



Parenting a Child Who Has Been Sexually Abused: A Guide for Foster and Adoptive Parents



You may be a foster or adoptive parent of a child who was sexually abused before coming to your home. In some cases, you will not be certain that abuse has occurred, but you may suspect it. You may even be exploring becoming a foster or adoptive parent to a child in the foster care system; many of these children have been abused or neglected—physically, emotionally, or sexually—before coming into care.

What's Inside:

- Educating yourself
- Establishing family guidelines for safety and privacy
- Seeking help



You may feel confused, frightened, and unsure of the impact the sexual abuse of a child may have on your child and family. It is important for you to understand that the term “sexual abuse” describes a wide range of experiences. Many factors—including the severity of abuse as well as others discussed later in this factsheet—affect how children react to sexual abuse and how they recover. Most children who have been abused *do not* go on to abuse others, and many go on to live happy, healthy, successful lives. As parents, you will play an important role in your child’s recovery from childhood abuse.¹

This factsheet discusses how you can help children in your care by educating yourself about sexual abuse, establishing guidelines for safety and privacy in your family, and understanding when and how to seek help if you need it.

Educating Yourself

The first step to helping a child who may have been a victim of sexual abuse is to understand more about how sexual abuse is defined, behaviors that may indicate abuse has occurred, how these behaviors may differ from typical sexual behaviors in children, and how sexual abuse may affect children.

What is Child Sexual Abuse?

Child sexual abuse is defined in Federal law by the Child Abuse Prevention and Treatment Act (42 U.S.C. sec. 5106g(4)) as:

¹ Although the term “parents” is used throughout this factsheet, the information and strategies provided may be equally helpful for kinship care providers, guardians, and other caregivers.

“... the employment, use, persuasion, inducement, enticement, or coercion of any child to engage in, or assist any other person to engage in, any sexually explicit conduct or simulation of such conduct for the purpose of producing a visual depiction of such conduct; or the rape, and in cases of caretaker or inter-familial relationships, statutory rape, molestation, prostitution, or other form of sexual exploitation of children, or incest with children.”

Within this Federal guideline, each State is responsible for establishing its own legal definition of child sexual abuse. For more information, see the Child Sexual Abuse section of the Child Welfare Information Gateway website:
www.childwelfare.gov/can/types/sexualabuse

For legal definitions in each State, see Information Gateway’s *Definitions of Child Abuse and Neglect*:
www.childwelfare.gov/systemwide/laws_policies/statutes/define.cfm

Signs of Sexual Abuse

If you are a foster or adoptive parent to a child from the foster care system, you may not know whether he or she has been sexually abused. Child welfare agencies usually share all *known* information about your child’s history with you; however, many children do not disclose past abuse until they feel safe. For this reason, foster or adoptive parents are sometimes the first to learn that sexual abuse has occurred. Even when there is no documentation of prior abuse, you may suspect abuse because of the child’s behavior.

Determining whether a child has been abused requires a careful evaluation by a

trained professional. While it is normal for all children to have and express sexual curiosity, children who have been sexually abused may demonstrate behaviors that are outside of the range of what might be considered normal. (See table on the following page.) There is no one specific sign or behavior that can be considered proof that sexual abuse has occurred. However, many professionals and organizations agree that you might consider the possibility of sexual abuse when one or several of the following signs or behaviors are present:

- Sexual knowledge, interest, or language that is unusual for the child’s age
 - Sexual activities with toys or other children that seem unusual, aggressive, or unresponsive to limits or redirection
 - Excessive masturbation, sometimes in public, not responsive to redirection or limits
 - Pain, itching, redness, or bleeding in the genital areas
 - Nightmares, trouble sleeping, or fear of the dark
 - Sudden or extreme mood swings: rage, fear, anger, excessive crying, or withdrawal
 - “Spacing out” at odd times
 - Loss of appetite, or difficulty eating or swallowing
 - Cutting, burning, or other self-mutilating behaviors as an adolescent
 - Talking about a new, older friend
 - Unexplained avoidance of certain people, places, or activities
- An older child behaving like a much younger child: wetting the bed or sucking a thumb, for example
 - Suddenly having money

Again, these are only *signs* of a potential problem; they must be evaluated by a professional along with other information. The following organizations contributed to the above list and offer more information about behavioral signs of sexual abuse on their websites:

- Stop It Now!
www.stopitnow.com/warnings.html#behavioral
- Childhelp®
www.childhelp.org
- National Center for Missing & Exploited Children
www.missingkids.com

Healthy Sexual Development in Children

Children’s sexual interest, curiosity, and behaviors develop gradually over time and may be influenced by many factors, including what children see and experience. Sexual behavior is not in and of itself a sign that abuse has occurred. The table on the next page lists some of the sexual behaviors common among children of different age groups, as well as some behaviors that might be considered less common or unhealthy.²

² The list is adapted from the Stop It Now! publication, *Prevent Child Sexual Abuse: Facts About Those Who Might Commit It* (2005). Additional information was provided by Eliana Gil, Ph.D., RPT-S, ATR, specialist, trainer, and consultant in working with children who have been abused and their families. See the website: www.elianagil.com

Sexual Behaviors in Children	
Preschool (0 to 5 years)	
<p>Common:</p> <ul style="list-style-type: none"> • Sexual language relating to differences in body parts, bathroom talk, pregnancy, and birth • Self-fondling at home and in public • Showing and looking at private body parts 	<p>Uncommon:</p> <ul style="list-style-type: none"> • Discussion of sexual acts • Sexual contact experiences with other children • Masturbation unresponsive to redirection or limits • Inserting objects in genital openings
School Age (6 to 12 years)	
<p>Common:</p> <ul style="list-style-type: none"> • Questions about menstruation, pregnancy, sexual behavior • “Experimenting” with same-age children, including kissing, fondling, exhibitionism, and role-playing • Masturbation at home or other private places 	<p>Uncommon:</p> <ul style="list-style-type: none"> • Discussion of explicit sexual acts • Asking adults or peers to participate in explicit sexual acts
Adolescence (13 to 16 years)	
<p>Common:</p> <ul style="list-style-type: none"> • Questions about decision-making, social relationships, and sexual customs • Masturbation in private • Experimenting between adolescents of the same age, including open-mouth kissing, fondling, and body rubbing • Voyeuristic behaviors • Sexual intercourse occurs in approximately one-third of this age group • Oral sex has been found to occur in 50 percent of teens ages 15 and older. 	<p>Uncommon:</p> <ul style="list-style-type: none"> • Sexual interest in much younger children • Aggression in touching others’ genitals • Asking adults to participate in explicit sexual acts

For a more complete list, or if you have any questions or concerns about your child’s sexual behaviors, call the Stop It Now! toll-free helpline at 1.888.PREVENT (1.888.773.8368).

Factors Affecting the Impact of Sexual Abuse

If you suspect, or a professional has determined, that a child in your care has been a victim of sexual abuse, it is important to understand how children may be affected.

All children who have been sexually abused have had their physical and emotional boundaries violated and crossed. With this violation often comes a breach of the child's sense of security and trust. Abused children may come to believe that the world is not a safe place and that adults are not trustworthy.

However, children who have experienced sexual abuse are not all affected the same way. As with other types of abuse, many factors influence how children think and feel about the abuse, how the abuse affects them, and how their recovery progresses. Some factors that can affect the impact of abuse include:

- The relationship of the abuser to the child and how much the abuse caused a betrayal of trust
- The abuser's use of "friendliness" or seduction
- The abuser's use of threats of harm or violence, including threats to pets, siblings, or parents
- The abuser's use of secrecy
- How long the abuse occurred
- Gender of the abuser being the same as or different from the child

- The age (developmental level) of the child at the time of the abuse (younger children are more vulnerable)
- The child's emotional development at the time of the abuse
- The child's ability to cope with his or her emotional and physical responses to the abuse (for example, fear and arousal)
- How much responsibility the child feels for the abuse

It is very important for children to understand that they are not to blame for the abuse they experienced. Your family's immediate response to learning about the sexual abuse and ongoing acceptance of what the child has told you will play a critical role in your child's ability to recover and go back to a healthy life. (See the last section of this factsheet, Seeking Help, for more information about healing from abuse.)

Establishing Family Guidelines for Safety and Privacy

There are things you can do to help ensure that any child visiting or living in your home experiences a structured, safe, and nurturing environment. Some sexually abused children may have a heightened sensitivity to certain situations. Making your home a comfortable place for children who have been sexually abused can mean changing some habits or patterns of family life. Incorporating some of these guidelines may also help reduce foster or adoptive parents' vulnerability to abuse allegations

by children living with them. Consider whether the following tips may be helpful in your family's situation:

- **Make sure every family member's comfort level with touching, hugging, and kissing is respected.** Do not force touching on children who seem uncomfortable being touched. Encourage children to respect the comfort and privacy of others.
- **Be cautious with playful touch, such as play fighting and tickling.** These may be uncomfortable or scary reminders of sexual abuse to some children.
- **Help children learn the importance of privacy.** Remind children to knock before entering bathrooms and bedrooms, and encourage children to dress and bathe themselves if they are able. Teach children about privacy and respect.
- **Keep adult sexuality private.** Teenage siblings may need reminders about what is permitted in your home when boyfriends and girlfriends are present.
- **Be aware of and limit sexual messages received through the media.** Children who have experienced sexual abuse can find sexual content overstimulating or disturbing. It may be helpful to monitor music and music videos, as well as television programs, video games, and movies containing nudity, sexual activity, or sexual language. Limit access to grown-up magazines and monitor children's Internet use.

If your child has touching problems (or any sexually aggressive behaviors), you may

need to take additional steps to help ensure safety for your child as well as his or her peers. Consider how these tips may apply to your own situation:

- **With friends.** If your child has issues with touching other children, you may want to ensure supervision when he or she is playing with friends, whether at your home or theirs. Sleepovers may not be a good idea when children have touching problems.
- **At school.** You may wish to inform your child's school of any inappropriate sexual behavior, to ensure an appropriate level of supervision. Often this information can be kept confidential by a school counselor or other personnel.
- **In the community.** Supervision becomes critical any time children with sexual behavior problems are with groups of children, for example at day camp or after-school programs.

In any case, keep the lines of communication open, so children feel more comfortable turning to you with problems and talking with you about *anything*—not just sexual abuse. Remember however, that sexual abuse is difficult for most children to disclose even to a trusted adult.

For more information about developing a safety plan for your family, see:

- *Create a Family Safety Plan*
Stop It Now!
www.stopitnow.org/downloads/SafetyPlan.pdf

Seeking Help

Responding to the needs of a child who has been sexually abused may involve the whole family and will likely have an impact on all family relationships. Mental health professionals (for example, counselors, therapists, or social workers) can help you and your family cope with reactions, thoughts, and feelings about the abuse.

Impact of Sexual Abuse on the Family

Being an adoptive or foster parent to sexually abused children can be stressful to marriages and relationships. Parenting in these situations may require some couples to be more open with each other and their children about sexuality than in the past. If one parent is more involved in addressing the issue than another, the imbalance can create difficulties in the parental relationship. A couple's sexual relationship can also be affected, if sex begins to feel like a troubled area of the family's life. When these problems emerge, it is often helpful to get professional advice.³

Your child's siblings (birth, foster, or adoptive) may be exposed to new or focused attention on sexuality that can be challenging for them. If one child is acting out sexually, you may need to talk with siblings about what they see, think, and feel, as well as how to respond. Children may also need to be coached on what (and how much) to say about their sibling's problems to their friends. If your children see that you

are actively managing the problem, they will feel more secure and will worry less.

When one child has been sexually abused, parents often become very protective of their other children. It is important to find a balance between reasonable worry and overprotectiveness. Useful strategies to prevent further abuse may include teaching children to stand up for themselves, talking with them about being in charge of their bodies, and fostering open communication with your children.

Counseling for Parents and Children

Talking with a mental health professional who specializes in child sexual abuse as soon as problems arise can help parents determine if their children's behavior is cause for concern. Specialists can also provide parents with guidance in responding to their children's difficulties and offer suggestions for how to talk with their children. A mental health professional may suggest special areas of attention in family life and offer specific suggestions for creating structured, safe, and nurturing environments.

To help a child who has been abused, many mental health professionals will begin with a thorough assessment to explore how the child functions in all areas of life. The specialist will want to know about:

- 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 usually happy or anxious?)

³ For more information about sustaining a healthy marriage, visit the National Healthy Marriage Resource Center website: www.healthymarriageinfo.org

- Coping strategies (e.g., Does the child withdraw or act out when angry or sad?)
- The child's friendships
- The child's strengths (e.g., Is the child creative, athletic, organized?)
- The child's communication skills
- The child's attachments to adults in his or her life

After a thorough assessment, the mental health professional will decide if the child and family could benefit from therapy. Not all abused children require therapy. For those who do, the mental health professional will develop a plan tailored to the child and family's strengths and needs. This plan may include one or more of the following types of therapy:

- **Individual therapy.** The frequency and duration of therapy can vary tremendously. The style of therapy will depend on the child's age and the therapist's training. Some therapists use creative techniques (for example, art, play, and music therapy) to help children who are uncomfortable talking about their experiences. Other therapists use traditional talk therapy or a combination of approaches.
- **Group therapy.** Meeting in groups with other children who have been sexually abused can help children understand themselves; feel less alone (by interacting with others who have had similar experiences); and learn new skills through role plays, discussion, games, and play.
- **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 behave appropriately.

Whether or not family therapy is advised, it is vital for parents to stay involved in their child's therapy or other kinds of treatment. Skilled mental health professionals will always seek to involve the parents by asking for and sharing information.

Your Child Welfare Agency

If you are a foster parent or seeking to adopt a child, you may wish to talk with your social worker about what you discover about your child's history and any behaviors that worry you. Sharing your concerns will help your social worker help you and your family. If your child exhibits problematic sexual behaviors, be aware that you may also be required to report these to child protective services in order to comply with mandated reporting laws in your jurisdiction.⁴

Many adoptive parents also call their local child welfare agency to seek advice if their child shows troubling behaviors. Child welfare workers are often good sources of information, can offer advice, and are familiar with community resources. Adoption agencies may also be able to provide additional postadoption services or support to adoptive parents who find out about their child's history of sexual abuse after the adoption is finalized. For more information about postadoption services, see the Information Gateway web section: www.childwelfare.gov/adoption/postadoption/

⁴ See Information Gateway's *Mandatory Reporters of Child Abuse and Neglect* at www.childwelfare.gov/systemwide/laws_policies/statutes/manda.cfm

What to Look for in a Mental Health Professional⁵

Finding a knowledgeable and experienced mental health professional is key to getting the help your family needs. Some communities have special programs for treating children who have been sexually abused, such as child protection teams and child advocacy centers. You may also find qualified specialists in your community through the organizations noted below.

- Child advocacy centers
- Rape crisis or sexual assault centers
- Local psychological or psychiatric association referral services
- Child abuse hotlines (See the Information Gateway publication, *Child Abuse Reporting Numbers*:
www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172)
- Child protective services (CPS) agencies
- Nonprofit service providers serving families of missing or exploited children
- University departments of social work, psychology, or psychiatry
- Crime victim assistance programs in the law enforcement agency, prosecutor's, or district attorney's office
- Family court services, including court appointed special advocate (CASA) groups or guardians *ad litem*

⁵ The following information is adapted from the National Center for Missing & Exploited Children's *Parental Guidelines in Case Your Child Might Someday Be the Victim of Sexual Exploitation*: www.missingkids.com

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.), or psychiatric nursing (R.N.)
- Licensure to practice as a mental health professional in your State (Some mental health services are provided by students under the supervision of licensed professionals.)
- Special training in child sexual abuse, including the dynamics of abuse, how it affects children and adults, and the use of goal-oriented treatment plans
- Knowledge about the legal issues involved in child sexual abuse, especially the laws about reporting child sexual victimization, procedures used by law enforcement and protective services, evidence collection, and expert testimony in your State

Conclusion

Many people want to help children who have been sexually abused, but many struggle with feelings of anger and disgust as they learn more about the abuse. You may need help to resolve these struggles and to move toward acceptance of your child's background.

If you were (or suspect you may have been) sexually abused as a child, dealing with your

own child's difficulties may be particularly challenging, and reading this factsheet may have brought up difficult thoughts and feelings. Your courage in facing these issues and tackling a personally difficult and painful subject can actually be helpful to your children by demonstrating to them that sexual abuse experiences can be managed and overcome.

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, and remember that a healthy relationship with your children allows them to begin the recovery process. It is in the parent-child relationship that your child learns trust and respect, two important building blocks of your children's safety and well-being.

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