The Adoptive Families Association of British Columbia

> focus on adoption

Child Sexual Abuse: a guide for adoptive parents
Sexual abuse of children, a topic for all parents

Sexual abuse of children is a difficult subject to learn about, but, as Siobhan Rowe explains, there are compelling reasons why all adoptive parents should educate themselves about this important topic.

Preparing this publication has involved some of the most painful research I have ever done. At times, I had to stop reading because the details were so upsetting.

In this supplement, I have spared you many of those horrible details. Instead, I have concentrated on information that, should you parent a child who has experienced sexual abuse, will help. Hopefully, your child will not fall into this category. However, if your child has lived in homes other than yours, you can’t guarantee that this has not been the case.

It happens everywhere

Reliable estimates of the number of children who have been in government care and who have experienced sexual abuse are difficult to obtain, but the general consensus seems to be between 50 and 80%. The fact that we don’t have figures for internationally adopted children, doesn’t mean that sexual abuse doesn’t happen in some orphanages, refugee camps, or in foster homes—sadly, it does. We also know that children who are most often moved out of a foster or adoptive family are children who act out sexually. This is particularly tragic because sexual acting out is often a sign that a child is ready to bond.

The good news is that almost all children can recover from being sexually abused. Though some will require professional help, there is a tremendous amount that parents can also do. Having an understanding, supportive family is one of the biggest factors in a child’s recovery.

Even if you know that your child has not been abused there is information here on sexual exploitation which is essential reading for all parents. The children who are most likely to become victims are kids who feel detached, alone, or isolated—all feelings that many foster kids and older adopted children often have.

Though the media scare us about stranger abduction and abuse, most children are in greatest danger within their own homes and communities.

For all these reasons, we must accept that knowledge about sexual abuse is vital for all parents, especially adoptive parents.

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Sexual abuse is something that happens to a child, it’s not a diagnosis.

Child sexual abuse is any forced or tricked sexual contact by an adult or older child with a child. Usually, the adult or older child is in a position of power or authority over the victim. Physical force is generally not used. Even tiny infants are sexually abused.

Siblings who are aware of a sibling’s victimization, but are not abused themselves, may also suffer many of the same effects as an abused child.

Generally, sexual abuse is divided into two types:

Contact sexual abuse
- Touching and fondling genital area
- Touching and fondling breasts or breast area
- Forcing touching of other’s genitals
- Vaginal or anal intercourse
- Oral sex

Non-contact sexual abuse
- Online luring to meet for a sexual encounter
- Invitation to sexual touching online or offline
- Exposure to sexually explicit material or sexually explicit acts
- Flashing genitals
- Child pornography
- Sexually intrusive questions or comments
- Being asked to masturbate or watch others masturbate
Some sexually abused children don’t realize that such behaviour is not typical until they live in a home where it doesn’t happen.

abuse signals

The following signs are not necessarily indicators that sexual abuse has occurred; they could be caused by other factors. It is important to take into account the child’s stage of development and any learning disabilities he or she may have. If you suspect your child has been sexually abused, seek professional advice.

- Scratches, bruises, itching, rashes, especially in the genital area
- Blood or discharge in bedding or clothes
- Advanced sexual knowledge for child’s age
- Sexually provocative behaviour towards adults or peers
- A constant fear of harm and extreme fear of being alone
- Pseudo-mature behaviour
- Regressed behaviour (e.g. wetting the bed)
- Excessive masturbation, masturbation in public places, difficulty with being re-focused to another behaviour
- Poor relationships with peers; dropping friends
- Fear of a particular person, place or thing
- Sudden or extreme changes in behaviour
- Eating disorders (overeats, under eats)
- Self-mutilation; suicide ideas or attempts
- Using drugs or alcohol; becoming promiscuous; being prudish
- Sexually transmitted diseases; pregnancy; prostitution
- Fire-setting; sadistic play; lying, stealing
- Parents or caregivers act in sexual ways regardless of the presence of children.
- A home where sex is paired with aggression or sex is used in exchange for drugs or to avoid violence.
- A home where the child has been forced to observe genitalia or sexual acts or the child has been photographed or observed for the sexual pleasure of others and where the child has been directly abused or been forced to abuse other children in front of others.
- When the parent uses the child to fulfill his or her emotional needs which may be sexualized, or parent shares emotional and sexual problems with child.

recovery factors

- The age of the child when the abuse began. Children abused very early in life may carry body or sensory memories of the abuse, but will not have the words to express their rage.
- The relationship of the primary perpetrator to the child. A child’s trust of his or her primary caretaker is central to their relationship. Therefore, when abuse occurs in this context, the betrayal is intensified.
- How long the abuse occurred. The longer the abuse, the more likely the victim is to feel that he or she should have been able to stop it and thus he or she feels more “guilty.”
- Whether there was violence involved. In most cases where the abuse included violence or potential violence (that is, the victim was made to understand that without cooperation there would be violence) the child will have experienced additional trauma.
- The child who had someone to tell about the abuse will suffer less than the child who had no one to tell.
- Ego development of the child at the time of the abuse. If the child has a firmly established concept of his or her sexual identity, the abuse will have less impact.
- If the child has a positive self-concept, that is, if he or she feels valued at the time the abuse occurred, there will be fewer repercussions.

Source: www.childwelfare.gov
natural and healthy sexual behaviour untangled

There is a continuum of sexual behaviours in children from natural and healthy, to children who demonstrate sexualized behaviour, to those who molest other children. Most child sexual behaviour lies at the healthy end of the scale.

Children like to gather information about everything, including their bodies, gender roles and behaviour.

Children involved in natural and healthy sexual play are of similar age, size, and development, and they do it on a voluntary basis in a light-hearted and spontaneous way. This behaviour tends to occur during several periods of childhood. If children are discovered in sexual play, and are asked to cease, they usually do, at least when adults are around.

According to Toni Cavanagh Johnson, children vary in how interested they are in this sort of exploration—some have no interest, others a little, some far more.

Factors that might influence the type and frequency of sexual behaviours in children can be stress in the family, the parents’ attitude to sex, religious beliefs, the neighbourhood in which they live, exposure to television shows with adult content, age of brothers and sisters, and cultural norms about sex and sexuality.

Cavanagh Johnson says that children with sexual behaviour problems can be divided into three groups: sexually reactive; children who engage in extensive, mutual sexual behaviours; and children who molest other children.

Sexually reactive

The sexual behaviour of these children is often conducted in front of adults and they can be distracted from doing it, though it will often reoccur. The behaviour is often self-directed but may be directed at adults or other children. When it happens with other children, no coercion is used. Cavanagh Johnson says that “Confusion, fear and anxiety about sex, which is driven by the child’s history, is fundamental to this type of sexual behaviour.” Some of these children have been sexually abused, some not. This is the largest group among the three.

Extensive mutual sexual behaviour

The sexual behaviours of these children may include the full spectrum of adult sexual behaviours and will be frequent. These children relate best to other children and are often chronically hurt, abandoned and distrustful of adults. They feel isolated and unattached. Cavanagh Johnson explains that the sexual behaviour can be hard to stop because it gives the children a sense of feeling emotionally safer. These kids tend to find other children who also feel “lost” and will collude to avoid detection by adults. They may use persuasion with other kids, but they do not force them to participate.

Children who molest

With these children, there is intense sexual confusion and their behaviours are frequent and grow in intensity. Though they do not generally force their victims, they use bribery, trickery, manipulation, and emotional and physical coercion. Their victims can be the same age, younger or older, and may have been selected because of some vulnerability like developmental delays, social isolation or emotional neediness. These children generally have problems in all areas of their lives and need specialized help.

Can these kids be helped?

Yes, these behaviours are learned; they can be unlearned. Living in a sexually healthy, safe environment is essential for these children. According to Cavanagh Johnson, with a thorough assessment to help understand the causes of such behaviour and cognitive behaviour therapy, most children can be helped in a few months. Associating children who molest with adult offenders is not appropriate—most of these children do not experience sexual arousal.


- Kids who have been sexually abused may believe that their new adoptive parents will eventually want to have sex with them. Therefore, they need to be told in plain language that this will not happen.
- Make it clear that, in your house, you do not have sex with children and you meet our own sexual needs behind closed doors. If an older child acts out sexually with one of the parents, tell the child that “there is nothing you can do that will make either of us respond sexually to you.”
- If you know that a child is being physically or sexually abused (or you suspect it) you are obliged to report it to the police or the Ministry of Children and Family Development—it’s the law.
- Kids labelled with behavioural disorders often suffer from post-traumatic stress disorder as a result of abuse. Parents need to know exactly what happened in the child’s past to help them heal. Love is not enough to heal children from the trauma of sexual abuse.
I met Carol Evans at high school. She was a friendly, confident girl with lots of charisma. Though I didn’t realize it at the time, Carol kept a horrible secret.

I told her that if she told her parents, who already had a troubled relationship, about the abuse, it would mean that they would split up. She often skipped school largely as a way to avoid him—she dreaded seeing his car parked outside the school gates.

Escape and discovery
Looking back on it, Carol thinks she tried to use her, often older, boyfriends to shield herself from this uncle. She thinks she chose her husband partly because he was the same age as her abuser and offered the promise of protection from him.

As an adult, Carol did well in whichever job she took. She and her husband prospered financially, they had another child, and, by the time Carol was forty, they were very well off.

To celebrate her fortieth birthday, Carol went out and bought herself a high end Mercedes sports car. The next day, she couldn’t get out of bed; she literally couldn’t walk without help. This continued for days. Eventually, her husband and daughter insisted on calling in a GP

There was nothing physically wrong with Carol and, when she could finally move, she was sent to see a therapist. It took a year of intense therapy for Carol to recover and to recognize that, though she came from a well-off middle class family, she had been a neglected child, which had left her vulnerable to her uncle’s sexual abuse.

Carol thinks she bought the sports car because it was the same type as that driven by her uncle and having it made her feel that she had matched him in power. In fact, the car triggered in her the years of hidden trauma that she was carrying around as a result of her neglect and his sexual abuse.

Looking back on it, Carol’s advanced knowledge of sex, her disinterest and frequent absences from school, her early bid for freedom from her uncle through her boyfriends and the man she married, were all signs of a child in trouble. The problem was, no one, not her parents, teachers, or any other adult that she knew, read those signals. Carol was very much on her own and it affected her life in every possible way. Though I was witness to all this, I was only a kid too and never put the pieces together. Even if I had, I probably wouldn’t have known what to do. In those days, kids didn’t have the education or language to recognize or talk about sexual abuse. As is still often the case today, that silence is the biggest ally of sexual abusers.

Happy endings
Carol’s story has a happy ending. She is still happily married, she’s now a grandmother, and she retired early and enjoys a luxurious life.

Although Carol and her cousin, who was also being abused by the uncle, eventually reported the abuse, their abuser was never charged. He and his family denied that any such abuse happened. The police said that they didn’t have enough evidence to charge him because the abuse happened years before it was reported.

I tell this story because it illustrates several things. It reminds us that the signs of sexual abuse are usually fairly apparent; it tells us that, no matter how resilient someone appears to be, the trauma of neglect and sexual abuse remains until he or she is helped. Carol’s story also illustrates that people can recover from it.

Names have been changed to protect privacy.

It took 25 years, and a total body breakdown, before Carol Evans finally started to deal with the trauma of her abuse.

when hidden childhood trauma resurfaces

ADOPTION ESSENTIALS: sexual abuse of children

ADOPTION ESSENTIALS: sexual abuse of children
Parents who adopt children who have experienced sexual abuse need the wisdom of Solomon, the strength of Hercules and the patience of Mother Theresa. If you fall short in any of these areas, do not despair. You are in good company.

Perhaps, more important, is your desire to help a young person grow into a healthy, trusting adult. This is a privilege and one which brings real satisfaction to those who have adopted.

First, know yourself

It is very important for you as prospective adoptive parents to be honest with yourselves and with your adoption worker about a number of things: Is there a history of sexual abuse in your past? If there is, how were those experiences resolved? Parents with unresolved abuse experiences may be at greater risk for either abusing the child again, or for keeping too much physical and emotional distance, for fear of abusing the child.

Ask how comfortable you are as a prospective parent, with your own sexuality and with your sexual relationship? Can you talk comfortably about sex? Do you give yourselves permission to acknowledge your own sexual feelings, thoughts, fantasies and fears? Do you have a well-established relationship which allows for direct and open communication? A child who has been sexually abused may need to talk about what happened to him or her. The child’s behaviour may be seductive or blatantly sexual at times. A parent must be able to deal with this.

In addition, there are some other issues that are important for adoptive parents to consider. They are: A willingness to “be different,” or experience embarrassing situations, at least for a while. Children who have been sexually abused may behave toward their adoptive parents in ways which are different than non-abused children. For example, Lisa, age 8, began shouting loudly, in public places like the supermarket, that her father had abused her. In fact, it was her biological father and not her adoptive father who had abused her, but the strangers in the supermarket obviously did not make the distinction.

An ability to wait for the child’s commitment. An
who has been sexually abused takes understanding, an open mind, patience, and knowledge.

Many parents have the hope that their love will immediately ease the mistrust their child has of the world and all its adults. What one adoptive parent learned was “love has a different meaning for my daughter. To her, it’s simply a deal: You do this for me and I’ll do that for you. What a shock to discover that love is not enough.” A true, trusting love based on more than just bargaining can come to pass with a sexually abused child, but it will take consistency and patience, and a sense of humor. As with most situations in life, a good hearty laugh helps.

What the kids need

Children who have experienced sexual abuse will probably need help in learning new behaviors and ways of relating. Some of the behaviors and emotions you may see expressed by your child are:

Withdrawal: Overwhelmed by the feelings she or he has experienced, the child may retreat physically or emotionally. It can be very isolating to have someone close to you tune you out. Unless you think there is danger of physical harm to the child or others, the best course of action is to reassure the child that you care and that you will provide the limits and boundaries that your child needs.

Mood swings: A moment’s tenderness can quickly explode into anger. The child may be full of confidence one day, only to sink into despair the next. It is difficult to see someone you care about in pain, but you cannot control the feelings of someone else. Point out that these mood swings are occurring. Do not allow yourself to be unfairly blamed. Try to stay calm and accept that sometimes the child doesn’t even know when or why the mood swings are occurring. Crying jags can be part of these mood swings. Accept that it is beyond your power to make it all better. Sometimes when a parent tries to rescue a child from pain, the child ends up feeling guilty, resentful and frustrated when it does not work.

Anger: The first target for the child’s angry feelings may be the person he or she has come to feel the safest with—you. When a person’s angry feelings are completely out of proportion to what is going on, it probably has nothing to do with the present situation. Something in the present is triggering and re-stimulating old memories and feelings. The safety of the current situation allows these feelings to be expressed. Recognize that this is actually a sign of health, but do not accept unacceptable behaviour and never expose yourself to physical violence. You can assure your child that you are willing to work out the problem at hand, but in a safe and supportive manner.

Unreasonable demands: Some children learn the survival skills of manipulation and control. They may make unreasonable demands for time, money or material goods. It is important not to play into these demands. This will help the child reduce such demands.

Sexual behaviour: Since the abuse was acted out sexually, the child needs help in sorting out the meaning of abuse, sex, love, caring and intimacy. Some children may try to demand sexual activity, while others may lose interest in any form of closeness. Think of all the needs that are met through sex: intimacy, touch, validation, companionship, affection, love, and release. Children need to be re-taught ways that these needs can be met that are not sexual.

Building boundaries

A child who has been sexually abused will benefit from clear guidelines that set the rules both in the home and outside. These kinds of rules will help provide the structure, comfort and security which all children need to grow into healthy adults. Experts in the field of adoption and child sexual abuse believe these guidelines are particularly important during the first year after placement, when the child is working hard to establish new relationships and to build trust.

Privacy: Everyone has a right to privacy. Children should be taught to knock when a door is closed and adults need to do the same.

Bedrooms and bathrooms: Sexual abuse commonly occurs in these rooms.

By the time children enter first grade, caution should be used about children of the opposite sex sharing bedrooms or bath times. It is not advisable to bring a child who has been sexually abused into your bed. Cuddling may be overstimulating and misinterpreted. A safer place to cuddle may be on the couch.

Touching: No one should touch another person without permission. A person’s private parts (the area covered by a bathing suit) should not be touched except during a medical examination or, in the case of young children, if they need help with bathing or toileting.

Clothing: It is a good idea for family members to be conscious of what they wear outside of the bedroom. Seeing others in their underclothes or pajamas may be overstimulating to a child who has been sexually abused.

Saying, “No” Children need to learn that it is their right to assertively say “no” when someone touches them in a way they do not like. Help them to practice this.

Sex education: All children, including the child who has been sexually abused, need basic information about how they develop sexually. They also will benefit from an atmosphere in which it is okay to talk about sex. Appropriate words for body parts, such as penis, vagina, breasts and buttocks, will give the child the words to describe what happened to him or her. Suggestive or obscene language is sometimes a trigger for old feelings for a child who was sexually abused, and should not be allowed.

No “secrets”: Make it clear that no secret games, particularly with adults, are allowed. Tell children if an adult suggests such a game, they should tell you immediately.

Being alone with one other person: If your child is behaving seductively, aggressively or in a sexually acting out manner, these are high risk situations. During those times, it is advisable not to put yourself in the vulnerable position of being accused of abuse. In addition, other children may be in jeopardy of being abused. Therefore, whenever possible during these high risk situations, try not to be alone with your child or allow him or her to be alone with only one other child.

Wrestling and tickling. As common and normal as these childhood behaviours are, they are often tinged with sexual overtones. They can put the weaker child in an overpowered and uncomfortable or humiliating position. Keep tickling and wrestling to a minimum.

Behaviours and feelings: Help children dif-
Children who have been sexually abused may feel like “damaged goods.” They may believe that no person will ever want them again, unless it’s in the context of a sexual relationship.

Is the healing ever complete?

Recovery from child sexual abuse is an on-going process. As this process unfolds, the child will ideally move from victim to survivor to thriver. Developmental stages, particularly adolescence and young adulthood, may trigger old feelings about the abuse. For example, the time when an adolescent’s body begins to develop physically, or when he or she marries or becomes a parent may restimulate old feelings and memories.

As discussed earlier, so many factors can influence the extent of the damage to the abused child. While adoptive parents cannot erase what happened to their child earlier in his/her life, you have a wonderful opportunity to provide your child with new, healthier experiences. Those who have made the commitment to parenting a sexually abused child say that the rewards of parenting a healthy, vibrant adult are very satisfying indeed.

Excerpted from www.childwelfare.gov

www.inyourgrasp.bc.ca

how Ryan recovered from years of abuse

Until he was six, our son Ryan lived with his birth mother who was a sex trade worker in downtown Vancouver.

While living with his birth mother, Ryan was exposed to pornography both in the form of videos and by viewing his mother’s prostitution. He was also molested by one of his sisters. We adopted Ryan when he was thirteen years old.

At six years old, Ryan was moved into a foster home. His behaviours were very challenging and he ended up living in a group home with much older boys. This place wasn’t safe either. Once again, Ryan was sexually abused, this time by an older boy. Shortly after that, he was moved to a more appropriate setting—another foster home (to be followed by several more). Eventually, he was placed in a therapeutic foster home. This is where his healing finally began.

For a couple of years, Ryan was given intensive counselling and therapy as well as the resources of skilled, experienced and caring foster parents. He then joined our family.

When he moved to our home there were other children both older and younger. We were assured that there was no risk to our other children and we never saw anything to make us think otherwise. However, we were initially cautious about where he slept and about his interactions with other children.

By living a normal family life which included trips to the pool, beach and campsites, Ryan learned what typical families do: change under a towel at the beach, wear pajamas at night, and maybe a towel while leaving the bathroom etcetera.

In his teen years, he dated and was always very respectful of his girlfriends. He is now married and the father of two.

Need help?

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Research indicates that just 30% of sexual abuse victims disclose the abuse during childhood.

how to deal with disclosure

If a child tells you about abuse it's because he or she thinks you can help. The child is also letting you know that he or she wants the abuse to stop. Telling is the first step to recovery.

Disclosures often unfold gradually and may be presented by a series of hints. Hints may be used to test the reaction of the person being told. If the child is ready, and your reaction has been positive, the child may follow up with a larger hint. Though such hints may come in many ways, and they can be easy to miss, a few examples might be:
- I don’t want to go to Jake’s house again.
- Please come to Jake’s house with me.
- I don’t like the games Jake wants to play.
- Jake did stuff I don’t like.

Remember, children often can’t verbalize in the same way as adults—especially around sex. Try to see things through a child’s lens.

Why kids don’t tell
- Fear of being disbelieved
- Fear the abuser will punish them
- Fear that their family will be destroyed
- No one to tell; No one to trust
- Scared their parents will turn against them
- Worried they or their siblings will be taken into care
- Don’t want a medical examination
- Already tried to tell but not listened to

Creating the climate
Waiting for a child to bring up the topic of sexual abuse puts a huge responsibility on the child. A child needs a caring adult to lead the way gently. Children will often begin by telling the least awful aspects of their abuse (to test your response) and slowly reveal more details. Children under five may spontaneously disclose with the essential details but not use a lot of elaboration. You can increase the chances that your child will disclose past or present sexual abuse by:
- Learning about sexual abuse.
- Teaching your child about personal safety.
- Being emotionally available to your child.

Reacting to disclosure
- Control your reaction: Don’t overreact.
- Don’t pass judgment. Let the child know that it is not his or her fault—tell the child that abuse happens to other kids too.
- Praise the child for telling and explain that you believe what he or she is saying.
- Comfort the child. Say you are sorry that the abuse happened and that you are going to help them get it sorted out.
- Reassure the child that he or she is safe in your home.
- Report the abuse to the police or social services—you must do so by law.

If a child believes that he or she did something to cause the abuse, show the child a picture of a child the same age and ask, “Do you think that a child this age could ever do anything to cause someone to have sexual feelings?”
Becky begins to heal from sexual abuse

An adoptive mom explains how sexual abuse affected her daughter and what helped her recover.

My daughter was sexually abused as a preschooler. The sexual abuse was part of a whole pattern of abuse and neglect.

Becky was abused by a male adult babysitter when she lived with her birth parents. Though, during a visit to the hospital, she articulated some of what happened, no counselling or therapy took place at the time. The abuse may have occurred more frequently since both her birth parents were absent from home in the evenings and she was left with a variety of less than appropriate caregivers.

After we adopted Becky when she was ten years old there were many issues and challenges. Some of these seemed related to her confusion over her past. Becky didn't seem to have a clear understanding of why she came into foster care, why she had experienced so many moves, or why her long term foster parents had decided not to adopt her.

During that first year, we started seeing a counsellor. Sometimes Becky saw the counsellor alone but, mostly, my husband or I were present. Becky spent lots of time talking about her past—she had many memories of other very negative experiences, but the sexual abuse was not one she mentioned. At the counsellor's suggestion, we did not bring the topic up either. It was assumed that she would talk about it when she was ready. In hindsight, we feel that a way to talk to her about it should have been found.

For a long time Becky was uncomfortable watching a movie that showed adults kissing. Even watching us, her parents, hugging or exchanging a quick kiss made her leave the room, or make a rude noise. It was hard to tell if these feelings were triggered by the sexual abuse or from spending several years in a foster home where the kids did not learn anything about body parts or normal sexuality, partly due to the foster parents' religious beliefs.

To help with this, we taught Becky the appropriate language and offered her some books, which explained about sexuality in age-appropriate ways.

Becky never seemed to be worried about the males in our household. I think her brothers offered a way for her to be physically close—sitting on the couch for example, in a way that was not threatening. We have always had the rule that no one of the opposite gender is allowed in the kids rooms unless the door is open; once our kids become teens even this is discouraged.

When Becky was 14, memories of the sexual abuse began to come up. She had nightmares and flashbacks. She began to have severe mood swings, became depressed and tried to hurt herself.

Two things probably triggered those memories; one was reunification with her birth mother, the other, was her first “boyfriend – girlfriend” relationship.

In order to help Becky, we sought counselling again—this time with someone with expertise in this area. The counsellor used some specific techniques to help her to work through the trauma: just regular talk therapy, as well as EMDR—eye movement desensitization and reprocessing. Three years later, she is still in therapy. The sessions are less frequent, but she still needs them. As well as the sexual abuse, Becky has issues that relate to the early neglect and abandonment she experienced.

Over the past few years, eating has been a source of comfort for Becky. She is somewhat overweight, but perceives herself as attractive and describes her body size as perfect. Becky still has difficulty with close relationships especially with boys and young men.

In terms of her sexuality, we have talked about how she will probably need to stay in control of her body in a way that makes her very comfortable, and unthreatened. As far as we know, Becky has not allowed herself to have more of a sexual relationship than she can handle. Becky’s therapist helps by reminding her about healthy boundaries. We try to keep communication open so that if she needs to talk to us she can. Thankfully, she is able to speak about everything to us and frequently asks for time for those kinds of conversations.

It is possible Becky will take a long time, if ever, to totally be at peace with the many things that happened to her in the past, including the sexual abuse. So far, though, she’s come a long way, and, at least, she has a loving family to support her through any challenges she might face.
The most vulnerable children and youth are the main targets of recruiters

**Child sexual exploitation risks & signs**

Though kids from all backgrounds are targeted and recruited into sexual exploitation, some are more vulnerable than most.

**Risk factors**
There are a number of risks and circumstances that make some children and youth particularly vulnerable to sexual exploitation. Children who have been adopted or have lived in foster care are likely to have at least some of the risk factors.

- **Low self-esteem** is the most common and powerful factor for putting youth at risk of being exploited.
- Being the *victim of sexual, physical, or emotional abuse* or trauma is also a common factor among high risk youth.
- Situations in which a young person questions his or her security or *sense of belonging*, such as a family crisis, problems at school, moving to a new school.
- **Rejection by family**, or being kicked out of the home.
- Drug and alcohol abuse at an early age, as well as *parental drug or alcohol abuse*.
- Gay youth may be at risk if they are isolated or denied support from their family and community.
- **Involvement of one or more members of the family in the sex trade**
- A desire for adventure, freedom, and independence.

**Sexual exploitation is the sexual abuse of children and youth through the exchange of sex or sexual acts for drugs, food, shelter, protection, other basics of life, and/or money.**

- Influence of friends and peers, and attraction to the perceived glamour of the street life.

**Warning signs**

- Withdrawing from home life, *becoming secretive and missing curfew*, running away
- Skipping school and dropping grades
- *Dropping old friends for a new group*
- Dressing provocatively, obsession with wanting to look older
- Extreme mood swings and behaviours
- Lying about what they’re doing
- Coming home drunk or on drugs
- Acting very protective of a new boyfriend
- **Having a boyfriend who is much older**
- Having unexplained money and new and expensive things, clothes etcetera.
- Packing a change of clothes when they go out

**The recruiters**
Recruiters lure children and youth into sexual exploitation. Recruiters can be male or female, they are usually in their late teens to early forties, and they often befriend the young people they target. They may then compliment them, give gifts, provide drugs and alcohol, and tell them that they “love” them. They often alienate young people from their families. Recruiters are usually motivated by the need to pay off their own drug debts or to find a way to avoid having to sell themselves. Children and youth can be recruited for the sex trade in all places where youth gather: schools, malls, parties, drop-in centres, coffee shops, bus loops, and on the Internet.

According to BC’s Children of the Street Society, ([www.childrenofthestreet.com](http://www.childrenofthestreet.com)) there are three stages of recruitment: lure, trust, payback. Once the recruiter has lured the young person into his or her world and gained his or her trust, the recruiter or pimp demands payback, which includes bringing in money through working in the sex trade. Violence and threats are often used to gain compliance. The sexual exploitation of youth doesn’t just happen on the street, it happens in private homes, clubs and in hotels.
AFABC recommends

THE PROTECTORS’ HANDBOOK
Reducing the risk of child sexual abuse and helping children recover by Germilyn Smith. This guide covers most aspects of parenting a child who has been sexually abused. This book is highly recommended for foster and adoptive parents, social workers and any professional working with children. It is also an important resource for parents who discover that their partner, family member or friend has sexually abused their child. Available from the AFABC Library www.bcadopt.com.

UNIVERSITY OF CHILDREN'S SEXUAL BEHAVIOIRS
What’s natural and Healthy by Toni Cavanagh Johnson. This 28 page booklet by world-renowned expert on the sexual abuse of children is an excellent resource that clarifies normal behaviour and behaviour that is a cause for concern. Highly recommended for adoptive and foster parents and social work professionals. Available from the AFABC library www.bcadopt.com.

HELPING CHILDREN WITH SEXUAL BEHAVIOUR PROBLEMS
by Toni Cavanagh Johnson. Though only 42 pages long, this booklet by world-renowned expert on the children with sexual behaviour problems is packed with information and advice on every aspect of parenting and helping children with sexual behaviour problems. Available from the AFABC library www.bcadopt.com.

CHILD SEXUAL ABUSE IT IS YOUR PROBLEM
by the Canadian Centre for Child Protection, this free, downloadable guide is mainly directed at parents. It covers most aspects of sexual abuse of children and how to keep children safe. It is useful reading for all parents and professionals.

books & resources

This is just a selection of the resources on this subject available from the AFABC Library. Please visit www.bcadopt.com for the complete list of DVDs and books.

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to read with your kids

IT’S MY BODY LOVING TOUCHES
by Lory Freeman
MY BODY IS PRIVATE
Linda Walvoord Girard
SOMETHING HAPPENED & I’M SCARED TO TELL
by Patricia Kehoe

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