A Parent's Guide About: CHILD SEXUAL ABUSE





formerly Women's Crisis Support~Defensa de Mujeres

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Monarch Services ~ Servicios Monarcas responds to the needs of Santa Cruz County area survivors and their children who are experiencing and recovering from family violence, including sexual assault and domestic violence,

Monarch Services ~ Servicios Monarcas provides services to children and their parents through the pediatric Sexual Assault Response Team (SART) exam. If your child is asked to go through a SART exam, an advocate from Monarch Services ~ Servicios Monarcas will be present to provide information and assistance to support your child and you. This support for you will in turn help you support your child in healing from the sexual abuse that they have experienced.

WHAT HAPPENS DURING A PEDIATRIC SART EXAM?

SART is a model program for the state of California. Its purpose is to collect high quality forensic evidence with minimal impact on the victim. If the assault happened within the last 72 hours, a law enforcement officer decides whether the SART should be initiated. The law enforcement officer activates the SART by notifying the on-call pediatric SANE nurse (Sexual Assault Nurse Examiner) and then transporting the child to the SART room at the hospital. (SARTs can be done at Dominican or Watsonville hospitals.) The nurse then calls Monarch Services ~ Servicios Monarcas to arrange for an advocate to meet the team at the hospital.

A Monarch Services~Servicios Monarcas advocate is there to provide information and support, and will not question your child for details about the sexual abuse. The advocate usually gets a chance to talk alone with you and your child while the nurse and officer confer. The nurse and officer usually conduct a joint interview with the child, with the advocate present. The nurse then conducts the physical exam. The law enforcement officer is not present during the physical exam. The child has the right to have the advocate present, or not, throughout the entire process, which may take several hours to complete. The advocate will keep in contact with you and your child, accompanying you to law enforcement interviews, follow-up exams, and court appearances, if you and your child so choose.

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TYPES OF ABUSE

This packet focuses on child sexual abuse. Child sexual abuse is defined as any act(s) of sexual assault and/or sexual exploitation of a minor.

SEXUAL ABUSE

Specifically, sexual assault includes rape, rape in concert (gang rape), penetration of a genital or anal opening by a foreign object, incest, sodomy, oral copulation, and fondling. Sexual exploitation includes acts related to child pornography and/or prostitution. Sexual abuse may consist of many acts over a long period of time or a single incident. Survivors of child sexual abuse range in age from less than one year through adolescence. The nature of sexual abuse, guilt and shame of the child survivor, and the possible involvement of parents, stepparents, friends, or other persons in a caretaker role makes it extremely difficult for a child to come forward to report sexual abuse. Due to the nature of the power dynamic between children and adults, consent is not a factor in determining if sexual abuse has occurred. A child is never able to consent to sexual activity.

PHYSICAL ABUSE

Physical abuse is defined as any act that results in a non-accidental injury upon a minor by a caretaker. Inflicted physical injury most often consists of unreasonably severe or unjustifiable corporal punishment. Physical abuse usually happens when the caretaker is frustrated or angry and strikes, shakes, or throws the child. Intentional, deliberate assault such as burning, biting, cutting, poking, twisting limbs, or otherwise torturing a child is also considered physically abusive.

NEGLECT

Neglect is the negligent treatment or maltreatment of a child by a parent or caretaker where there is a threat or an indication of harm to the child's health or welfare. The term includes both acts and omissions on the part of the parent or caretaker. Neglect involves the intentional or negligent failure by a caretaker to provide adequate food, shelter, clothing, supervision, or medical attention for a dependent minor.

EMOTIONAL ABUSE

Emotional abuse includes the excessive verbal assault (belittling, screaming, threatening, blaming, sarcasm), unpredictable responses, continual negative moods, constant discord, or double-message communication between a parent or caretaker and a child.

--Adapted from Mid-Peninsula YWCA Child Assault Prevention Project.

MANDATED REPORTING

Anyone can make a report of abuse to Child & Family Services (CFS).

The law requires that certain professionals report suspected cases of child abuse within 24 hours or face possible criminal charges. Mandated reporters include teachers, school personnel, daycare providers, doctors, medical personnel, therapists, and counselors. The law exists to protect children from abuse—often children are afraid to tell, or have had previous reports to parents or family members ignored.

Keeping silence of the abuse will continue damaging the child. Silence protects the abusers and it keeps the child in danger of abuse. Help out to end the silence of child sexual abuse, **report any suspicion of child sexual abuse**.

STATISTICS

- 1 out of 3 girls and 1 out of 6 or 7 boys will experience sexual abuse by the age of eighteen.
- Over 1/3 of child sexual abuse cases involve children under the age of five.
- Less than 25% of sexual abuse victims report the abuse to law enforcement.
- Over 75% of child sexual abusers are known to the survivor prior to the first incident of abuse.
- 50% of child sexual abusers are family members of the victim.
- 98% of all known sexual offenders are male. Typically, they are heterosexuals who appear normal in psychological testing, are employed, and are married with children.
- A disproportionately high number of physically and mentally disabled children are sexually abused because they tend to be more vulnerable.

--Statistics were compiled according to The National CAPP office and the Office of Emergency Services.

MYTHS AND FACTS ABOUT CHILD SEXUAL ABUSE

There are a lot of myths and misinformation about childhood sexual assault--here are some facts.

MYTH: Abusers are strangers, "dirty old men", crazy, retarded, or homosexual.

FACT: Over 75% of abusers are known to the family. Perpetrators sexually abuse children to have power and control. Sexual abuse crosses all socio-economic, races, religion, and gender lines, and sexual abusers come from every profession. They look like everyone else. Research shows that most child sexual abusers are men who identify as heterosexual.

MYTH: Child & Family Services will take away the child after a report of child sexual assault has been made.

FACT: CFS may intervene if the child is at risk. If you know about the abuse and you do not report it, it could be considered failure to protect. Children are only removed from the home as a last resort.

MYTH: The child is lying or making up stories.

FACT: Most children do not have the knowledge or sexual vocabulary to make up explicit stories about sexual abuse. Always believe a child when they are disclosing something about sexual abuse. To not act, and/or to accuse the child of lying could be detrimental and even life threatening, especially if the offender discovers this unheeded disclosure.

MITH: if a child I know was being sexually abused, she or he should tell me right away.

FACT: Because they are confused by the abuse, feel responsible or being threatened by the abuser, children don't automatically tell a parent. They are often times embarrassed to speak of the abuse rev. 12/09

MYTH: The child was being seductive, asking for attention.

FACT: Often, a child molester interprets a child's need for attention, nurturing, and affection as seductive. Children do not know how to be overtly seductive unless it has been taught to them by the offender. A child behaving in a seductive manner is often a warning sign that the child has been sexually abused. The responsibility to openly address "seductive" behavior belongs to the adult, not to the child.

MYTH: It will only frighten and traumatize children to openly discuss child sexual abuse with them.

FACT: Sexual abuse must be presented as a safety issue. Vague warnings like "Don't take candy from strangers" and "Don't ever let anyone touch you" can often confuse and frighten children. If the topic of sexual abuse is presented correctly, it should be no more frightening than other aspects of safety, like planning a household fire escape route. Avoiding the subject can have devastating consequences.

MYTH: It is easier for the child to recover from sexual abuse if they don't have to report to law enforcement. FACT: Your child may need you to speak up for them by reporting the abuse. Reporting the incident to law enforcement may open up dialogue between you and your child about the abuse. Seeing that the abuser is punished can also validate that what they did to the child was wrong.

SIGNS OF SEXUAL ABUSE

When a child has been sexually abused they may exhibit symptoms connected to the abuse, including:

PHYSICAL SIGNS:

- chronic ailments, stomach aches, headaches, vomiting
- sexually transmitted disease
- genital discharge or infection
- pain upon urination /defecation
- physical trauma or irritations to the anal or genital area
- wears torn, stained or bloody underclothing
- pregnancy

SEXUAL BEHAVIORS:

- age-inappropriate sexual knowledge and behavior
- sexually aggressive behavior with peers and toys
- compulsive and indiscreet masturbation
- excessive curiosity about sexual matters
- excessive concerns about homosexuality

BEHAVIORAL INDICATORS ESPECIALLY IN YOUNG CHILDREN:

- bedwetting
- eating disturbances (overeating, under eating)
- fears or phobias
- overly compulsive behavior
- significant change in school performance
- age-inappropriate behavior—trying to act very mature or very immature
- inability to concentrate
- sleep disturbances
- speech disorders
- drastic behavior changes

BEHAVIORAL INDICATORS FOR OLDER CHILDREN AND ADOLESCENTS:

- withdrawal, clinical depression, or apathy
- acting out, aggressive, or antisocial behavior
- poor hygiene or excessive bathing
- poor peer relations and social skills; inability to make friends
- alcohol or drug abuse
- prostitution or excessive promiscuity
- school problems
- refusal to dress for physical education
- running away

IT IS NOT YOUR FAULT THAT YOUR CHILD WAS SEXUALLY ABUSED

The sexual abuse is the fault of the abuser.

However, there are certain precautions that can be taken to reduce children's risk for future abuse:

- Carefully screen childcare providers. After you have chosen a facility, drop in unannounced so that you see a realistic portrayal of a typical day.
- Listen to your child. If your child is afraid of or avoids a certain person or place, there might be a significant reason.
- Examine your own use of alcohol or drugs. Who is looking after your child during your intoxication?
- Make careful decisions about who you leave your child alone with. Are you sure that you can trust your friends, family members, and spouse to treat your child appropriately?

MOST SEXUAL ABUSERS OF CHILDREN ARE REPEAT OFFENDERS.

There is a very high repeat rate for child sexual abuse. Unless the offender is prosecuted and undergoes intensive therapy and long-term treatment, it is almost certain that they will molest again. Even after the abuser has gone through the system and has received treatment for the behavior, caution should always be exercised when they are around children. The legal system must be involved in order for the abuse to stop.

Since child sexual abuse is about power and control, perpetrators are more likely to abuse during times of high stress in their lives such as loss of employment, separation (physical or emotional) from their partner, or during other times when control over their own lives may be lessened. Other contributing factors to why people abuse may be that they were abused as children and are acting out a familiar pattern, or that they may not have learned acceptable outlets for their anger, aggression, tension, or impulses.

WHY DIDN'T MY CHILD TELL ME SOONER?

Children are often reluctant to tell anyone about the abuse.

If your child did not tell you about the abuse, or waited a long time, do not take it personally. Abusers instill fear into the children that they sexually abuse. Your child may have been afraid to disclose the abuse to you for fear of your reaction, especially if the abuser is your partner or spouse. The child might be embarrassed to speak of the abuse, or confused about whether their relationship with the abuser was abusive in other ways. The child might try to protect the abuser, or the people close to the abuser, by not disclosing. There are things you can do to help your child to talk about what has happened, and to make it easier to disclose if it were to happen again.



RESPONDING TO OTHER PEOPLES QUESTIONS ABOUT THE ABUSE

Depending on the circumstances surrounding your child's abuse, there may be people who already know about the sexual abuse of your child.

It is important to discuss with your child who will be told about the abuse. Making it clear who will know will help give your child a feeling of control and may help to reduce your child's shame and embarrassment. Remember that you and your child have a right to privacy and the right to respond to questions from others without conveying any information about the abuse. A response by you such as: "Right now we are working through this and getting the help we need," is appropriate. You might also remind your child that they do not have to answer any questions that they don't concern the abuse. On the other hand, it is important that neither of you become isolated and that you both find safe people to discuss your feelings with.

COPING WITH YOUR FEELINGS ABOUT YOUR CHILD'S SEXUAL ABUSE

It is appropriate to have strong feelings about the sexual abuse of your child.

Those feelings might become more complicated if the abuser is someone who you care about. If the child senses how strong your feelings are about the abuse, they may shut off further communication about the abuse (and healing) in an effort to protect you.

It would be beneficial for you to try to work out your own feelings with a friend or therapist so that when you are with your child you can remain purely supportive.

When interacting with your child your feelings about the abuse should not override what your child is experiencing. It is not your child's job to support you or validate your feelings, but the other way around. Take the time to care for yourself. For further support, see the referrals and further reading pages.

WHAT NOT TO DO

Make promises. Don't do promises that you are not sure can do. Don't do promises like "you'll never be abused again" "the abuser will go to jail". The child has confidence in you—don't fail that trust.

Confronting the abuser. Confronting the abuser, especially in front of the child, this can be very counter productive and dangerous. Leave this for the authorities.

HOW TO HELP YOUR CHILD RECOVER FROM SEXUAL ABUSE

- Believe and support your child! Let your child feel that they are protected and loved and that you are glad that they came forward.
- Listen to your child and be willing to talk about the abuse with them. Open up the lines of communication and let your child know that you are there for them during hard times. It is important not to force communication about the abuse. Also, be calm in communicating with your child about the abuse. If you become very upset it will make the child feel unable to discuss the problem with you.
- Help your child develop and maintain healthy boundaries. Let them know that it is fine to refuse physical affection from anyone, including hugs and goodnight kisses from you. Give your child privacy: the right to shut their bedroom door, to not have to bathe with siblings, and so forth.
- Increase children's positive view of themselves. Compliment them for being strong enough to survive.

- Keep your child informed of your actions regarding the abuse. For instance, what is happening in the legal system, who has been told about the abuse, and what you are doing to protect your child from abuse. This will help your child feel in control.
- Treat the child as usual. This does not mean pretending that nothing happened, but it does mean keeping up a routine and schedule. Let the child things without trying to enjoy childlike force adult decisions on them as a result of the abuse.
- Heal your own wounds from past abuse by seeking help for yourself. Have someone other than your child whom you can talk with, so that when your child needs your attention you are totally present and can fully support them through the experience.
- Let your child know that the abuse was in no way their fault. Consistently place the blame where it belongs: on the abuser.



SAFETY SKILLS It is important to maintain a safe environment for your child to reduce their risk for future abuse.

Some ideas for discussing safety are:

• "What if..." Game. This is a brainstorming game that allows children to develop their own answers to difficult situations. Possible questions:

What would you do if your bike broke down and a stranger offered you a ride home? What would you do if someone asked you to keep a "bad" secret? What would you do if someone asked you to touch their private parts? What would you do if someone asked you to take off your clothes?

- "No—Go—Tell." Practice with your children the ability to say "NO" to a potential abuser (even if that person is an authority figure), to "GO AWAY" from the abuser, and to "TELL" someone about what happened. Remind your child that although it is not always possible to stop the abuse by simply saying "NO" and trying to get away, the child always has the choice of telling a trusted adult afterward. Help your children create a list of who they could tell about the abuse, and emphasize that they need to keep telling about the abuse until someone gets help for them.
- **Promote privacy.** As children mature they will want their own rooms, closed doors, and private times alone. It is important to allow children to have privacy and the right to control their bodies and personal space.
- Treat private parts like other parts of the body. Teach children about their private parts as they are taught about eyes, nose, ears, and so on. If children are taught incorrect names or if genitals are not discussed, children may get the message that their genitals are "bad." This stigma may then make it difficult for a child to disclose abuse.
- Let your child know that there is a difference between a "good secret" and a "bad secret." A "good secret" is a secret that can always be told to both mommy and daddy. It is a secret that is fun to keep. A "bad secret" is a secret that can't be told to mommy and daddy. It is a secret that is hard to keep. A secret is "bad" if it is about an unwanted touch that a person is giving to a child.

--Adapted from Mid-Peninsula YWCA Child Assault Prevention Project

COMMUNITY RESOURCES AND REFERRALS

CRISIS LINE SUPPORT FOR YOURSELF:

Monarch Services ~ Servicios Monarcas 24-Hour Crisis Line (bilingual): 1-800-900-4232 Santa Cruz Office: 425-4030 Watsonville Office: 722-4532

Childhelp USA National Child Abuse Hotline 24-Hour Hotline (bilingual): (800) 422-4453

Monterey Rape Crisis Center 24-Hour Crisis Line: 424-4357 / 375-4357 Office: 373-3955

TO REPORT CHILD ABUSE:

Child & Family Services (CFS)

Office (bilingual):454-4222/763-8850

COUNSELING FOR PRE-ADOLESCENT CHILDREN:

Parents Center

426-7322 / 724-2879

COUNSELING FOR ADOLESCENTS:

Youth Services

425-0771 / 728-2226 24-Hour Youth Crisis Line (bilingual)

FOR ADULT SURVIVORS OF CHILDHOOD SEXUAL ABUSE:

Survivors Healing Center

Office (bilingual) 423-7601

LEGAL QUESTIONS:

 Victim Services (Formerly "Victim Witness")

Office (bilingual):454-2010/768-8166

WORDS THAT YOUR CHILD NEEDS TO HEAR

"It wasn't your fault." "I believe you." "I'm so sorry that this happened to you." "I'm so proud of you for being so strong." "I'm so lucky to have a great kid like you." "I'm always here to talk with you." "I Love You."

You can get through this. Your child can get through this. You are already survivors.

Women's Crisis Support ~ Defensa de Mujeres / 24-hour Crisis Line: 1-888-900-4232