As a parent or caregiver of a child or youth who has a known or suspected history of being sexually abused, you may feel confused about the impact of the abuse and uncertain about how you can help. It may be comforting to know that most children and youth who have been abused do not go on to abuse others, and many live happy, healthy, successful lives. At the same time, all children and youth who have been abused need to feel safe and loved in nurturing homes. As a parent or caregiver, you can play a central role in your child’s healing process, as well as in “building resilience,” which strengthens your child’s ability to adapt to or cope with adversity.

This factsheet discusses how you can help children and youth in your care by educating yourself about child sexual abuse, understanding the impact of the abuse, establishing guidelines for safety and privacy in your family, and seeking help if you need it. Reading this factsheet alone will not guarantee that you will know what to do in every circumstance, but you can use it as a resource for some of the potential challenges and rewards that lie ahead.
Educating Yourself

One of the most useful steps you can take to help your child is to educate yourself about both sexual abuse and healthy sexual development in children. With this information, you will more easily recognize behaviors possibly associated with past or current abuse and avoid uncertainty if your child or youth shows uncommon sexual behaviors. Most importantly, you may gain confidence in supporting your child or youth through a variety of sensitive questions or situations that may arise. This section covers signs and behaviors that may suggest sexual abuse in children and youth, as well as common healthy sexual development behaviors.

What Is Child Sexual Abuse?

The National Child Traumatic Stress Network (NCTSN) defines child sexual abuse as the following:

— [A]ny interaction between a child and an adult (or another child) in which the child is used for the sexual stimulation of the perpetrator or an observer. Sexual abuse can include both touching and nontouching behaviors. Nontouching behaviors can include voyeurism (trying to look at a child's naked body), exhibitionism, or exposing the child to pornography. Children of all ages, races, ethnicities, and economic backgrounds may experience sexual abuse. Child sexual abuse affects both girls and boys in all kinds of neighborhoods and communities.

For more information, see Child Welfare Information Gateway’s webpage, Identification of Sexual Abuse, at https://www.childwelfare.gov/topics/can/identifying/sex-abuse.

Signs of Sexual Abuse

If you are parenting a child or youth who has been removed from his or her family, you may not know whether he or she has been sexually abused. Child welfare agencies are required to share all known information about a child’s history with his or her caregiver. However, past records of abuse may not exist, and young children or children who are nonverbal may be unable to tell you about being abused. Children and youth with disabilities, many of whom cannot interpret or articulate abusive experiences, are at significantly higher risk of sexual abuse than their peers without disabilities (Child Welfare Information Gateway, 2018). Moreover, many children do not reveal past abuse until they feel safe. For these reasons, foster or adoptive parents or kinship caregivers are sometimes the first to learn that a child has been sexually abused. Therefore, knowing the signs and behaviors of abuse is critical.

For information on how to learn more about your adopted child, refer to Information Gateway’s factsheet, Obtaining Background Information on Your Prospective Adopted Child, at https://www.childwelfare.gov/pubs/f-background/.

Children who have been sexually abused also may act out—that is, express feelings or sexual impulses that are odd, excessive, aggressive, or explicit. Although no one specific sign or behavior proves that sexual abuse has occurred, the following table provides examples of potential warning signs of abuse.
### Table 1. Signs and Behaviors That May Suggest Sexual Abuse in Children and Youth

<table>
<thead>
<tr>
<th>Younger Children</th>
<th>Older Children and Youth</th>
<th>Both Children and Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Imitation of sexual acts with toys or other objects, such as stuffed animals</td>
<td>- Unhealthy eating patterns or unusual weight gain or weight loss</td>
<td>- Explicit sexual knowledge beyond the child’s developmental stage</td>
</tr>
<tr>
<td>- Behavior of a much younger child, like wetting the bed or sucking a thumb</td>
<td>- Anxiety or depression</td>
<td>- Sexual fixation indicated by language or drawings</td>
</tr>
<tr>
<td>- Refusal to take off clothing at appropriate times (e.g., bathing, going to bed)</td>
<td>- Changes in self-care or paying less attention to hygiene</td>
<td>- Nightmares, trouble sleeping, or fear of the dark</td>
</tr>
<tr>
<td>- Sexually transmitted infections (STIs)² (especially in children who have not</td>
<td>- Self-harming behaviors or suicidal thoughts</td>
<td>- Sudden or extreme mood swings (e.g., rage, fear, anger, crying, or withdrawal)</td>
</tr>
<tr>
<td>yet started puberty)</td>
<td>- Alcohol or drug use</td>
<td>- References to a new, older friend</td>
</tr>
<tr>
<td></td>
<td>- Running away</td>
<td>- Unexplained avoidance of certain people, places, or activities</td>
</tr>
<tr>
<td></td>
<td>- STIs or pregnancy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- High-risk sexual³ behavior</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Suddenly having money</td>
<td></td>
</tr>
</tbody>
</table>

These red flags do not always indicate that your child or youth has experienced sexual abuse. Rather, these actions may reflect an underlying issue, such as physical or emotional abuse or unintentional exposure to sexual content. Regardless, a trained professional who specializes in working with children who have been sexually abused should assess whether there is an underlying concern. (See the last section of this factsheet, Seeking Help, for more information.)

The following organizations offer more information on behavioral signs of sexual abuse:

- Stop It Now!  
  [http://www.stopitnow.org/warning_signs_child_behavior](http://www.stopitnow.org/warning_signs_child_behavior)
- The Rape, Abuse and Incest National Network (RAINN)  
  [https://www.rainn.org/articles/warning-signs-young-children](https://www.rainn.org/articles/warning-signs-young-children) and  
  [https://www.rainn.org/articles/warning-signs-teens](https://www.rainn.org/articles/warning-signs-teens)
- Darkness to Light  
- U.S. Department of Justice  

### Healthy Sexual Development in Children and Youth

At each developmental stage, children show a range of healthy sexual behaviors and curiosity. Children’s behaviors and curiosity may develop gradually, based on their development, and may be influenced by factors such as what they observe and the guidance they receive from parents and caregivers. Understanding healthy sexual development can provide a context in which to consider signs and behaviors of possible abuse. The table below lists common behaviors considered healthy for most children and youth, according to their developmental phases.

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Understanding the Impact of Sexual Abuse

If a professional has determined that your child or youth has been sexually abused, or if you suspect that he or she has been abused, understanding the impact of abusive experiences may provide important insights into how sexual abuse has affected your child’s behavior.

Impact of Sexual Abuse on Children and Youth

Sexual abuse violates physical and emotional boundaries. Children and youth who have been abused may see the world as unsafe and adults as manipulative and untrustworthy, or they may lack boundaries and be unaware when they are in unsafe situations. Many factors influence how children think and feel about the abuse they experienced, how it affects them, and how they develop resilience.

Visit http://www.stopitnow.org/ohc-content/what-is-age-appropriate for more information about behaviors common among different ages of children and behaviors that might be uncommon or unhealthy. Seek support by calling the Stop It Now! helpline at 1.888.PREVENT (1.888.773.8368).

### Table 2. Common Sexual Development Behaviors in Children and Youth

<table>
<thead>
<tr>
<th>Younger Children</th>
<th>Older Children and Youth</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Curiosity about their bodies, occasional masturbation in public and private</td>
<td>▪ Adherence to social norms around masturbation, likely occurs in private</td>
</tr>
<tr>
<td>▪ Consensual, playful exploration of their bodies with children of similar age</td>
<td>▪ Shared sexual behaviors with peers of a similar age may take place</td>
</tr>
<tr>
<td>▪ Questions about sexuality, such as “Where do babies come from?”</td>
<td>▪ Interest in adult bodies on TV or in the media</td>
</tr>
<tr>
<td>▪ Lack of inhibition about nudity, particularly under age 5</td>
<td>▪ Understanding of pregnancy, HIV, and other STIs</td>
</tr>
<tr>
<td>▪ Use of slang to describe body parts and jokes about bodily functions</td>
<td>▪ Capacity to learn about intimate, long-term, loving relationships and healthy versus unhealthy relationships</td>
</tr>
</tbody>
</table>

Resilience

According to the American Psychological Association (APA), resilience is the ability to adapt or cope in a positive way to adversity, including trauma, tragedy, threats, and significant stress. It involves behaviors, thoughts, and actions that can be learned over time and nurtured through positive relationships with parents, caregivers, and other adults. Resilience in children and youth who have experienced sexual abuse enables them to thrive despite this traumatic event.

Factors that can contribute to the impact of abuse include the following:

- Relationship of the abuser to the child or youth; extent that the abuse was a betrayal of trust within an important relationship (e.g., the perpetrator is a father versus a neighbor)
- Frequency and duration of abuse; whether penetration occurred
- Child’s age (young children may experience more adverse consequences)
- Child’s emotional and social development at the time of the abuse
- Child’s ability to cope with physical responses to the abuse (e.g., fear and arousal)
- How much responsibility the child or youth feels for the abuse (e.g., not telling an adult about it right away or stopping it somehow)
- Response to the child when he or she reveals the abuse
- Abuser’s use of “friendliness” and efforts to make the child a willing participant
- Abuser’s use of threats of harm or violence, including threats to pets, siblings, or parents
- Abuser’s use of secrecy and threats to withdraw love and affection
- Gender of the abuser being the same as or different from the child (e.g., children and youth are less likely to report sexual activity with the same gender)

Children and youth must understand that they are not to blame for the abuse they experienced. Your family’s immediate response to and ongoing acceptance of your child’s abuse will play a critical role in your child’s ability to heal, build resilience, and lead a healthy life. (See the last section of this factsheet, Seeking Help, for more information about healing from abuse.)

If you are concerned when your child acts out sexually with peers or younger children, respond calmly and take into account your child’s development and the trauma he or she has endured. Children are likely asking for limits to be set and may be unaware of appropriate boundaries.

**Trauma**

Children who have been sexually abused may still be affected by the trauma associated with that experience when they come into care. Trauma is an emotional response to an intense event that threatens or causes harm. Understanding the effects of trauma can help you support your child’s healing and improve family dynamics. For more detailed information about trauma, refer to Information Gateway’s factsheet, Parenting a Child Who Has Experienced Trauma, at https://www.childwelfare.gov/pubs/factsheets/child-trauma/.

Set clear limits and seek appropriate professional help for children whose behavior persists. Learning not to over- or underrespond to situations will help you care for your children with empathy and confidence in your parenting and in the healing process.

Children may respond to sexual abuse in varied ways. Some may act withdrawn and appear timid in social situations, while others may be angry and aggressive. Some may require special attention and firm limits to be set, and others may act out when situations, locations, or everyday items trigger memories of a traumatic event. Triggers occur unexpectedly by a variety of circumstances, and children may not be aware of their triggers. These may include situations as specific as seeing someone who looks like the abuser or as general as being alone in a public restroom or other location that is a reminder of where the abuse took place.

In addition, awareness of cultural differences can offer insights regarding your child’s comfort level with physical space, physical affection, bathing and nudity practices, hygiene, and other factors that can lead to unwanted situations. For example, in cultures where parents do not discuss sexuality directly with their children, or child sexual activity of any type are unacceptable (e.g., children touching themselves), children may carry shame and guilt about their bodies.
Impact of Sexual Abuse on the Family
Parenting a child or youth who has experienced sexual abuse can be stressful to marriages and relationships. It may require couples to be more open with each other and their children about sexuality in general and sexual issues specifically. If one parent is more involved in addressing the issue than another, the imbalance can create difficulties in the parental relationship. If issues emerge, getting professional advice can be helpful.

Help for a Parent Who Was Sexually Abused
If you were (or suspect you may have been) sexually abused as a child, parenting a child or youth who also has been sexually abused may be particularly challenging. Reading this factsheet may have also brought up difficult thoughts and feelings. A list of resource organizations for adults who were abused as children is available on the Information Gateway website at https://www.childwelfare.gov/organizations/?CWIGFunctionsaction=rols:main.dspList&rolType=Custom&RS_ID=67.

In addition, if one parent or caregiver was more in favor of fostering or adopting than the other, general stress may increase, especially when children or youth have a range of behaviors that require attention. Some parents become resentful toward or withdrawn from foster or adoptive children who require a lot of time and energy.

Parents can also feel stress around their child’s siblings, who may not be used to openly sexual language or behavior. If a child or youth is acting out sexually, you may need to talk with their siblings about what they see, think, and feel as well as how to respond. Children may also need guidance about what to say to friends about their sibling’s behaviors. If they see that you are actively managing the situation, they may feel more secure and will worry less, which could help foster open communication within the family.

Establishing Family Guidelines for Safety and Privacy
Establishing family guidelines for safety and privacy is critical, as survivors of sexual abuse are vulnerable to later abuse. Some children and youth who have been sexually abused have heightened sensitivities to situations that involve physical contact, evoke sexual innuendo, or include implicit or explicit sexual content. Practicing some of the following guidelines may make your home a comfortable place for children or youth who have been abused. It may also reduce your vulnerability to abuse allegations by children living with you:

- **Respect every family member’s comfort level with touching, hugging, and kissing.** Encourage children and adults to respect the comfort and privacy of others.
- **Be cautious with playful touch, such as play fighting and tickling.** This type of play may be uncomfortable or trigger memories of sexual abuse.
- **Be mindful that some children who have experienced sexual abuse may not have healthy boundaries.** Teach your children and the entire family about healthy age-appropriate boundaries. (To learn more about communicating respectfully and reassuringly about boundaries, visit http://www.stopitnow.org/ohc-content/tip-sheet-8.)
- **Teach children and youth the importance of privacy.** Remind children to knock before entering bathrooms and bedrooms and model privacy and respect.
- **Keep adult sexuality private.** Adult caretakers need to pay special attention to intimacy and sexuality when young children with a history of sexual abuse are around.
Sexual Messages From the Media

While some children and youth who have experienced sexual abuse become overstimulated or disturbed by sexual content in various media, others use screen time to excessively watch pornography or inappropriate, sexualized Internet videos. For these children or youth, limiting computer time and monitoring social media may encourage discussions on meaningful topics, such as the harmful effects of pornography, dangers of online sexual grooming, and showing respect for themselves and others online. For more information on monitoring social media use, staying safe online, the effects of pornography on children, and tips to help parents promote healthy sexuality see the following resources:

- **Predators 101: An Introduction** (Enough Is Enough) [https://internetsafety101.org/internetpredators](https://internetsafety101.org/internetpredators)

Other family guidelines for safety and privacy include supervising and monitoring children’s play. If you know that your child has a history of sexual abuse, supervise and monitor his or her play with siblings or other children in your home. Some children require constant supervision—they cannot be left alone with younger children for even a moment. Consider placing locks or bells on bedroom doors so you can track a child's movements at night. Other measures, such as audio and visual monitors or installing door alarms, can also help ensure safety.

If your teen has a history of sexual abuse, maintaining open communication is advisable. Knowing who your youth is with and what he or she is doing and setting clear expectations for check-ins can enhance communication and mitigate high-risk behavior. To learn more about positive ways to supervise youth, visit [https://www.cdc.gov/healthyyouth/protective/pdf/parental_monitoring_factsheet.pdf](https://www.cdc.gov/healthyyouth/protective/pdf/parental_monitoring_factsheet.pdf).

Practicing responses to children and youth who exhibit sexual behavior issues prepares you to help children develop self-awareness and learn to respect others. Encourage your children to talk to you or another trusted adult if they want to engage in inappropriate sexual behavior, and let them know it’s OK to talk about the feelings they’re having. For children and youth who have been abused, you can say, “Just like it was not okay for so-and-so to touch your private parts, it’s not okay for you to touch other people’s private parts.” You might also give clear directives like, “We don’t use that language in this house,” or “I’d like you to use different words so that we can really hear what you’re saying.” To learn more about helping your children or youth who have sexual behavior issues, visit [https://www.stopitnow.org/ohc-content/children-and-youth-with-sexual-behavior-problems](https://www.stopitnow.org/ohc-content/children-and-youth-with-sexual-behavior-problems).
If your child has demonstrated inappropriate touching or sexually aggressive behaviors, you may need to take additional steps, such as creating a family safety plan, to help ensure safety for your child as well as his or her peers. Consider how these tips may apply to your situation:

- **With friends.** If your child has known issues with touching other children, you will need to ensure constant supervision by informing other caregivers when he or she is playing with friends, whether at your home or theirs. You should be able to see your child at all times when he or she is with other children. Constant supervision will help to ensure safety for all children and prevent the sexually aggressive behaviors from becoming a habit. Sleepovers may not be a good idea when children have touching issues.

- **At school.** Working closely with the school to set up a safety plan for children or youth with aggressive sexual behaviors ensures an appropriate level of supervision and protects everyone involved. The plan should address concerns such as bathrooms and locker rooms, lunch, recess, transitions between classes, field trips, and other situations. Children or youth who have been sexually abused should not be alone with one teacher. At least one additional teacher should be in the room.

- **In the community.** Setting up a safety plan with coaches, camp counselors, and other adults who are monitoring your child also may be useful. Children with sexual behavior concerns should not be given authoritative roles over other children. If your child has these issues, do not ask him or her to watch over younger children at any time. If your child or youth is focused on specific individuals, make sure he or she is not alone or placed together in small groups.

For an example of a safety plan, visit the Stop It Now! website at https://www.stopitnow.org/sites/default/files/documents/files/section_2.3.pdf.

For more information about visual supervision and creating a safety plan for your family, see the following resources:

- **Safety Planning** (National Center on the Sexual Behavior of Youth) [http://www.ncsby.org/content/safety-planning](http://www.ncsby.org/content/safety-planning)

Even as sexual behaviors diminish, continue to look for changes over time. These sexual behaviors can reemerge as children develop, so do not be discouraged if this occurs. Because sexual behavior may be a reaction to stress, it is also important to remove stressors from the child’s life as much as possible.

For more information about communicating with children or youth who have sexual behavior issues, see Parenting Children or Youth Who Are Sexually Reactive at [https://www.nacac.org/resource/parenting-children-or-youth-who-are-sexually-reactive/](https://www.nacac.org/resource/parenting-children-or-youth-who-are-sexually-reactive/).

For information on working with your child’s therapist, see the Counseling for Parents and Children section of this factsheet on page 9.

### Seeking Help

Responding to the needs of a child or youth who has been sexually abused may involve the entire family and will likely affect family relationships. Mental health professionals (e.g., counselors, therapists, or social workers) can help your family cope with reactions, thoughts, and feelings about the abuse. Look for a mental health professional with a background in sexual abuse, child development, and child trauma. (See the Where to Find and What to Look for in a Mental Health Professional section of this factsheet on page 10 for more information.)

Before agreeing to work with a particular provider, ask questions about the person’s background, experience, and approach to treating children. (Growing evidence supports using certain types of interventions; see pages 9 and 10 for more information.)
Counseling for Parents and Children

Working with a specialized mental health professional as soon as issues arise can help you determine if your child’s behavior is cause for concern. Specialists can also provide guidance in responding to your child’s difficulties; offer suggestions for how to talk with him or her; and offer suggestions for creating structured, safe, and nurturing environments.

Many mental health professionals begin with a thorough assessment exploring how a child or youth functions in various areas of life. The specialist will want to know about the following:

- Past stressors (e.g., history of abuse, frequent moves, and other losses)
- Current stressors (e.g., a medical problem or learning disability)
- Emotional state (e.g., Is the child or youth usually happy or anxious?)
- Coping strategies (e.g., Does the child withdraw or act out when angry or sad?)
- Friendships (e.g., Does the child have challenges making or maintaining friends?)
- Strengths (e.g., Is the youth creative, athletic, organized?)
- Communication skills (e.g., Can the child communicate appropriately for his or her age?)
- Attachments to adults in his or her life (e.g., Does the child seem comfortable around adults?)
- Activities (e.g., time spent watching TV, using the Internet, playing video games)

After a thorough assessment, the professional will decide if the child and family could benefit from therapy. A child’s social worker can help you understand your child’s assessments and select the most appropriate form of therapy. The social worker will assist you in finding a therapist with the right credentials for your child and family as well as help you understand insurance coverage and payment plans.

Not all children who have been abused require therapy. For those who do, the mental health professional will develop a plan tailored to the child and to the family’s strengths. This plan may include one or more of the following types of therapy:

- **Individual therapy.** The style of therapy will depend on the child’s age and the therapist’s training. Some therapists use creative techniques (e.g., art, play, and music therapy) to help children or youth who are uncomfortable talking about their experiences.
- **Group therapy.** Meeting in groups with other children or youth who have been sexually abused or who have developed sexual behavior issues can help children understand themselves; feel less alone; and learn new skills through play, role playing, discussion, and games.
- **Family therapy.** Many therapists will see children and parents together to support positive parent-child communication and to guide parents in learning new skills that will help their children feel better and support healthy behaviors.

Regardless of whether therapy for the family is advised, parents should stay involved in their child’s treatment plan and therapy sessions. Skilled professionals will always seek to involve the parents by asking for and sharing information. Parents can benefit from professionals who understand the parenting needs of a child who has experienced sexual abuse.

Some forms of therapy are designed for dealing with trauma in general and posttraumatic stress disorder (PTSD) specifically.

- **Trauma-Informed Therapy.** This therapy acknowledges the impact of trauma and recognizes that even a child who is not old enough to remember a traumatic event may still experience its effects. Trauma-informed therapy focuses on processing traumatic memories and experiences so they become tolerable. For information about types of trauma-informed therapy, refer to Information Gateway’s factsheet Finding and Working With Adoption-Competent Therapists at https://www.childwelfare.gov/pubs/f-therapist/.
PTSD Therapy. Children and youth who are coping with symptoms of PTSD may be dealing with flashbacks and nightmares. They may be easily frightened and experience outbursts of anger and negative thoughts and distorted feelings. Approaches such as cognitive processing therapy, eye movement desensitization and reprocessing, and group therapy can reduce symptoms of PTSD. For more about PTSD therapy, see https://www.nami.org/Learn-More/Mental-Health-Conditions/Posttraumatic-Stress-Disorder/Treatment.

Several evidence-based programs have been found useful for treating children who have been sexually abused and their families. Websites with descriptions include the following:

- NCTSN includes information about trauma-informed treatment for sexual abuse (https://www.nctsn.org/what-is-child-trauma/trauma-types/sexual-abuse#q3).

Where to Find and What to Look for in a Mental Health Professional

Finding an experienced mental health professional who specializes in treating children who have been sexually abused is key to getting the help your family needs. Some communities have special programs for treating children who have been sexually abused (e.g., child advocacy centers and child protection teams). The organizations and resources below also may provide specialists in your community.

- Stop It Now!
- Child advocacy centers (http://www.nationalcac.org/find-a-cac/)
- Rape crisis or sexual assault centers (https://centers.rainn.org/)
- Child abuse hotlines (See Information Gateway’s State Child Abuse and Neglect Reporting Numbers at https://www.childwelfare.gov/organizations/?CWIGFunctionsaction=rols:main.dspList&rolType=Custom&RS_ID=%205)
- NCTSN maintains a list of its members that specialize in research and/or treatment (https://www.nctsn.org/about-us/network-members)
- Nonprofit service providers serving families of missing or exploited children
- Hospitals with child and adolescent protection centers
- Crime-victim assistance programs in a law enforcement agency or in a prosecutor or district attorney’s office
- Group mental health private practices with a specialization in trauma services
- Family court services, including court-appointed special advocate groups or guardians ad litem (http://www.casaforchildren.org)
- American Psychological Association (https://locator.apa.org/)

Therapy for children who have been sexually abused is specialized work. When selecting a mental health professional, look for the following:

- An advanced degree in a recognized mental health specialty, such as psychiatry (M.D.), psychology (Ph.D. or Psy.D.), social work (M.S.W.), counseling (L.P.C.), marriage and family therapy (M.F.T.), or psychiatric nursing (R.N.)
- Licensure to practice as a mental health professional in your State
Conclusion

As the parent of a child or youth who has been or may have been sexually abused, you have an opportunity to provide comfort and security as well as help him or her build resilience and effective coping strategies for the trauma they have or may have endured. Creating a structured, safe, and nurturing home is the greatest gift that you can give to all of your children. Seek help when you need it, share your successes with your social worker or other community supports, and remember that a healthy relationship with your children allows them to begin and advance the healing process.

References


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