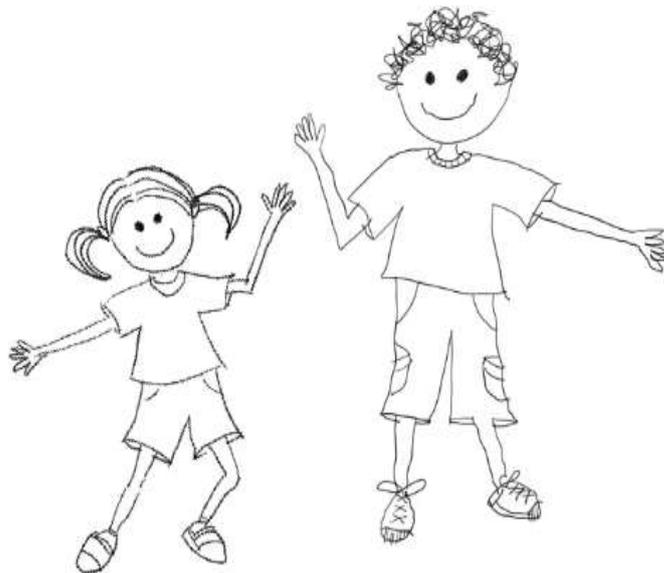


stop

Children's Service

TALK
PLAY
AND
STAY
SAFE
OK!



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CHILDREN'S SERVICE

stop
A community Free
from Sexual Abuse
He Haere! Whānau/Tāwhaiti

What is the STOP Children's Service?

The Children's Service was set up to provide assessment and intervention for children displaying concerning sexualised behaviour. 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 Service are to:

- Addressing and managing the reported incidents of concerning sexualised behaviour from our community.
- Clarify what is age appropriate normal sexual developmental for different age levels.
- Help children and family to understand boundaries relating to personal space and private parts of the body.
- Educate families to establish healthy ways to discuss age-appropriate sexualised behaviour.
- Provide supervision around safe play between children.
- Education and guidance parents/caregivers whose children have been exposed to a sexualised environment including access to inappropriate media.
- Provide helpful options for parents/caregivers should the child disclose they have been sexually abused.

Who is the STOP Children's Service for?

- Primary and Intermediate age children who have displayed concerning sexualised behaviour.
- Parents/caregivers need to be committed to supporting their child across assessment and intervention. This involves the parent/caregiver to attend and participate fully in the regular therapeutic sessions with their child.
- Children who are living in a safe, stable and supportive living environment.

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

Usually, a child will be referred by their School, GP or Oranga Tamariki Social Worker.

After an initial phone consultation with the Children's Service Team Leader, a referral can be made for an assessment. At the completion of the assessment process, recommendations will be based on each individual situation.

What Sort of Behaviors would get a Child Referred to the STOP Children's Service?

A child who has been referred to the STOP Children's Service would usually have come to the notice of their family, school or a professional involved with the child because they were displaying concerning sexualised behaviour. The behaviour is usually over and beyond what you might expect or observe to be normal age-appropriate sexualised behaviour and may be causing concern amongst their peer group.

What is Concerning Sexualised Behaviour?

It is important to remember there are many normal age-appropriate 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

Understanding the Context of the Behaviour is Important?

- What is the relationship between the children?
- What was the sexualised behaviour?
- What was happening beforehand and what is the context of the play?
- What things are happening in the family's life e.g.: 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 Service describes sexualised behaviour in the following categories. The traffic light analogy is simple yet effective 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.

The following 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 it may be several incidents involving a number of different children.

GREEN Light: Normal Sexual Exploration

- Age appropriate
- 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 family members
- Excited, giggly, rarely feel shame or fear
- Children with special needs may develop at different rates
- Backgrounds/cultures may bring different expectations of sexualised behaviour
- Children explore each other's bodies via games e.g. playing doctor, playing house.

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 Sexualized Behaviour

- Behaviour is not developmentally age appropriate
- 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

- Harmful sexual behaviour is complex
- Behaviours go far beyond developmentally, age-appropriate sexual exploration
- Persistent and repetitive
- May be intrusive
- Can be impulsive and aggressive
- May be in the context of 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 or bullies, 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 an 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?

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. Sexualised behaviour can be complex and create many responses from all involved.

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

When there are Inequalities between the children such as:

- Age difference
- Intellectual functioning
- Emotional development

- Knowledge/Life experiences
- Bullying behaviour
- 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

Reminder: 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 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 behavior he/she shouldn't be doing?

- Children need calm, safe adults to give guidance about 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 or speak with your GP for some advice

What should I do if the school tells me that my child is engaging in sexualized behavior?

- 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 so it won't happen again
- Discuss with the Principal what their policy/process will be
- Discuss with the school if a referral to the STOP Children's Service is the best option

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

- 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
- After the assessment process is completed a final report will be written with recommendations for intervention

What happens after Assessment?

- For some family's 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 Service?

- 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 three months to follow up how your child is doing

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