

Anticipatory Guidance for Unanticipated Behaviors in Children

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Disclosure Statement:

Ingrid Walker Descartes, MD, MPH, has no financial relationships with any commercial interests.

Objectives:

- Assist pediatric providers in differentiating normal sexual behaviors vs. sexual behavior problems
- Reinforce that situations involving sexual behaviors in children do not always require child protective services involvement
- Provide guidance to pediatric providers in opening the discussion with parents/caregivers about sexual behaviors for the supervision and monitoring

Introduction:

- Most children will engage in sexual behaviors at some time during childhood
- These behaviors range from normal and developmentally appropriate to abusive and violent
- Some parents and providers may misinterpret these behaviors as a sign of enhanced sexuality or child sexual abuse

Given these concerns...

- How do we engage parents to protect their children from sexual abuse?
- How can providers identify child victims of sexual abuse in our practices?
- If a child is already a victim, how do we prevent further trauma?

Parent/ Caregiver Engagement

Whose responsibility is it to initiate these conversations the parent/caregiver or the healthcare provider?

Let's Start with the Basics

- The default reaction by more parents and less providers, pathologize ALL sexual behaviors in children.
- This behavior place children at risk as they shame children for normal behaviors and ensures that the abused child will "keep the secret" once sexually abused

When parents share their concerns about sexual behaviors in their children

They are attempting to seek clarification on the following:

- 1) Is my child's behavior normal?
- 2) Does this behavior indicate that my child has been sexually abused?
- 3) How do I manage these behaviors?

The Role of the Pediatric Provider

- Identify and reassure when parents share about age-appropriate sexual behaviors
- Engage parents to share about these behaviors as a part of routine anticipatory guidance discussions
- Facilitate referrals for more specialized treatment if behaviors shared are not age-appropriate
- Impart some rules on sexual behavior to parents/caregivers for guidance and protection of their children

Parent Profile

- Mothers/caregivers with more years of higher education tend to acknowledge that sexual behaviors in children can be normal and may be comfortable reporting on sexual behaviors in their children.
- Mothers with fewer years of education tend to be less accepting of these behaviors and be less likely to report such behavior. They may even attempt to modify her child's sexual behavior with disapproval or punishment

It is important to let parents know that

- more than 50% of children will engage in some type of sexual behavior before their 13th birthday
- some of these behaviors can be common and age-appropriate
- the same age-appropriate behaviors may become problematic and require intervention if the frequency becomes disruptive to others

Self-Stimulation (i.e. Masturbation)

As young as 5 months of age

- a male infant who is developmentally appropriate and learning to grasp will commonly begin to manipulate his genitalia
- a female infant may similarly manipulate her genitalia through the positioning of their body against an object

Normal 3- to 6 year olds

- have an innate need to explore both their parents' bodies and their own bodies
- sexual curiosity is a manifestation of this need begin to focus even more on their genitals and often seek pleasure by manipulating their penile or vaginal area even more frequently

Self-Stimulation in Children

At 3-6 years old, typical behavior includes

- rhythmic rocking back and forth
- perspiring or noises (i.e. grunting)
- the inability to interrupt the activity with parental attempts to distract with their voice and distraction may require physically moving the child

Definitions & Classification of Sexual Behaviors

- Different terms have been used to characterize sexual or "sexualized" behavior in children

Behavior such as sexualized play

- may be within a range of normal development among social peers
- occurs at various critical stages of growth and development
- may only require adult guidance and redirection for management

Definitions & Classification of Sexual Behaviors

- On the other hand, “sexual behavior problems” or “sexual acting out” are behaviors that are developmentally inappropriate often intrusive or abusive
- “Sexually reactive youth” more descriptive and less inflammatory term than using “youth sex offenders”
- used in describing children and adolescents with sexual behavior problems resulting from inappropriate sexual experiences (i.e. sexual abuse, exposure to sexualized material and/or witnessing sexual activity by others)

<p>Ages 2-6 years</p> <p>Examples of Normal Common Sexual Behaviors in Children</p>	<ul style="list-style-type: none"> • Touching/masturbating genitals in public/private • Viewing/touching peer or new sibling's genitals • Showing genitals to peers • Standing/sitting too close • Trying to view peer, adult nudly • Behaviors are transient, few and distractible 	<p>Ages 2-6 years</p> <p>Examples of sexual behaviors that require assessment of situational factors</p>	<p>Less Common, Normal Behaviors</p> <ul style="list-style-type: none"> • Rubbing body against others • Trying to insert tongue in mouth while kissing • Touching peer/adult genitalia • Crude mimicking of movements associated with sexual acts • Sexual behaviors that are occasionally, but persistently disruptive to others • Behaviors are transient and moderately responsive to distraction
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<p>Ages 2-6 years</p> <p>Examples of sexual behaviors in children that require assessment of situational factors and family characteristics</p>	<p>Uncommon behaviors in Normal Children</p> <ul style="list-style-type: none"> • Asking peer/adult to engage in specific sexual acts) • Inserting objects into genitali • Explicitly limiting inter course • Touching animals genitali • Sexual behaviors that are frequently disruptive to others • Behaviors are persistent and resistant to parental distraction 	<p>Ages 2-6 years</p> <p>Examples of sexual behaviors in children that require assessment and report to child protective services</p>	<p>Barely Normal Behaviors</p> <ul style="list-style-type: none"> • Any sexual behaviors that involve children who are more than 4 years apart (numerical or cognitive) • A variety of sexual behaviors displayed on a daily basis • Sexual behavior that results in emotional distress or physical pain • Sexual behaviors associated with other physically aggressive behavior (e.g. threats) • Sexual behaviors that involves coercion (i.e. please or no, then to keep secret) • Behaviors that are persistent and child becomes angry if distracted
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Is Sexual Abuse the Only Type of Abuse Linked to Sexual Behaviors in Children?

A study of 201 children 6 to 12 years of age with inappropriate, intrusive, or aggressive sexual behaviors showed

- 48% were sexually abused
- 32% had a physical abuse history
- 35% had a history of emotional abuse
- 16% had a history of neglect

Therefore, the types of abuse that children with sexual behavior problems are exposed to is varied or they may overlap.

Sexual Behaviors and Other Symptoms

Children with sexual behavior problems

- are more likely to have additional mental health symptoms
- internalizing symptoms (depression, anxiety, withdrawal)
- externalizing symptoms (aggression, delinquency, hyperactivity)

This association suggests that

- some sexual behaviors occur within a continuum of behavioral problems
- there are multifactorial causes
- behavioral screens may play a significant role in the evaluation of these children

Comorbid Diagnoses and Sexual Behavior Problems

In a clinical sample of 127 children aged 6 to 12 years with sexual behavior problems,

- 96% had additional psychiatric diagnoses

The most common diagnoses were

- conduct disorder (76%)
- attention-deficit/hyperactivity disorder (40%)
- oppositional defiant disorder (27%)

**Factors that affect frequency and types of sexual behaviors
Environment**

There are two groups of children that may engage in a greater variety and frequency of sexual behaviors
These behaviors may be disruptive to others, but not necessarily abusive
These behaviors are often noted after a shift in care-giving environments such as when

- children are placed in foster homes
- children who attend child care facilities

Special Consideration for Shifts in Caregiving Environment

- The presentation of sexual behavior problems may not immediately follow sexually abusive experiences
- There is a period of latency where some children after removal from the abusive may develop sexual behavior problems a number of months or years later

Period of Latency

In a study of 127 children aged 6 to 12 years with repetitive, diverse, disruptive, or abusive sexual behavior,

- for 6-9 year olds the latency time between sexual abuse and manifestation of sexual behavior problems was 2.2 to 2.7 years
- for 10-12 year olds the latency time was about 3 to 4 years

For many providers, this lack of attention to the period of latency may result in the wrong living arrangement being the focus of an investigation by Child Protection Services

Childcare

Among children who are NOT suspected victims of abuse, more time spent in child care correlates positively with the number and frequency of observed sexual behaviors

Child care appears to provide more opportunities for children to interact and explore each other in both sexual and nonsexual ways

Age

In young children up to 5 years of age,
• the variety and frequency of sexual behaviors increases and then decreases gradually after this age

In a normative study of 1,114 children aged 2 to 12 years,
• parents of children aged 2 to 5 years reported greater variety and frequency of sexual behaviors
• parents of children aged 6 to 12 years reported less variety and frequency of sexual behavior

Younger Children

Less aware of breaches in personal space and how their behavior may be construed as sexual or inappropriate

Reactions from others of embarrassment and shame may be misinterpreted as positive responses

This prompts the child to persist in the disruptive sexual behavior when there is an "audience"

Preschool-aged Children

Are naturally inquisitive and recognition of physiologic gender differences occurs during this time

This milestone contributes to inquisitive viewing and touching of other children's genitals also places them at increased risk!

Situational Factors

This curiosity-seeking behavior also tends to occur within the context of nonsexual explorations

These explorations include

- the birth of a new sibling
- seeing their mother breastfeed
- viewing another child or adult in the bathroom

Household Culture of Nudity

Nudity is more open in some households compared to others
Children are more likely to openly engage in sexual behaviors when

- they reside in homes in which there is family nudity
- co-bathing or co-sleeping is allowed
- the norm is less privacy when dressing or going to the bathroom or bathing

Access to Pornography

Children be more prone to engage others in sexual play or may use age-inappropriate sexual language if they are from homes with readily accessible pornographic materials

- poor supervision of children's access to such materials
- sexual activities are occurring openly (i.e. presence of adolescent siblings)

Sexual Behaviors and Developmental Delays

Children with developmental disabilities may have deficits in domains that can affect their sexual knowledge and activity

These delays contribute to an increased risk of sexual behavior problems as well as sexual victimization in such children as they may encounter challenges with:

- Social skills
- Personal boundaries
- Impulse control
- Understanding what is hurtful or uncomfortable to others

Sexual Behaviors and Developmental Delays

In evaluating sexual behaviors in disabled children Example, an 18 year old with the cognitive abilities of a 3-year-old may

- exhibit self-stimulatory behavior that is consistent with his or her developmental level
- be unable to determine what behavior is appropriate in public

Sexual Behavior & Dysfunction/Stress

Sexual behavior problems in children are significantly related to living in homes with disruption

The greater the number of life stresses—the greater the number and frequency of sexual behaviors observed in children.
