? How often?
- Is there a staff code of conduct/ethics? Does it address inappropriate behaviors?
- What is your organization's reporting procedure?

Know the plays

Every youth-sports program should have policies addressing:

Bullying and hazing - There should be a zero-tolerance policy.

Coach-athlete communications - Staff should not communicate with youth about non-sports related matters. Parents should be included in all communications, including those via text message, telephone or social media.

Locker and restrooms - These areas should be supervised by two staff of the same sex as the children using them. Staff should respect children's privacy while supervising them. Parents should have access to the facilities in order to assist young children and those with disabilities.

Supervision - Children should be supervised by at least two staff while at all team activities.

Travel - Staff should not stay in the same hotel rooms as youth.

Get off the bench

Child sex abusers often target youth whose parents appear uninvolved. Help protect your child by being an active participant in his or her athletic experience.

Go to practices and games. You'll be able to get to know the staff and monitor their treatment of children.

Talk to your child about being on the team. If he or she does not like it, find out why. It may indicate a more serious problem or concern.

Help children set boundaries. Teach them they have the right to be treated with respect, even by adults.

Empower youth to say "no." Let them know it's OK to stand up to anyone who makes them feel confused or uncomfortable. Use role-playing scenarios to practice this skill.

Speak up. Address red flag behaviors by speaking with the team's coach. If the issue remains unresolved, discuss your concerns with the organization's administration.

Report. Contact local law enforcement with suspicions of child sexual abuse **immediately**. Call the National Center for Missing & Exploited Children® at 1-800-THE-LOST® (1-800-843-5678) for additional assistance.

Be a team player. Not all children have someone looking out for them. Bring up red flag behaviors even if your child is not the one being affected.

Learn red flag behaviors

While these warning signs do not always indicate abuse, they do cross appropriate athlete-coach boundaries.

-  Singling youth out for special attention or gift giving.
-  Spending one-on-one time with children such as in private practice sessions.
-  Touching children in ways not related to training for the sport.
-  Telling youth sexual or inappropriate jokes and stories.
-  Commenting on children's appearances when not related to the sport.

For more resources visit www.SafeToCompete.org



Warning Signs for Child Sex Trafficking

- Chronic runaway/homeless youth.
- Excess amount of cash in their possession (may be reluctant to explain its source).
- Hotel keys and key cards.
- Lying about age/false ID.
- Inconsistencies when describing and recounting events.
- Unable or unwilling to give local address or information about parent(s)/guardian.
- Presence or fear of another person (often an older male or boyfriend who seems controlling).
- High number of reported sexual partners at a young age.
- Sexually explicit profiles on social networking sites.
- Injuries/signs of physical abuse (that they may be reluctant to explain).
- Inability or fear of social interaction.

- Demeanor exhibiting fear, anxiety, depression, submissiveness, tenseness, nervousness.
- Is not enrolled in school or repeated absence from school.
- Does not consider self a victim.
- Loyalty to positive feelings toward pimp/trafficker.
- May try to protect pimp/trafficker from authorities.
- Prepaid cell phone.

Frequently Asked Questions

Why did this happen to my child?



There is no answer to this question. All children are perfect victims. Some just have the misfortune to cross the path of a molester without any conscience on their part. In most situations, little could have been done to protect your child from abuse.

Why did the offender do this?



In all cases, the perpetrator's needs are more important than the child's. Perpetrators are highly manipulative and often avoid taking responsibility for their actions. Offenders demonstrate poor impulse control, errors in thinking, and projection of blame on everyone and everything including drugs, a 'seductive' child, or having an unaffectionate spouse and craving some physical contact.

Wouldn't it be better if we just forget about the whole thing and let the child go on with their life?



This sounds inviting and easy, but it does not work. If the sexual abuse is not talked about or dealt with in a therapeutic manner, the child experiences a secret and with secrets the child feels at fault or unheard. This secret does not go away with time in fact it grows and gets worse with time. Sexual abuse affects a child's life in many ways so recognizing the abuse and working through the healing journey as a family shows the child you are not ashamed of him or her and they do not have to hold this secret alone.

Why didn't my child fight, runaway or at least tell me right away?



Children are powerless and are taught not to challenge authority. They often do not tell parents for fear that it may hurt the parent. The child may also feel guilty about or responsible for the abuse. Many perpetrators of sexual abuse threaten kids by telling them something bad will happen to the people they love or their pets. Many children have witnessed violence by the perpetrator and feel they will follow through with any threats made.

Will my child need therapy?



Therapy can help a child work through the difficult, confusing and painful feelings in a safe setting. If a child does not want to go to therapy, find out why. If the child still will not attend, tell them you are the adult and know what is best for him or her. With the right therapist, the child will not feel like they are in therapy but simply talking to a friend. With professional help and parental support, children can and do recover.

Will our family ever be the same?



YES, but you as the parent need to make it happen. Begin by maintaining routines and consistency. This allows you and your child to get back to normal. Remember that children do only as well as their parents. By taking care of yourself, you are setting a good example for your child. As the adult it is your job to be the parent and allow the child to be a child. The adult is responsible for making good and healthy choices for the child.

Resources

**CALL
ME!**



Kansas Coalition Against Sexual and Domestic Violence

(785) 232-9784 www.kcsdv.org

Kansas Statewide Hotline

1-888-END-ABUSE (888-363-22873)

KBI - Kansas Offender Registration

(800) 452-6727 www.accesskansas.org/kbi/offender_registry

Kansas Department of Corrections Victim Services

(888) 317-8204 www.dc.state.ks.us

Kansas Attorney General Office

(785) 296-2215 www.ksag.org

Kansas Crime Victim Compensation Board

120 SW 10th Ave., 2nd Floor, Topeka, KS 66612-1597
(785)296-2359

Kansas Child Abuse & Neglect Reporting Hotline

(800) 922-5330

The National Center for Victims of Crime

(202) 467-8700 www.ncvc.org

National Domestic Violence Hotline

800-799-SAFE (800-799-7233)

Rape, Abuse, & Incest National Network

(800) 656-HOPE (800-656-4673) www.rainn.org

National Center for Fathering

(800) 593-DADS (3237) www.fathers.com



Western Kansas Sexual Assault & Domestic Violence Programs

Family Crisis Center – Great Bend	866-792-1885
<i>Services:</i> Domestic Violence & Sexual Assault	620-792-1885
<i>Counties Served:</i> Ness, Rush, Barton, Pawnee, Edwards, Stafford, Kiowa, Pratt, Comanche, Barber	
Liberal Area Rape Crisis and Domestic Violence Services	620-624-8818
<i>Services:</i> Domestic Violence & Sexual Assault	
<i>Counties Served:</i> Morton, Stevens, Seward, Haskell, Meade	
DoVES of Grant County – Ulysses	620-356-2608
<i>Services:</i> Domestic Violence & Sexual Assault	
<i>Counties Served:</i> Stanton, Grant	
Family Crisis Services – Garden City	620-275-5911
<i>Services:</i> Domestic Violence & Sexual Assault	
<i>Counties Served:</i> Greeley, Wichita, Scott, Lane, Hamilton, Kearny, Finney	
Crisis Center of Dodge City	620-225-6510
<i>Services:</i> Domestic Violence & Sexual Assault	
<i>Counties Served:</i> Meade, Gray, Ness, Hodgeman, Ford, Clark	
NW KS Domestic and Sexual Violence Services - Hays	800-794-4624
<i>Services:</i> Domestic Violence & Sexual Assault	785-625-3055
<i>Counties Served:</i> Cheyenne, Rawlins, Decatur, Norton, Phillips, Smith, Sherman, Thomas, Sheridan, Graham, Rooks, Osborne, Wallace, Logan, Gove, Trego, Ellis, Russell	
Options	785-625-4202
<i>Services:</i> Domestic Violence & Sexual Violence	785-460-1982
<i>Counties Served:</i> Ellis, Thomas	



Resources on the Internet

- 🖱 **Net Smartz Kids**
<http://www.netsmartzkids.org/indexFL.htm>
- 🖱 **Kansas Bureau of Investigations** - brochures
http://www.accesskansas.org/kbi/info_brochures.shtml
- 🖱 **National Center for Missing & Exploited Children** – Good reading
http://www.missingkids.com/missingkids/servlet/PageServlet?LanguageCountry=en_US&PageId=713
- 🖱 **Family Violence Prevention Fund** – End Abuse - Good reading
<http://www.endabuse.org>
- 🖱 **Kansas Coalition Against Sexual and Domestic Violence**
www.kcsdv.org
- 🖱 **Kids Peace – National Center for Kids Overcoming Crisis**
<http://www.kidspeace.org/resources.htm>
- 🖱 **Dads and Daughters**
<http://www.dadsanddaughters.org>
- 🖱 **Stop it Now**
<http://www.stopitnow.com>
- 🖱 **Families Together, Inc.**
<http://www.familiestogetherinc.org>
- 🖱 **Choose Respect**
<http://www.chooserespect.org>
- 🖱 **Rape Crisis Center** articles, fact sheets, date rape drug info.
www.rapecrisiscenter.com/education_articles

INTERNET SAFETY QUIZ FOR ADULTS



1. Where is the best place to locate your family computer?

- A. Child's bedroom
- B. Family room
- C. Office in remote area of the home

Answer B. The safest location for the computer is in a room where there is sufficient adult supervision. But don't stop there. It's also critical to know what other access your child may have including friends' homes, libraries, schools, and cellular telephones and other wireless devices. Children may even connect on gaming consoles. Thus have a plan in place to closely supervise and monitor your children's online activity no matter where they are accessing the Internet.

2. Which is the best example of how to protect your children when online?

- A. Post clear, simple, easy-to-read rules on or near the monitor; closely supervise your children's online activity when they are using the family computer; and monitor your children's online activity when they access the Internet from other locations
- B. Only allow your children to use the computer at the public library or school
- C. Do not allow your children to "surf" the Internet without having a friend nearby

Answer A. Posting clear, simple, easy-to-read rules is an excellent way to set boundaries for your children's Internet use. Consider having your children and you sign the rules, which should be periodically reviewed

3. Your children are completely safe if they only visit child-friendly chatrooms. True or False?

Answer False. It is not recommended that children visit chatrooms since the potential risks are particularly high on these websites. Realize anyone may access these websites. Those who wish to harm children have been known to entice children in child-oriented chatrooms. Nothing should replace your supervision and the time you take to explain the potential risks of chatrooms to your children.

4. What should you do if your children tell you someone they have “met” online has asked for their telephone number and wants to meet them in person?

- A. Take away their computer privileges.
- B. Praise them for telling you this, and discuss with them the reasons why it is unsafe to meet in person with someone they have first met online without your supervision. Then make a CyberTipline® report if you suspect this person is an adult attempting to meet a child.
- C. Tell them it’s OK to meet their friend as long as you know where they are going.

Answer B. Rewarding your children for being forthcoming with information is an excellent way to keep the lines of communication between your children and you open. Furthermore, your acceptance and praise of this may encourage them to report incidents to you in the future. You should remind your children not to give out personal information or meet anyone in person without your prior knowledge and consent. If you want to consider a meeting, ask to talk to the other child’s parents/guardians. If you agree to the meeting, accompany your child and meet with the other child and his or her parents/guardians in a public place.

5. Of the choices below, which is the best screenname for a child?

- A. katie_ny13
- B. CuteLitlAngel
- C. Pkdg_329

Answer C. Those online who wish to harm children often use screennames to select their potential victims. A screenname should never reveal any identifying information about a child especially things such as name, age, location, year of birth, school name, and year of graduation. Something more benign and innocuous, such as answer C, would be the best choice for a screenname to avoid calling attention to the user.

6. What are the consequences of “sexting” your child may face?

- A. Recurring embarrassment and victimization
- B. Damage to academic, employment, and social opportunities
- C. Both

Answer C. Children may face social repercussions, such as being judged or excluded by their peers, families, and communities, and may even face criminal charges of producing, possessing, and/or distributing child pornography. Images posted online can circulate forever damaging a child’s reputation and may even end up in the hands of those who victimize children.

7. If you are not familiar with computers and the Internet you should

- A. Visit www.NetSmartz411.org to help educate yourself
- B. Sit down with your children to have them show you websites they visit and how they navigate through the Internet
- C. Both

Answer C. NetSmartz411 is the premiere Internet-safety helpdesk and hotline for answers to parents' and guardians' questions about Internet safety, technology, and the Web. Ask an expert online at www.NetSmartz411.org or call 1-888-NETS411 (638-7411) to speak to an Analyst. Also sitting down with your children while they are online is not only an excellent way to learn, it is a great way to connect with them. And it could be fun for both your children and you.

8. What should you do if you suspect online “stalking” or sexual exploitation of your child?

- A. Ignore it, and hope it goes away
- B. Report it to your local law-enforcement agency
- C. Change Internet Service Providers

Answer B. Immediately report the information to local law enforcement. The Federal Bureau of Investigation (FBI) recommends — if your children or anyone in your home has received pornography depicting children, your children have been sexually solicited by someone who knows your children are younger than 18, or your children have received sexually explicit images from someone who knows your children are younger than 18 — you keep the computer screen turned off in order to preserve any evidence for future law-enforcement use. Unless directed to do so by law enforcement, you should not attempt to copy any of the images and/or text found.

9. It is OK for your children to post pictures of themselves on their own personal website, especially if they promise to only give the website address to people they know. True or False?

Answer False. Tell them it is not safe to put photographs or any type of personally identifying information on websites. Remember anyone in the world may access a Web page, and doing these things could make children easy to find and put them at risk of being abducted or sexually exploited. It is safer to publish photographs on a website where you are able to use privacy settings to share them with trusted family members and friends only, but this is no guarantee the photographs will not be saved and used in ways you may not realize. If your children are members of a group with a website, photographs of children published online should not be accompanied with identifying information. Group shots are preferable to individual pictures. The group may be identified as "Members of the basketball team." Remember, even a first name may be a tool empowering those who use the Internet to identify and stalk children. Also many schools are now posting individual information about students in Internet yearbooks. Check with your children's school(s) to determine their policy about posting information online.

10. From the choices noted below, which type of personal information is OK for your child to post on their social networking account?

- A. Dates and details about an upcoming family vacation
- B. Daily after-school routine
- C. Favorite sports team

Answer C. Personal information your children post online could be used to harm them or your family. Your children should never post information online that could help someone locate or contact them in the real world. And detailed plans about an upcoming family vacation posted onto a social-networking account could put your home at risk from burglars while you're away.

Visit www.NetSmartz411.org for more information regarding how to keep your family safer.

Explicit Slang Your Child May Be Using

Teens are using sex-related acronyms to disguise what they are texting or emailing to their friends and strangers. Here are a few examples.

IWSN: I want sex now

GNOC: Get naked on camera

NIFOC: Naked in front of computer
photo

LH6: Let's have sex

CU46: See you for sex

53X: Sex

CD9: Parent around/code9

9: Parent watching

99: Parent watching

PIR: Parent in room

420: Marijuana

Broken: Hung over from alcohol

HAK: Hugs and kisses

MOOS: Member of opposite sex

MPFB: My personal fuck buddy

Pron: Porn

RU18: Are you 18yr

SorG: Straight or Gay

WYRN: What your real name

FYEO: For your eyes only

KPC: Keeping parent clueless

POS: Parent over shoulder

SUGARPIC: Suggestive/erotic

LMIRL: Let's meet in real life

8: Oral sex

TDTM: Talk dirty to me

IPN: I'm posting naked

WTTP: Want to trade pictures

GYPO: Get your pants off

ILU: I love you

ASL: Age/Sex/Location

F2F: Face to Face

KOTL: Kiss on the lips

MOSS: Member of same sex

P911: Parent alert

Q2C: Quick to cum

RUH: are you horny

WUF: Where are you from

WYCM: Will you call me

WTPA: Where's the party at

Dangerous Apps



BYOB Chicago- If you're worried about older teens drinking, check for this app. It's popular with the 17- to 20-year-old crowd, because BYOB restaurants (especially the smaller places, according to my underage sources) rarely check IDs.

Grindr- This app lets you find a nearby guy for sex, which is not how you want a gay teen to first learn about relationships. The potential for exploitation is off the charts, so make sure this isn't on your kid's phone.

Lulu- This app lets girls review and rate guys anonymously, which could be seen as pro-feminist, but is actually just depressing. Also, the level of sexual humor and detail go beyond that of which you'd like your high school gal to participate.

Puff or Blow Skirt - Beware Peeping Toms! Puff lacks full nudity, but your kids can still blow a lady's dress up ... literally. This app is available across all phone platforms, though each type may call it something different. Once downloaded, the user can blow into the microphone or use a swiping motion to lift the skirts of girls in pictures. While most are wearing underwear, it still sends the wrong message. The best way to prevent this download (or even keep your kids from browsing and seeing this title) is to make sure your parental controls are up to speed.

Poof - With one touch, *Poof* makes apps disappear before parents' prying eyes, allowing young users of "jail broken" iPhones to virtually hide apps they don't want you to see. All your little tech genius needs to do is open *Poof* and select which app she wants hidden, and you'll never know it's there.

Snapchat- This iPhone app allows users to send photos that will "self-destruct" within 10 seconds, encouraging kids to feel more comfortable "sexting" with peers. Once the recipient opens the pic, the timer starts. The picture destroys itself after the time runs out. This means that your kid can send a potentially damaging picture to a friend or someone else, and it won't stay on the recipient's phone. This app gives kids a false sense of security sending inappropriate pics; however, damage can still be done within a specified time frame.

Whisper - This app allows you to post secrets anonymously and also allows you to chat with other users in your geographic area. Many children are drawn to communicating with strangers, feeling that their secrets are safer with them than with their friends. This app is a perfect tool for ill-intentioned strangers looking to connect with young people because it allows you to exchange messages with people nearest to you (so anonymity can be easily lost).

KiK Messenger - This kicky app for all types of smartphones is a mini social network. Similar to iChat or Google Chat, users can talk to multiple people, upload pics and files and even send built-in greeting cards or sketched pictures. Seems harmless, right? Wrong. While KiK is a great

way for responsible users to keep in touch, based on reviews in the Google Play store, it's turning out to have more to do with young teens flirting and sexting than just keeping in touch with friends. The reviews read like dating ads, with users looking to get to know more people. Like Facebook or Twitter, it's impossible to verify someone's identity through the World Wide Web. Bottom line: avoid this potentially dangerous app and talk to your kid about the risk of online predators.

9GAG- No kids allowed! Another way for users to spread sarcastic, degrading and potentially hurtful pictures or posts, 9GAG is a free app/social media site that focuses on uploaded images with captions and text. These images run from Disney cartoon characters spouting abbreviated profanities to random pictures of pets. Granted, there are many harmless posts on the site; however, just scrolling through the daily favorites posted on the site will expose your innocent kiddo to crude humor, sexually suggestive material and offensive behavior. Definitely pass.

YikYak - All Yik Yak users are anonymous. They don't create a profile or account, but they can post comments that are accessible to the nearest 500 people (within a 1-5 mile radius). A psychiatrist called this the most dangerous app he'd ever seen because it "can turn a school into a virtual chat room where everyone can post his or her comments, anonymously. Untruthful, mean, character-assassinating short messages are immediately seen by all users in a specific geographic area. "This app is causing problems in schools across the United States, with students maliciously slandering teacher, staff, and other students. In fact, several schools have now banned smart phones." **phKik** - A free app-based alternative texting service that allows texts/pictures to be sent without being logged in the phone history. (Similar apps: Viber, WhatsApp, Text Now) Makes it easier for your child to talk to strangers without your knowledge since it bypasses the wireless providers' short message services (SMS). Children also think they can "sext" without parents finding out. In addition, strangers can send your child a "friend request."

Vine – Allows users to watch and post six second videos. While many of the videos are harmless, porn videos do pop up into the feed, exposing your children to sexually explicit material. You can also easily search for/access porn videos on this app. Predators utilize this app to search for teens and find their location. Then they try to connect with them via other messaging apps.

Chat Roulette and Omegle– These apps allow you to video chat with strangers. Not only are users chatting with strangers, they could be chatting with a **fake stranger**. "Chat sites like Chat roulette and Omegle have done their best to produce systems that warns users when the people they are chatting to are potentially using fake webcam software; however developers still manage to slip under their radars with frequent updates." So a fifty-year-old man could set up a fake webcam and use images from a 15-year-old boy that looks like a teen celebrity to convince your child to send inappropriate pictures or get information about your child's location.

Tinder – Users post pictures and scroll through the images of other users. When they think someone is attractive they can “flag” the image. If that person has also “flagged” them in return, the app allows you to contact them. This app, and similar apps such as Down, Skout, Pure, and Blendr, is primarily used for hooking up.

Omegle – This App has been around since 2008, with video chat added in 2009. When you use Omegle you do not identify yourself through the service – chat participants are only identified as “You” and “Stranger”. You don't have to register for the App. However, you can connect Omegle to your Facebook account to find chat partners with similar interests. When choosing this feature, an Omegle Facebook App will receive your Facebook “likes” and try to match you with a stranger with similar likes. This is not okay for children. There is a high risk of sexual predators and you don't want your kids giving out their personal information, much less even talking to strangers.

Down – This application, which used to be called “Bang with Friends,” is connected to Facebook. Users can categorize their Facebook friends in one of two ways: they can indicate whether or not a friend is someone they'd like to hang with or someone they are “down” to hook up with. The slogan for the App: “The anonymous, simple, fun way to find friends who are down for the night.” If that alone doesn't scare you, I don't know what will!

iFunny.-This app lets users create comic strips using photos and captions, and post or send them to friends. Seemingly innocuous, this app (rated for ages 17 and over) can actually have a downside—your kid runs the risk of exposure to humor she's not ready for, and (perhaps more importantly) she can use the *iFunny* platform to bully (or be bullied by) fellow students. Once a comic strip is created, it can make its way to social networks, or it can be saved to phones and computers by other users, essentially spreading the info indiscriminately to whoever wants to keep it.

Reddit- is a place for images and stories to be posted on the internet. One quick Google search for “Reddit teens” tells me why teens shouldn't be anywhere near Reddit:

Mylo!- 300,000 members all around the world. Join now and meet thousands of teenagers like you. Mylo! has an integrated chat. You can chat with members or privately with someone. Where ever you are on mylo! you can always access your conversations directly. This is dangerous because you don't know who you are really meeting in this chat rooms. Anyone can make a teen profile.

ASK.FM-Ask.fm is one of the hottest social networking sites that is almost exclusively used by teenagers and pre-teens. 25% of teens have posted something on ask.fm over the past 30 days. It is a question and answers site that allows user to ask anonymous questions. Ask.Fm has Twitter and Facebook integration that allows users to connect with all their friends on those popular sites.

Due to intense bullying, Ask.fm has led to 4 documented cases of suicide in the United States, Ireland, and Great Britain. User engage in hyper bullying by constantly asking inappropriate and derogatory questions. The app is totally anonymous and is not being monitored by the developers.

MeetMe-Parents need to know that *MeetMe - Meet New People* is the app version of the popular online flirting, entertainment, and social networking website formerly called MyYearbook, and has some privacy and safety concerns. *MeetMe* is different from Facebook in that the primary uses of *MeetMe* are to meet new people and interact with them online rather than to keep up with your real-life friends. Teens, who must be 13 and in high school to sign up, use "lunch money" or credits to do things like put their profile at the top of the homepage as a spotlight for others to see; to get "priority in match" to increase the number of "secret admirers" you get; and play online games. Much of the communication has "flirty" overtones.

FourSquare- Foursquare is a free location-based social networking app for smartphones where people can see what is going on around them and find their friends' locations. Users can "check in" to Foursquare when they go somewhere, and the GPS coordinates are recorded. It carries safety risks as well it allow anyone who is your friend to see your location. The key to using Foursquare safely is to limit the friends list to only those with whom your teen would feel comfortable sharing his or her location.

Twitter -is an online social networking tool in which users post 140 character updates of what is going on in their lives along with links to things they think are interesting, funny, or useful to their followers ("following" being essentially what "friending" is on other sites). People use twitter in many ways, some as a newsfeed by following prominent people or networks, some as a pseudo-chatroom by limiting their followers and whom they follow to close friends and family, and some as a microblog for updating people about the work they are doing and their personal lives. Twitter users choose who they do and do not follow. They have total control of what news they receive on their homepage. When I refer to your "homepage", I'm referring to the feed that you see when signed into twitter containing your and your followers' tweets. This is different from your personal twitter page (twitter.com/yourusername) which contains all of your tweets including your replies to other users. You can have an unlimited amount of followers, but only follow people if you know them personally. (FYI these are fake twitter names. So you be careful when choosing to let someone follow you.

Facebook- is a popular free social networking website that allows registered users to create profiles, upload photos and video, send messages and keep in touch with friends, family and colleagues. The site, which is available in 37 different languages. Within each member's personal profile, there are several key networking components. The most popular is arguably the Wall, which is essentially a virtual bulletin board. Messages left on a member's Wall can be text, video or photos. Another popular component is the virtual Photo Album. Photos can be uploaded from the desktop or directly from a smartphone camera. An interactive album feature allows the member's contacts (who are called generically called "friends"). You can friend anyone even people you don't know once friends you can comment on each other's photos and identify (tag) people in the photos. Even directly message them. When you message someone it doesn't show up on the news feed, only on each other's private message board

Skout- is the developer of a location-based social networking and dating application and website. Skout was one of the first dating and mobile people discovery applications to emphasize generalized user location. Skout is available on both iOS and Android operating systems. Other Skout properties include Nixter, a nightlife app, and Fuse, an ephemeral group

messaging app. Skout reported that over 500 million connections were made using its app in 2013. Skout uses a cellphone's global positioning system to help users to find other users within a general radius of one another. While searching for people, users can view the profile and recent activities of others that they find interesting. The application also allows users to instant message or send virtual gifts to one another. The company segregates its adult and teen communities. Skout is available in 180 countries and 14 languages

Burn Note- is a mobile messaging app where all messages self-destruct after reading. Messages are displayed using the patent pending Spotlight system which is copy-resistant, prevents screenshots, and blocks people nearby from viewing your conversation.

When the recipient opens a message on Burn Note a countdown timer is started which destroys the message automatically after completion. Burn Note securely deletes all message data from the servers and the app on both the senders and receiver's phone or computer. Once a Burn Note has been deleted it cannot be viewed again.

Messages can be sent to other Burn Note users, to email addresses, or you can get a link to use anywhere. **Non-registered** users can access the Burn Note website as guests to participate in a conversation they have been invited to.

Xbox Live- Whether you're on your computer, your phone or your console, Xbox Social is your connection to the Xbox Live community.

- Send and receive messages with anyone anywhere in the world
- Play games with multi players anywhere in the world
- See which friends are online
- Receive web and mobile requests The concerns here are you children can talk live to someone they never met on the console headsets, phone, computer from anywhere in the world and play games with them online. There are lots of foul language being exchanged.

Meow- It allows you to browse nearby users, much like Tender, and suggest people with whom you might be "compatible". It has the ability to swap voice messages and photos, text and videos with people from countries across the world, it also works as a dating app in disguise and many are using fake profile pictures to talk with your child.

OoVoo- With OoVoo you can make free video calls, voice calls, and send text message to or with anyone. You can make up to 12 video calls at a time, on any device. You can talk with people around the world. This is dangerous because you may not know who your child is really talking to.

Teens are now hiding inappropriate pictures behind Icons that look normal.

HMT Calorie Counter

Private Photo Vault

Gallery Lock Lite

Best Secret Folder
 KYMS-KY Calculator
 Smart Hide Calculator
 Study Guide/Easy Study
 Marijuana
 Decoy Hide Text
 Free Fantasy
 Lock Securely
 Crypto SMS

AT & T My Utilities
 Vaulty
 Cover me
 Invisible
 Extra Innings (baseball)
 Purse Shopper
 PB –Private Box
 Stegano
 Calculator

Keep Safe
 Photo Vault
 Battery Information
 I Love Pink
 Phone Manger-Lite
 SMS Safe
 MTS
 HMT-Golf

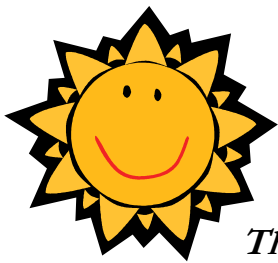


Apps/Software parents can use to see what their child is up to:

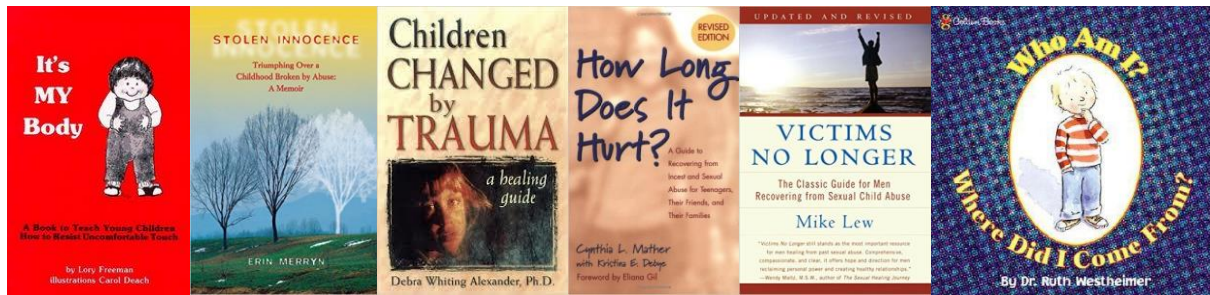
My Mobile Watch Dog
 Web Safety
 Cyber Patrol
 Mobicip
 Go Go Stat's
 Social Shield
 Safe Eyes
 Net Nanny

You Diligence
 Trend Micro's online Guardian
 Cyber Synch's
 Verizon Family Base Plan

This is just a few there are many more.



The following books are only suggestions. Parents are strongly encouraged to read each book before deciding to give them to your children.



Suggested Reading for Children

Freeman, L. (1982). It's My Body. Parenting Press, Inc. ISBN 9780943990033

Girard, L.W. (1984). My Body is Private. Albert Whitman & Company. ISBN 9780807553190

Hammerseng, K (1995) Telling Isn't Tattling Parenting Press, Inc 978188473469

Hindman, J. (1992) A Very Touching Book..For Big People & For Little People. ISBN 9780961103415

Johnsen, K. (1986) The Trouble with Secrets Parenting Press, Inc ISBN 9780943990224

Satullo, J.A.W. (1987). It Happens to Boys, Too. KIDSRIGHTS.

Spelman, . (1997) Your Body Belongs to You Albert Whitman & Company ISBN 9780807594735

Westheimer, R. (2001) Who Am I? Where Did I Come From Golden Books ISBN 9780307106186

Cavanagh-Johnson, T Understanding Children's Sexual Behaviors

Kohoe, P. (1987) Something Happened and I'm Scared to Tell ISBN 9780943990289

Hansen, D. (2007) Those are MY Private Parts ISBN 9780976198802

Ottenweller, J. (1991) Please Tell! A Child's Story About Sexual Abuse ISBN 9780894867767

Holmes, M. (2000) A Terrible Thing Happened – A story for children who have witnessed violence or trauma ISBN 9781557987013

Suggested Reading for Teens

Carter, W. (2002) It Happened to Me: A Teens Guide New Harbinger Publications
ISBN 9781572242791

Harris, R. H. (1996) It's Perfectly Normal Candlewick Press

Mather, C.L., & Debye, K.E. (1994). How Long Does it Hurt? Jossey-Bass Publishers
ISBN 9781555426743

Mayle, P (1975) What's Happening to Me Kensington Publishing ISBN
9780818403125

McGee, K. (2003) Unmasking Sexual Con Games Boys Town Press ISBN
9781889322551

Moles, K. The Teen Relationship Workbook. Wellness Reproductions &
Publishing

Merrin, Erin Stolen Innocence ISBN 9780757302824

Guerra, Bianca (2007) It's Not Your Fault ISBN 978-0-9774499-5-8

Bass, Ellen & Davis, Laura The Courage to Heal ISBN 0-06-095066-8

Mather, C. (2004) How Long Does It Hurt: A Guide to Recovering from Incest and
Sexual Abuse

ISBN 9780787975692

Feuereisen, P. (2005) Invisible Girls: The Truth About Sexual Abuse ISBN
9781580051354

Lehman, C. (2005) Strong at the Heart: How it Feels to Heal from Sexual Abuse
ISBN 9780374372828

Bean, B. (1997) The Me Nobody Knows ISBN 9780787939601

Alcorn, N. (2008) Violated: Mercy for Sexual Abuse ISBN 9781579219338

Alcorn, N. (2007) Cut: Mercy for Self Harm ISBN 9781579218973

Suggested Reading for Parents

- Adams, C. Helping Your Child Recover from Sexual Abuse University of Washington Press ISBN 9780295968063
- Whiting-Alexander, D. Children Changed by Trauma New Harbinger Publications
- Brohl, K. When Your Child Has Been Molested Jossey-Bass
- Kearney, T. Caring for Sexually Abused Children
- Monahan, C. (1993) Children and Trauma Jossey-Bass Publishers
- Schaefer, What Only a Mother Can Tell You about Child Sexual Abuse Child Welfare League
- Van Derbur, Marilyn (2004) Miss America by Day ISBN 0-9728298-5-7
- Warshaw, Robin (1988) I Never Called It Rape. HarperCollins Publishers
- Levin, D. (2008) So Sexy So Soon: The New Sexualized Childhood ISBN 9780345505064
- Lew, M. (2004) Victims No Longer: The Classic Guide For Men ISBN 9780060530266
- Sonkin, J. (1998) Wounded Boys Heroic Men ISBN 9781580620109

SEXUALLY REACTIVE CHILDREN

PARENT HANDBOOK

DEFINITION: SEXUAL ACTING OUT

Sexually acting out refers to children who engage in sexual behaviors that are not ordinary for their age, or that are hurtful to others, or that elicit adult concern. Sexually acting out also refers to sexual behaviors that result not from normal child development but from trauma, anxiety or abuse of the child. Children who show normal sexual behavior or exploration associated with expected development are not considered to be acting out.

Children sexually act out for many different reasons. Not all children who sexually act out have been abused, but the majority has. Not all children who have been sexually abused show sexual behaviors, but many do. Some children do not engage in sexually acting out behaviors until years after their initial abuse. Sexual aggressiveness is a form of sexually acting out that includes coercive, forceful and/or manipulative sexual behavior towards others. Every act of sexualized behavior has the potential for increasing the probability of future acts.

Other terms used to describe these behaviors include sexually reactive, perpetrators, sexually aggressive, children who molest, prepubescent offenders and victim-perpetrators and sexualized children.

Sexually acting out may include:

- *Sexual language (e.g., direct and inadvertent statements)* ○ *Increased sexual exploration* ○ *Exhibitionism* ○ *Excessive masturbation and often in public* ○ *Inappropriate physical boundaries* ○ *Intense preoccupation with sexual matters*
- *Sexual aggression towards other children, adults or animals*

RELATED MYTHS

Only children with sexual problems display sexual behavior towards other children. *Half of all adults report having participated in sex play as children (i.e., between infancy and adolescence).*

Young children who show sexually aggressive behavior are just curious.

Children who sexually touch others are all victims of sexual abuse.

Sexually abused children and youth are scarred or damaged forever.

Many children and youth who have been victims of sexual abuse do heal and go on to lead normal lives like everyone else. In most cases, sexual abuse leaves no visible physical marks on a person, and no one will know that abuse has occurred unless a person is told.

Children are too young to remember abuse or abusing. We need to leave them alone.

Children and youth are sexually abused because their parents/caregivers neglected to care for, or supervise them properly.

Offenders use a range of tactics to gain access to their victims. The offender alone is responsible for what he does. Many offenders are experts in manipulating both the victim and the people who care for her.

I know my child has told me everything.


My child will grow up to be a pedophile (child sexual molester).

There are no statistics available to support this. Many children who are sexually abused do not become child sexual abusers when they grow up.

If we don't talk about the abuse and ignore it, it will go away. Young children will grow out of sexualized behavior if it isn't talked about.

Unless you do something about abuse, such as talking about it or getting help through counseling and/or treatment, the pain and harm it causes may not go away, and could create more problems either immediately or sometime in the future.

Continuum of Children's Sexual Behavior: Normal to Disturbed

GROUP I: Normal Sexual Exploration	GROUP II Sexually Reactive	GROUP III: Extensive Mutual Sexual Behaviors	GROUP IV: Children Who Molest
 Normal Disturbed			

GROUP I: Normal Sexual Exploration

- Voluntarily and exploratory in nature.
- Sexual behavior based on the discovery and development of their physical and sexual selves.
- Characterized by spontaneity and lightheartedness (fun and silly).
- Interest in sex is intermittent and balanced with curiosity about all things.
- Sexual behavior may leave the child feeling embarrassed but not fearful or anxious.
- Done solitarily or with friends of similar age and size; less often with siblings.
- Usually do not include feelings of deep shame, fear or anxiety.

- For teens this often involves intense feelings for the opposite sex and sexual exploration in relationships.
- Behaviors may need limits, guidance or education, but are not considered abnormal or pathological.

Infancy

- Children begin to explore their bodies, including their genitals.
- Skin touch is the primary method infants have available for learning about their bodies, other's bodies, and their sexuality.
- Other people's response to that body exploration is one of the earliest forms of social learning.

Childhood

- Half of all adults report having participated in sex play as children.
- Children express interest in feelings aroused by touching their genitalia in the same way they express interest in the light of the moon, or a flower blooming. Children express general interest in others' bodies and may touch. Adult reactions teach shame or that privacy is important for certain behaviors.
- Masturbation occurs naturally in boys and girls, and begins in infancy. By the age of two or three years, most children have learned that masturbation in front of others is likely to get them in trouble.

Pre-Adolescence

- A strong interest in viewing (via photographs, films, videos, etc.) other people's bodies.
- Very few children become sexually active in pre-adolescence. When they do, adults usually initiate it.
- Sexual activity or play during this age usually represents the use of sex for non-sexual goals and purposes.

Adolescence

- Adolescence itself is generally marked by the societal acknowledgment of sexual capacity. The way other people react to a teen's physical sexual characteristics (body hair, formation of breasts, deepening of the voice, beginning of menses) have a profound affect on both the young person's sense of self esteem and the development of his/her social skills.
- The adolescent develops a growing awareness of being a sexual person, and of the place and value of sex in one's life, including such options as celibacy.
- The adolescent may work toward significant resolution of confusion and conflict about sexual orientation.
- It is during this time that individuals are able to join together the physical and social aspects of sex and sexuality.
- Most adolescents practice some types of interactive sexual behaviors with others, such as fondling, open-mouth kissing, and simulated intercourse.

GROUP II: Sexually Reactive

- Sexual behaviors may be frequent with their sexuality being out of balance compared to their peer group. More sexual behaviors than Group I and has a preoccupation with sexuality.
- Many of the behaviors are self-stimulating but may be directed toward and/or done in view of adults.

- Coerce other children, though the other children may dislike or be bothered by the behavior; no threats; no attempt to hurt.
- Sexual behavior often represents a partial form of reenactment of sexual abuse the child has sustained and may be the child's way of trying to understand.
- Have trouble integrating and understanding such stimulation and express this confusion in increased sexual behavior.
- Often feel shame, guilt, anxiety, and fear related to the upsurge or aftermath of the sexual behaviors.
- Many have been abused or exposed to pornography and sexual stimulation.
- Difference in age is usually not great and force is not usually involved.
- Respond well to therapy and education.
- When the anxiety is reduced or more age appropriate and less sexually stimulating environments are encouraged, the level of sexual behavior tends to decrease.

GROUP III: Extensive Mutual Sexual Behaviors

- Sexual behaviors are often habitual and extensive with the child participating in the full spectrum of adult sexual behaviors.
- Generally with other children in the same age range, and conspire to keep the behaviors secret.
- Often distrustful; chronically hurt and abandoned by adults; relate best to other children.

Sexual behaviors are a way of coping with feelings of abandonment, loss, and fear. □ May or may not experience sexual pleasure.

- Often approach sexuality as just the way they “play”.
- Usually more resistant to treatment than Group Two
- Use persuasion but usually not force or physical/emotional coercion to gain other children’s participation in sexual acts.
- Characteristically without emotional affect around sexuality - neither have the lighthearted spontaneity of normal children nor the shame and guilt of the sexually reactive children.
- Often have a history of severe physical and emotional abuse and abandonment.
- Some are siblings who mutually engage in extensive sexual behaviors as a way of coping in a highly dysfunctional family life.
- Sex is a way to relate to their peers and a way to make a “friend”.
- These children need an intensive and rigorous relearning of social skills and peer relationships.
- Need intensive supervision in the home setting and around other children.
- Some move between groups III and IV, forcing or coercing another child into sexual behaviors of their choices.

GROUP IV: Children Who Molest

- Sexual behaviors are frequent and pervasive with intense sexual confusion.
- Sexuality and aggression are closely linked as they often pair sexual acting out with feelings of anger, rage, loneliness, or fear.
- Use some kind of coercion to gain participation (bribery, trickery, etc.).
- Impulsive, compulsive, aggressive quality in many of their behaviors - not just sexual behaviors.
- Obsess over sexual thoughts and engage in a full range of sexual behavior which becomes a pattern, rather than isolated incidents.

- Loose control over their sexual behavior and have a very difficult time not repeating actions, even when punished or when trying to stop.
- Seek out children who are easy to fool and bribe or force them into sexual activity.
- Frequently use social and emotional threats to keep their victims quiet.
- Lack compassion/empathy with their victims and feel regret in getting caught, not with hurting another child.
- In sibling incest with boys who molest, the victim is typically the favorite child of the parents.
- Most parents also have sexual, physical and substance abuse in their family history.
- Home environments marked by sexual stimulation and lack of boundaries.
- Severe behavior problems at home and school and typically have few friends.
- Do not and cannot stop without intensive and specialized treatment.
- Need therapy, strong intervention, combined at times with medication to control their impulses.

WHY CHILDREN ACT OUT SEXUALLY?

Sexually reactive children act out for many reasons. Their sexual behaviors are usually just the symptom for greater, underlying issues. Most children who sexually act out are reacting to their early trauma in abusive, and inappropriate sexual ways. Some abused children tend to repeat or reenact the abuse that has been experienced. This would include masturbation, increased sexual exploration, exhibitionism, and a temporary breakdown in the children's interpersonal boundaries. Their behavior may or may not have an aggressive component to it but may simply be a heightened sexuality in sexually abused children, either transient or more prolonged in nature.

The term sexually reactive refers to a history of sexual abuse, and although no one professes a linear cause and effect, the history of abuse is seen as a relevant factor in children's development of unusual or problematic sexual behaviors. Some sexually abused children will develop sexually abusive behaviors toward others. Most believe that sexually reactive children act out in sexual ways to:

1. Attempt to deal with difficult emotions (sadness, anxiety, fear, abandonment),
2. Decrease tension,
3. Satisfy impulsive sexual needs, and
4. Cope with intrusive, trauma related memories.

PRIMARY THEORIES

Although many theories have been postulated, few have been systematically tested. At this point, it is best to have many theories to draw from and avoid using any one theory as exclusive.

A. Traumatic Sexualization

The child learns that sexual behaviors can modulate anxiety and promote feelings of shame, confusion, or isolation that frequently accompanies sexual abuse. Children learn that sexual behavior is necessary to meet their needs.

B. Eroticized Children

Basically, children develop a reliance on sexual exchanges to salvage a sense of integrity and self-esteem.

C. Post-Traumatic Play and Action

Children compulsively and rigidly repeat the events before, during, or after the traumatic incident and seek to repeat the elements of the traumatic event with other children. They attempt to do to others what was done to them.

D. Trauma Model and Repetition Compulsion

The child's behavior is usually the result of an unconscious process and frequently becomes a fixation. One motivation to abuse may be to master unresolved traumas, yet mastery can be elusive at best, and elicit more feelings of helplessness, coupled with guilt and shame.

E. Compensatory Exertion of Power and Control

TREATMENT FOR SEXUALLY ACTING OUT CHILDREN

Studies provide support for the belief that the majority of sexually abusive youth are amenable to, and can benefit from, treatment. Sexually acting out children, despite their acts, need to be viewed compassionately and with a hopeful attitude toward recovery. These children are often victims of maltreatment themselves and deserve a chance to heal and live a healthy life.

One of the reasons treatment of sexualized behavior is so essential is because of a recently recognized phenomenon called the *victim to offender cycle*. Both male and female victims are at risk for this problem. Many offenders begin as victims, whose response to sexual abuse is to identify with the aggressor and to sexually act out in order to cope with their own sense of vulnerability and trauma. Professionals must recognize the potential danger of allowing sexualized behavior to go untreated, which is that, the child then is at risk for becoming first an adolescent offender and eventually an adult offender. The child not only damages him/herself, but also may cause grave harm to many other children over the course of time and perpetuate the cycle of sexual abuse.

Probably one of the most critical factors in child sexual development is the level of parental guidance. Parents play an important part in instilling values about sexuality in their children. When parents view sex as dirty, inappropriate, or secretive they may set rigid and restrictive limits on self-exploration, language, questions, or curiosity considered healthy in children. When children are punished, chastised, or humiliated for their sexuality, they may associate sex with shame or guilt. Children need an open environment in which they can communicate openly, ask questions and learn about sexuality. If they can't find that at home, they frequently designate their peers as educators.

IMMEDIATE GOALS

1. Be sure the child is not being sexually abused or abusing others.
2. Report any/all incidents of sexual abuse to all parties involved.
3. Provide “sight and sound supervision” at all times.
4. Support and participate in the child’s therapy.
5. Follow a written safety plan at all times.
6. Refer for psychiatric and/or medical evaluations when needed.
7. Collaborate with school, daycare, or after school care personnel.

APPROPRIATE TREATMENT GOALS

1. Decrease the child’s molesting behaviors. These may include: inappropriate daydreams and fantasies; masturbation fantasies; persistent, intrusive and recurrent sexual thoughts; sibling incest; impulse control; past victimization; aggression; and power and control issues.
2. Increase the child’s understanding of their unhealthy associations and beliefs regarding sex and sexuality. For example, sex equals secrecy; sex equals dirtiness, filth, shame, guilt; sex equals love and caring; sex is “nasty”; where and how to get nurturing.
3. Increase the child’s understanding of natural and healthy sexuality such as, the reasons people are sexual together and the purpose of sex. Depending on the child’s age and the nature of their problem it may be important to teach information on the following: values, attitudes, and feelings related to sex and sexuality; sexual intercourse as a healthy way to express love between adults; homophobia; body image; pregnancy; contraception; sexually transmitted diseases; anatomy and physiology of sex organs and reproduction; masturbation; sexual arousal; gender identity; gender roles; homosexuality, bisexuality, and heterosexuality. Sexual acting out may be controlled, for example, by teaching the child to masturbate privately. Teach the child about the differences between

“GOOD TOUCH, BAD TOUCH & SECRET TOUCH”.

4. Increase the child’s awareness of their own and family patterns that precipitate, sustain, or increase sexually abusive and other nonadaptive behaviors. For example: physical battery in the family; alcohol and drug abuse; role definition in the family; role reversals; parentified children; family scapegoats; family favorites; sibling rivalry; sociopathic tendencies of the family; consequences of actions.
5. Provide support and teach the child’s caretaker behavior management techniques for sexual acting out which can involve rewarding "sex-free" days and using "time-out". This also helps the child's energies that might have gone into sexual behavior can be channeled into more age-appropriate activities by having a caretaker monitor the child, interrupt any sexual acting out, and provide opportunities for positive alternative behaviors.

6. Help the child understand and integrate his/her feelings and thoughts associated with prior victimization including physical, sexual, and emotional abuse; abandonment; neglect; family breakups; and deaths. Areas to focus on may include: secrets; nightmares; safety; responsibility for abuse; abuse reminders; PTSD symptoms; dissociation; boundaries: emotional, physical, and sexual; feelings about offenders; and damaged feelings.
7. Help the child observe and assess their own behaviors, be aware of the circumstances preceding their behaviors, and think of the consequences of their behaviors before they act.
8. Increase the child's ability to observe and appreciate other people's feelings, needs, and rights with exercises related to victim empathy and moral development
9. Help the child understand their needs and values and develop their own goals and internal resources.
10. Increase the child's ability to meet their needs in socially appropriate ways.

PARENT AND ADULT RESPONSES TO SEXUALLY REACTIVE CHILDREN

It is extremely important to note that much of the shame and psychological damage that occurs--not only with child victims of sexual abuse, but also with sexually reactive children--stems from the reactionary behaviors of adults. For example, in Tommy's case, his aunt phoning the police may have created a significant trauma in his life, which may have created more problems and difficulties for him.

When first dealing with sexually reactive children parents and adults should:

1. Attempt to remain calm in the presence of the children.
2. Phone a specialist or mental health professional immediately.
3. Talk to the child, without expressing anger, and inquire about where the child learned the behavior.
4. Discuss how many times this may have occurred.

Not punish, hit, or whoop the child, as the child may not have know what he/she was doing was wrong. This would only result in an intense level of shame, which will carry over for years.

SPECIFIC HOUSE RULES FOR THE SEXUALLY ACTING OUT CHILD

1. No sharing of bedrooms. If children must share bedrooms, get permission from their therapist and make sure the child who is sharing the bedroom is strong and assertive enough not be a victim or a child who does not have a history of sexual abuse.

2. Talk to the other children in the house. What to do if this happens and how not to become involved. They need to be told that it is important to tell adults so adults can help with feelings and behaviors.
3. Teach children specific skills to reduce anxiety or arousal. A time out, to repeat a phrase in his/her head, to engage in physical activity other than sex, or to draw or write out his feelings. Must be given the tools to channel anxiety, frustration, anger or fear into appropriate, non-abusive activities.
4. Talk openly about rules about touching and what is appropriate. Talk openly and often about appropriate touch safety and boundaries with all the children in the family. Abuse happens in secrecy, so make sure everything is open and everything can be talked about. The more open you can be about sexuality and communication, the more likely a child is able to integrate what you are trying to tell him/her. Talking openly about the rules lets everyone know that sexual touching will not be kept a secret.
5. Work closely with the therapist to avoid misunderstandings and to reinforce therapy work at home.
6. Have a plan to address behaviors when it happens. Don't ignore, don't punish, and don't shame. Address it calmly, assertively and immediately. Help the child to act appropriately.
7. Encourage self-esteem and age appropriate activities. When children feel less anxious, more in control and are exposed to more age appropriate activities and peers, the sexually acting out behaviors will usually decrease in frequency.
8. Use motion sensors if needed, especially with numerous sexually reactive children in the same home.
9. Intervene when a child is sexually acting out or inappropriate by using the following four steps:
 1. Stop the behavior.
 2. Define the behavior.
 3. State the house rule.
 4. Enforce consequences or redirect the child.

CASE EXAMPLE

You hear giggling in the bathroom. When you open the door, you find 5-year old Lori rubbing her crotch up against 4-year Sandy's bottom as she brushes her teeth. Both are laughing.

CAREGIVER'S ACTION:

Step #1: Stop the Behavior:

Tell the girls to stop what they are doing and separate them. Put one on either side of you and get down to their level. Step #2: Define the Behavior.

“Lori, you were rubbing against Sandy’s bottom with your crotch and that’s not okay.” Step #3: State the rule.

“An important rule in this house is no sexual touching and what you were doing, rubbing up against Sandy’s bottom is sexual touching. That is not okay in this house. Step #4: Re-direct the children or apply a consequence.

“I want Sandy to finish brushing her teeth and both of you go to your separate timeout for three minutes. We will talk more about this later.

SEXUALLY REACTIVE CHILD VERSUS SEXUAL OFFENDER

Professionals working in this area must understand the distinction between sexually abusive youth (offenders) versus children who are sexually reactive (acting out due to their own abuse and trauma) and/or pre-sexualized (sexualized prematurely in life). It is extremely important that people -- professionals and parents alike -- understand the difference between a sexually reactive child and one who could be considered a sexual offender.

First and foremost, childhood sexuality begins very early in life, with some notable professionals stating as young as 12 months. Sex and sexuality are, to a large degree, learned behavior. Therefore, we must keep in mind that children will experiment with their sexuality and with sexual behavior towards other children. Children begin to learn about sex and sexuality from a diverse set of informational sources: television, parents, peers, music, self-exploration, babysitters, and so forth.

It is very important to understand the concept of **presexualization**, which refers to a child who has been sexualized prematurely in life. Presexualization can take various forms: being overtly or covertly sexually abused, being exposed to pornography, and witnessing adult sexual behavior in the home are the most common forms of presexualization.

Being presexualized, however, does not necessarily imply that the child is or will become a sexual offender! Rather, it may indicate that the child may act out what he/she has been exposed to. This is what we would call a sexually reactive child.

Some of the differentiating signs between a sexually reactive child and a sexual offender are the following:

1. Did there appear to be a conscious knowledge of sex and sexual behavior, or was the behavior triggered by external stimuli?
2. How sophisticated was the incident? Did penetration occur? Was it a planned out offense? Did the child/adolescent have a goal in mind (i.e. ejaculation)?
3. How many times has the child/adolescent engaged in such behavior? Is this likely the first, second, or third incident, or has the child/adolescent exhibited this behavior for an extended period of time?

4. Does the child/adolescent make up a deliberate lie to cover their tracks, so to speak? Or does the child/adolescent appear greatly confused and ashamed over the incident?
5. Does the child/adolescent typically hang around with or associate themselves with children significantly younger than themselves (i.e. if Tommy was 9, are all his playmates 4 and 5?).

These are just a few of the differentiating data that may separate a sexually reactive child from a sexual offender.

CASE EXAMPLE:

SEXUALLY REACTIVE OR SEXUAL OFFENDER?

Tommy is a 9-year-old male, who was exposed to video pornography at the age of 3 onwards. Because his mother had a substance abuse problem, he would be cared for by his mother's sister. His aunt would have her boyfriends come over the house regularly, and would engage in sexual intercourse with the men on these occasions. Though the door to the bedroom was closed, Tommy, hearing strange noises found a crack in the door and witnessed the sexual activity. At first Tommy felt very strange--he thought his aunt was being hurt at first--and he felt scared.

After he witnessed the sexual activity a number of times, he began to feel what we might call "horny" or sexually excited. He began to masturbate at the age of 6 by rubbing his penis on pillows and against the bed. One day, when Tommy was 9, he was left alone for the day with his 8-year-old female cousin. They began to play various games together. Tommy noticed a sexual scene on a television soap opera, and became sexually aroused. He then asked his cousin if she wanted to try something he had seen his aunt do in the past. The female cousin agreed, and Tommy got on top of her and began to "hump" her. While they were doing this, Tommy's aunt came in and witnessed what Tommy was doing. She was so upset and confused that she phoned the police. The police entered a report, and Tommy and his aunt were referred to a sexual abuse/offender clinic in a nearby town.

Is Tommy sexually reactive, or a sexual offender?

Let's re-examine his story. Tommy was **prematurely exposed to various sexual activities** by witnessing his aunt having sex with numerous men, and by viewing pornography. At first he became scared, but then he became eroticized. He **began to masturbate at a young age**, most likely thinking about what he witnessed. The day of the incident, Tommy's **sexual arousal was triggered by witnessing a love scene from a television program**, and **wanted to try what he had seen** with his female cousin. **No penetration occurred**, and the **act was unsophisticated**.

Many untrained people may erroneously state that Tommy is a sexual offender. He asked his cousin to partake in the activity. He initiated the activity. It appeared to be an advanced act of carnal knowledge.

REFERENCES

- American Academy of Pediatrics, (1997).
- Freeman-Longo, R. & Blanchard, G. (1998). *Sexual Abuse in America*. The Safer Society Press.
- Gil, E. (1996). *Treating Abused Adolescents*. New York: New York: Guilford Press.
- Gil, E. & Cavanagh Johnson, T. (1993). *Sexualized Children: Assessment and Treatment of Sexualized Children and Children Who Molest*. Launch Press.
- Gitterman (Ed.), *Vulnerable Populations*. Lexington, MA: Lexington Books.
- Groth and Laredo (1981).
- Hindman, J. (1983). *A Touching Book For Little People and for Big People*. Alexandria Associates.
- Johnson, T. C. (1989). *Human sexuality: Curriculum for parents and children in troubled families*. Los Angeles, CA: Children's Institute International.
- Rosenberg & Associates Website (2000).
- Safer Society Articles & Publications (2003).
- Sarrel, L. (1989). Sexual unfolding revisited. *SIECUS Report*, 18 (1), 4-5.
- Shaw, T. Selected Trainings, presentations and publications.
- Sgroi, S. (1982). *Handbook of Clinical Intervention in Child Sexual Abuse*. Lexington Books.
- Sgroi, S., Bunk, B., & Wabrek, C. (1988). Children's sexual behaviors and their relationship to sexual abuse. In A. Gitterman (Ed.), *Vulnerable Populations*. Lexington, MA: Lexington Books.
- Simon, W., & Gagnon, J. (1998). Psychosexual development. *Society*, 35 (2), 60-68.
- The Kaiser Family Foundation. 1996.
- Safer Society Articles & Publications (2003).
- Sarrel, L. (1989). Sexual unfolding revisited. *SIECUS Report*, 18 (1), 4-5.
- Sgroi, S. (1982). *Handbook of Clinical Intervention in Child Sexual Abuse*. Lexington Books.
- Sgroi, S., Bunk, B., & Wabrek, C. (1988). Children's sexual behaviors and their relationship to sexual abuse. In A. Gitterman (Ed.), *Vulnerable Populations*. Lexington, MA: Lexington Books.
- Vermont Coalition Against Domestic Violence, 1997.