

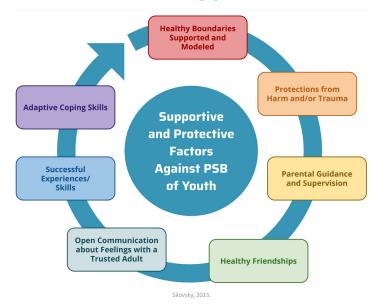
## PSB-CY: Clinical Assessment and Treatment Overview Course Series | Course 1: Clinical Assessment of Children and Youth with Problematic Sexual Behavior

## **Protective Factors and Vulnerability Factors**

Protective factors, as well as areas of vulnerability, are essential to assess when developing safety, supervision, and treatment plans for children and youth with problematic sexual behavior.

**Protective factors** are areas of strength and support that can facilitate progress and healthy decision-making. **Vulnerabilities** are areas where the child needs additional structure, resources, support, and supervision. Below provides information about areas of protective factors and vulnerabilities to consider when working with children with PSB and their families.

### **Protective and Supportive Factors**



Read the details below on key protective factors that can bolster the prevention of the development of further PSB in children and youth.

**Healthy Boundaries Supported and Modeled** | Having adults who model and support: Healthy boundaries, Open communication, Development of healthy interpersonal relationships, and Safe and appropriate use of technology.

Protection from harm and trauma is enhanced when children are raised where healthy boundaries are modeled and supported, they are protected from further harm or trauma. Harm and trauma cannot always be prevented (such as in the case of hazards and/or natural disasters). Caregivers provide ongoing guidance and supervision, and (maybe most importantly) are able to have open communication about sensitive topics. The children know and feel they can go to their caregivers with questions and be heard and supported. This support helps them develop good coping skills, learn other important life skills, and have successful life experiences.

**Protections from Harm and/or Trauma** | Promote safety and stability; Abuse prevention education; Sexual Behavior Rules, bodily autonomy, assertiveness skills, and consent.

For children and youth to thrive and heal, they must first and foremost be safe. Homes and communities that are safe and stable are generally consistent and predictable and free of violence and other significant stressors. Adults cannot always protect children and youth from all forms of traumas and harm (for example, natural disasters, illness, and loss). When they have experienced harm and trauma, they need to be protected from further harm or trauma, as well as considerations of past trauma, to facilitate their well-being. Caregivers are able to be aware of triggers and reminders of past traumas and provide protection and support.

It's important for parents and caregivers to remember how scary the problematic sexual behavior and its aftermath are for the children, both those impacted and exhibiting. Fear and worry may be related to the age and size difference of the children, and the use of threats, coercion, aggression, or force and should be considered when assessing for trauma. Adults can create safe spaces by having

warm and honest conversations that convey safety and by establishing safety plans that provide necessary monitoring and supervision.

Children who have exhibited PSB have high rates of trauma history, as well as a risk for exposure to future trauma(s). It is important for these children and youth to have adults in their lives that protect them from scary or traumatic events, including protecting them from people who have caused harm, making safe choices of alternative caregivers and activities, monitoring media coverage and exposure of frightening and potentially traumatic events, such as wars, bombings, or shootings; and closely supervising what a child is exposed to on the internet, including social media, what they watch on television, in the movies or games or are exposed to in music.

**Parental Guidance and Supervision** | Sensible rules with clear rewards and timely consequences; Effective motivators and labeled praise and support; Responding appropriately to problem behaviors.

Children are not born into the world already knowing society's rules and how to make good decisions. Having parents, caregivers, and other trusted adults monitor and supervise helps redirect behavior, as well as guide and teach respectful behavior. In addition to watchfulness and guidance, when home and community rules are broken, then the provision of reasonable, developmentally appropriate consequences is needed.

Healthy parental guidance may include involved parents that know where kids are and what they are doing; parents that communicate accurate information to youth about their bodies, and parents that communicate age-appropriate, respectful behavior. This includes modeling and providing guidance and clear, positive messages about modesty, boundaries, and privacy with the youth. Also, it requires safeguards put in place for the supervision of other children in the home, at school, and in the community.

**Healthy Friendships** | Good communication, including active listening and responding; Trust; Support; Kindness, and compassion; Healthy peer relationships; Shared goals and life experiences.

A protective factor repeatedly found in resilience research is having a good friend who makes good decisions. Everyone benefits from a buddy who helps keep them out of trouble and can represent positive, age-appropriate platonic relationships. Having at least one close relationship with a peer also helps with feelings of belonging. As does getting children involved in activities of shared interest where they can be around peers and experience successful friendships. Some children will need coaching and guidance on how to build friendships.

**Open Communication about Feelings with a Trusted Adult** | Positive communication skills; Active listening; Perspective taking; Empathy and compassion; Curiosity and non-judgment.

It is important for children and youth the have trusted adults to be available to listen attentively and respond sincerely to concerns, worries, questions, and successes, and create a dialogue together. Trusted adults can include parents, caregivers, other family members, and teachers; building healthy supportive relationships with caring adults; adults reinforcing accurate information to youth about their bodies and age-appropriate, respectful behavior. Open communication requires the ability of informed adults to talk openly to children about relationships, intimacy, and sexual-education matters.

Trusted adults can include parents, caregivers, other family members, academic and art teachers, coaches, and other caring adults. Children need to build healthy supportive relationships with caring adults who attentively listen and provide compassion.

Trusted adults need to be empowered to reinforce accurate, healthy, developmentally appropriate, affirming information to youth about their bodies and age-appropriate, respectful behavior. Open communication requires the ability of informed adults to talk openly to children about relationships, intimacy, identity, and sexual education matters and also helps them to build skills for healthy interpersonal relationships and age-appropriate intimacy as they grow up.

**Successful Experiences and Skills** | Finding things they can succeed or excel at; Opportunities to build and enhance talents; Celebrating skills and interests.

It is paramount for children and youth to develop self-confidence and a well-founded belief in their ability to succeed, even in spite of times of adversity and adverse experiences. They can be assisted in identifying things they are good at and enjoy, things they find interesting or may like to try, and, depending on their age and circumstances, their goals for the future. It is important to help in supporting children and youth to experience and feel successful in prosocial endeavors and utilize the positive new skills they have learned or those they have developed. These experiences can be in the home, school, and community.

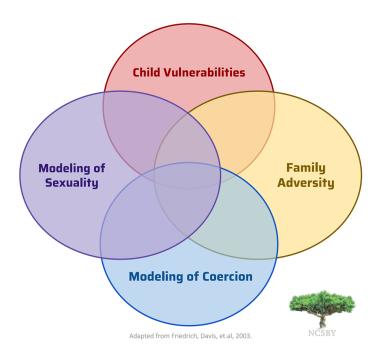
# **Adaptive Coping Skills** | Communication about feelings; Emotional recognition and regulation; Problem-solving and impulse control ability.

Having a repertoire of strategies to cope with stress facilitates well-being. Coping skills include abilities and strategies to calm down, explore different perspectives of situations, identify and transition to other options, have an optimistic approach, and access support from others.

Delay of gratification is a coping skill, but youth and even adults today are very used to instant gratification. Further, it is important to recognize that not being successful does not equal failure. Teaching coping skills for dealing with disappointment, rejection, and other difficult situations are good supportive and protective factors. Providing support in the home, school, and community to adaptively cope with stressful circumstances facilitates children's growth and well-being.

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#### **Vulnerabilities and Risk Factors**



Read the details below on key vulnerability factors that impact the development of PSB in children and youth.

**Modeling of Sexuality and/or Sexual Behavior and Abuse** | Sexual abuse (including contact and noncontact abusive sexual behavior); Modeling and exposure to inappropriate or abusive sexual behavior; Exposure to sexual imagery or other sexual content.

Modeling of sexuality for children and youth includes sexual abuse, but also poor family boundaries, nudity, and early exposure to sexually explicit material and behavior. Early, frequent, and/or severe sexually abusive experiences (e.g., penetration, incestuous, occurring when the child is very young, or multiple perpetrators, long duration, and experiencing other physical abuse) may be especially traumatic. Sexual abuse in the preschool years, and repeated sexual abuse, particularly with multiple perpetrators or intrusive acts, leads to a greater risk of developing PSB. However, although child sexual abuse can be an important risk factor for developing and exhibiting problematic sexual behavior, most children who have been sexually abused do not exhibit problematic sexual behavior. Further, many children and youth with PSB do not have a child sexual abuse

history. Those children with PSB and a sexual abuse history may be more vulnerable and demonstrate repeated PSB.

It is helpful to think about the framework of the child's perception. If they are young when abuse occurs repeatedly or if multiple people treat them in a sexualized manner, then they are more likely to perceive the behavior as something to repeat. Being raised in a home that involves exposure to significant sexualized materials and/or sexual activities by adults, either live or on television or in the media, without apparent care for the presence of the children, or guidance regarding what is appropriate, can impact their perceptions about relationships and their sexual behavior.

## **Modeling of Coercion** | Physical abuse; Harsh parenting practices; Domestic violence; Peer violence; Community violence.

In comparison with sexual abuse trauma, models of coercive acts within the family system have actually been found to have a stronger relationship to developing disruptive behaviors overall and to problematic sexual behavior of children specifically.

Acts of coercion may include physical abuse (PA), witnessing domestic violence (DV), experiencing harsh parenting practices, and/or community violence. Being raised in an environment that demonstrates poor emotional regulation, aggressive responses, and behaviors of taking what you want, with little concern for others, impacts the child's development of empathy, emotional regulation skills, and behavior control.

# **Child Vulnerabilities** | Behavior problems; Developmental and verbal delays; Impulse control and attention problems; Struggles understanding social cues.

Many children have sufficient protective factors that help them be resilient. Children can experience adversity and still cope and function quite well through support and learning and using healthy coping skills. When children do not have access to healthy coping skills and positive support, they are more likely to struggle in life overall. And in particular, when they have traumatic experiences.

Some children struggle with following home and school rules over all. Having learning disabilities or cognitive disabilities, struggling with impulse control and attention span, and being on the autism spectrum, all can impact social development, social skills, and healthy coping strategies – and thus, impact sexual development and increase the risk for problematic sexual behavior. How the family, school, and community identify the child's needs and provide guidance and support impacts how these potential vulnerabilities ultimately affect the child's behaviors.

**Family Adversity** | Factors that hinder parental guidance and supervision; Single parenthood; Low-socioeconomic status (SES); Stress/trauma; Parental depression and substance use.

Children are not born knowing and understanding the rules of society. They learn through the support and guidance of their parents, caregivers, teachers, and other adults in their lives. When adversity impacts the ability of the caregivers to be there to guide and support their children, this can impact the children's ability to demonstrate good behavior and decisions.

When caregivers are depressed, struggling with addiction, working demanding or multiple jobs, or parenting alone or without support (parental capacity), these additional factors can impact the parent's ability to be there when their children are acting in curiosity or testing boundaries. When not available, rather than guiding the children to appropriate behavior, inappropriate behaviors may continue and escalate.

Further, repeated changes in caregivers, separations, and frequent family moves can interfere with developing healthy attachments which are important for intimacy and age-appropriate, safe, and respectful sexual relationships. This includes single parenting, low self-esteem, parent low education, depression, isolation, substance abuse, multiple stressors, harsh parenting practices, domestic violence, and violence in the community.

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#### Remember

Vulnerability and protective factors change over the course of a child's development as they grow and over time as their family, school, and community change. It is critical to not only asses the children, family, and communities' current vulnerabilities and protective factors, but also to remember to reassess over time and modify the plan accordingly.

<u>Adapted from:</u> Friedrich, W. N., Davies, W., Feher, E., & Wright, J. (2003). Sexual Behavior Problems in Preteen Children. *Annals of the New York Academy of Sciences*, 989(1), 95-104. Retrieved from: <a href="https://doi.org/10.1111/j.1749-6632.2003.tb07296.x">https://doi.org/10.1111/j.1749-6632.2003.tb07296.x</a>.

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