

stop

A Community Free
From Sexual Abuse

He Hapori Waatea | Taitookai



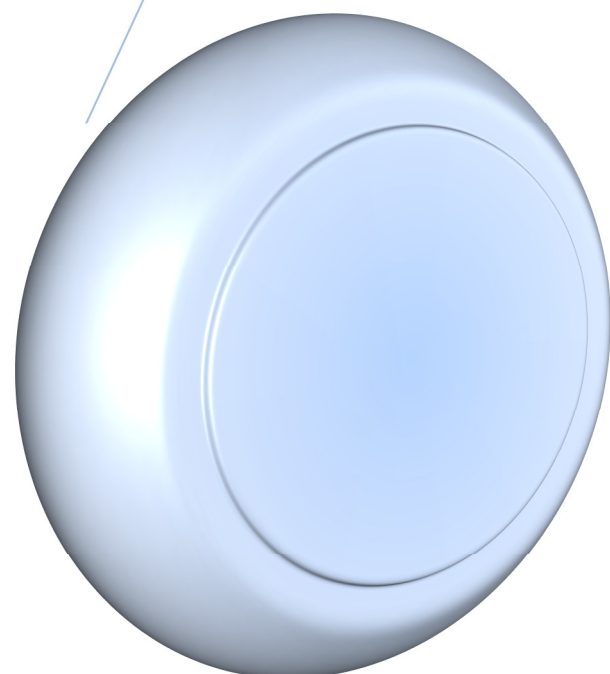
STOP Children's Programme

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What is the STOP Children's Programme ?

The Children's Programme was set up to provide assessment and intervention for children displaying concerning sexualized behavior. The focus of the programme is to provide each child and their family/caregivers with a personal, effective, short term therapeutic intervention to best meet the needs of the child. The programme works closely alongside school and other professionals involved with the child and family.

The goals of the Children's Programme are to:

- Minimise and manage further incidents of concerning sexualised behaviour.
- Give clarity on what is age appropriate and normal developmental sexual behaviour at different year levels.
- Help children and family to understand boundaries relating to personal space, special private parts of the body and how to play safely.
- Educate families to establish healthy ways to discuss age appropriate sexualised behaviour, supervise and give clear, gentle and caring guidance about how children play safely.
- Provide helpful options if children have had exposure to adult sexual behaviour or if they have disclosed they have been sexually abused.

Who is the STOP Children's Programme for ?

- Children, both boys and girls between five and eleven years of age who have displayed concerning sexualised behaviour.
- Parents/caregivers need to be committed to supporting and attending the assessment and intervention process and engage openly to learn, supervise and give guidance to children in their care on how to play safely.
- Children who are living in a safe, stable and supportive living environment.

How do Children get Referred to the STOP Children's Programme ?

Usually a child will be referred by either their School, their GP or CYFS Social Worker. After an initial phone consultation with the Children's Programme Team Leader a referral can be made for an assessment. The assessment process will then highlight a range of options and recommendations based on each individual situation.

What Sort of Behaviours Would Get a Child Referred to the STOP Children's Programme ?

A child who has been referred to the STOP Children's Programme would usually have come to the notice of their teacher, school or some other person because they were



displaying concerning sexualized behavior. The behavior is usually over and beyond what you might expect or observe to be normal age-appropriate sexualized behavior and may be causing concern amongst their peer group.

What is Concerning Sexualised Behaviour and How Would I Know if my Child was Doing it ?

It is important to remember there are many normal range developmental sexual behaviours for children. It is important to keep in mind:

- Sexual responses are present from birth
- A wide range of sexual behaviours are normal
- Sexual development is influenced by family, social experiences, peer group, culture, biological factors and sexual experiences

The key factor in many incidents of children being involved in sexualised play and behaviour is the context of the behaviour.

- The relationship between the children?
- What was happening before-hand and what is the context of the play?
- What things are happening in the family's life eg: new baby, breast feeding,
- What is the age-range of the children?
- Where did the behaviour happen?
- Who might have initiated the play and how come?

The Programme describes sexualised behaviour in the following categories. We often refer to the analogy of traffic lights to describe sexualised behaviour. All incidents of sexualised behaviour, whether green, orange or red light behaviour is an opportunity for adults to help children learn and understand about playing safely together and how to respect their own and other people's personal space and bodies.

GREEN Light: Normal Sexual Exploration

- Age appropriate exploration
- Play is mutual with both having similar knowledge of the nature of the play
- Sexual play – “I'll show you mine if you show me yours”
- Similar age and size, generally mixed gender, more often friends than “siblings”
- Excited, giggly, rarely feel shame or fear
- Children with special needs may develop at different rates
- Differing backgrounds/cultures may have different expectations
- Children explore each other's bodies visually and involving touch, e.g. playing doctor, playing house. With guidance and good boundaries from safe role models children learn what behaviour is appropriate.



Sexual behaviours may include:

- Drawing genitals on human figures
- Asking questions about sexual differences, puberty, pregnancy
- Curiosity about nudity
- Explore and maybe touch genitals, breasts and buttocks of other same aged children
- Kissing familiar adults and children
- Erections
- Touching their own genitals in private
- Rubbing genitals against objects
- Interest in breeding behaviour of animals
- Interested in sex words and swearing, dirty jokes and sexual media

ORANGE Light: Concerning Sexualised Behaviour

- Behaviour that appears to be outside the normal range
- Child appears to be preoccupied or obsessed by sexual behaviour
- Behaviour out of balance with peer group
- Some children may have been sexually abused or over – exposed to sexual behaviour, e.g. poor boundaries around sexual behaviours of adults in the living environment or exposure to explicit media. This is sometimes referred to as children who are ‘sexually reactive’ and are reacting or playing out what they have been exposed to.
- Child has not responded to clear, safe adult guidelines about stopping this behaviour.

Sexual behaviours may include:

- Preoccupied with touching genitals, breasts, buttocks of other children
- Excessive sexualised language or explicit drawings of a sexual nature
- Attempts to engage in oral, anal/vaginal sex
- Inserts objects in own or others genitals/rectum
- Touching genitals of animals
- Excessive interest and/or preoccupation with sexual matters



RED Light: Harmful Sexualised Behaviour

- Sexually harmful behaviour is complex
- Behaviours go far beyond developmentally, age-appropriate sexual exploration
- Persists over time
- Part of pattern rather than isolated events
- Can be impulsive, compulsive and aggressive
- May involve anger, anxiety and confusion

Sexual behaviours may include:

- Asks people to take off their clothes using aggression or threats
- Demands to see genitals/breasts/buttocks of children and adults
- Intimidates other children into sexual touching
- Forced or mutual oral, anal or vaginal sex
- Sneaky sexual behaviour
- Intimidation used when inserting objects into genitals/rectum of others
- Sexual behaviour with animal
- Excessive interest and/or preoccupation with sexual matters

How Would I Know That the School, Teacher or other People are not just Over-reacting?

Sexualised behaviour can be complex and create many responses from all involved. Sometimes adults can under-react or over-react when they have to manage an incident of sexualised behaviour. It is important to keep everything in perspective so the child involved can learn and be safe.

The following are indicators that might suggest when sexualised behaviour may be Concerning:

When there are Inequalities between the children such as:

- Age Differences
- Intellectual functioning
- Emotional development
- Knowledge/Life experiences
- Power and Authority
- Physical differences/size



When coercion or intimidation may be used:

- Threats
- Violence
- Bribery (money, treats)
- Trickery

Or when there is a lack of agreement or permission between the children:

- Compliance may not mean agreement
- Consent implies full knowledge, understanding and choice
- When a child continues to initiate sexualised behaviour after being told not to
- Or when it elicits complaints from other children

These are guidelines but will give you some idea what to be aware of. Sometimes it may be one incident of sexualized behavior that has occurred or at other times it may be several incidents involving a number of different children. This highlights the need to stay calm, not over or under-react, but to gather as much information as possible from all involved to get a full understanding of the context and nature of the behavior.

So what should I do if I suspect my child is doing sexual stuff he/she shouldn't be doing?

- Children need calm, safe adults to give guidance into what is healthy, normal and safe sexualized behavior
- It is helpful if parents feel confident to speak to their children about what they have seen or heard. It is not ok for children to punch, kick, bite and scratch, nor is it ok for children to play with each other's special private parts. They learn by your response and clear guidelines
- Clear, positive, simple guidelines and boundaries are helpful
- Talk with a trusted family member, friend, or public health nurse for some advice, or speak with your GP

What should I do if the school tell me that my child is doing "sexual stuff" he/she shouldn't be doing ?

- This is an opportunity to talk with your child and have support from the school
- Most schools will support the child and talk through their concerns
- Work together alongside the school
- Be open to talk about the context of the behavior and what happened Remember this an opportunity for your child to learn about playing safely
- Check out with the Principal what their policy/process will be



- Discuss with the school if a referral to the STOP Children's Programme is the best option

What will happen once we are referred to the STOP Children's Programme ?

- You will be aware a referral is being made, and your consent is required on the referral form.
- You will be contacted by a clinician who will explain the Assessment process and arrange a suitable day to have an initial meeting.

What happens in the Assessment?

- This is a 6-8 week process which involves sessions, to provide information relating to your child. Psychometric tests are completed along with a home visit to meet the family, and liaison with the school. This is followed by a final report with recommendations for intervention if required.

What happens after Assessment?

- For some families Assessment, which includes a basic intervention based around education, boundaries and safety, is all that is required. For others a short term therapeutic intervention, that will specifically meet the needs of each child, is recommended.

What happens if my child needs intervention ?

- Weekly sessions with the clinician will involve attendance by both you and your child.
- The sessions are focused around the child and will involve a variety of experiential, play therapy approaches to engage the child.

What happens once my child has finished at the STOP Children's Programme ?

- A celebration session will conclude your child's intervention and acknowledge the hard work you and your child have participated in.
- A Closing Summary of the work completed will be given to the Referrer.
- A closure session with the school as appropriate
- Contact after 3 months to follow up how your child is doing

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