

AGE LEVEL BEHAVIORAL INDICATORS

A Preschool Child

- The child tells about the abuse.
- The child does not want to go to a certain place or be around a particular person. This indicator may not apply if the child does not like the person for some other reason.
- The child has sexual knowledge of behavior that seems inappropriate for his or her age.
- The child displays sexual play with other children, toys, or pets such as inserting objects into genitals or rectum.
- The child draws pictures which depict a sexual theme.
- An abused child may be overly affectionate and seem seductive with peers and adults.
- Displaying younger, more infantile behavior (baby talk, clinging) may be an indication of child abuse.
- The child may report sexual abuse by his or her caretaker.
- An abused child may become more passive or overly pleasing.
- The child has unexplained gifts or money.
- New discipline problems (unexplained aggressiveness or rebellion) may surface in an abused child.

An Elementary School-Aged Child

- May display the above behaviors as well as the following:
 - ❖ Has sleep disturbances, headaches, or school problems.
 - ❖ Displays unusual knowledge and interest in sex beyond expected developmental level.
 - ❖ Drops academically and shows poorer ability to concentrate.

An Adolescent

- May display the above behaviors as well as the following:
 - ❖ May run away.
 - ❖ Displays high anxiety and/or is chronically depressed.
 - ❖ Develops an eating disorder.
 - ❖ Becomes less trusting.
 - ❖ Displays lowered self-esteem and perhaps self-destructive behavior, self inflicted injuries, even suicide attempts.
 - ❖ Develops drug or alcohol problems.
 - ❖ Becomes promiscuous.
 - ❖ Shows serious confusion over sexual identity.
 - ❖ Displays a false sense of maturity.
 - ❖ Shows sexual interest in younger children.

CHILD SEXUAL ABUSE

Myths and Facts

Myth: Very few children become victims of sexual child abuse/incest in this country.

Fact: By the time they reach the age of 18, one in four girls and one in six boys will have been sexually abused.

Myth: Girls are far more likely to be victims of sexual abuse than boys.

Fact: Boys are almost equally as likely as girls to be sexually assaulted.

Myth: The offender is usually an elderly man.

Fact: The offender is usually a man between 15 and 50 years of age.

Myth: All cases of sexual abuse/incest are reported to the police.

Fact: Very few cases of sexual assault upon children are reported to the police.

Myth: Most children are assaulted in alleys, parking lots, parks, etc.

Fact: Most children are assaulted in their own home or in the abuser's home.

Myth: Child molesters have no excuse for their behavior.

Fact: Eighty percent of convicted child molesters were sexually abused as children. Many were severely physically abused.

Myth: Children never fully recover from sexual abuse/incest.

Fact: While some children will suffer long-lasting effects from the assault, most can recover almost completely, with treatment.

Myth: A parent's attitude is not important in the recovery of the child.

Fact: The attitude of the child's parents is the most important factor in the child's recovery.

Myth: Too much information on the subjects of sexual abuse and incest make a child vulnerable to attack.

Fact: Children who are informed on the subjects of sexual assault are less likely to be victimized.

Myth: Sexual abuse/incest happens only once.

Fact: Child sexual abuse/incest is a reoccurring situation which lasts for an average of three years, between the ages of six and nine.

Myth: Mothers always know when their child(ren) has been abused.

Fact: Some mothers are never aware of sexual abuse/incest happening to their child(ren).

Myth: Children often lie about incidences of sexual abuse/incest.

Fact: Children rarely lie about being sexually abused.

Indicators of Child Maltreatment

| | Physical Indicators | Behavioral Indicators |
|-------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Physical Abuse | <ul style="list-style-type: none"> unexplained bruises (<i>in various stages of healing</i>), welts, human bite marks unexplained burns, especially cigarette burns or immersion burns (<i>glove like</i>) unexplained fractures, lacerations, or abrasions | <ul style="list-style-type: none"> self-destructive withdrawn or aggressive-behavioral extremes uncomfortable with physical contact arrives at school early or stays late as if afraid to be at home chronic runaway complains of soreness or moves with discomfort wears clothing inappropriate to weather to cover body |
| Physical Neglect | <ul style="list-style-type: none"> abandonment unattended medical needs consistent lack of supervision inappropriate dress, poor hygiene consistent hunger, distended stomach, emaciated | <ul style="list-style-type: none"> regularly displays fatigue or listlessness, falls asleep in class steals food, begs from classmates reports no caretaker is at home frequently absent or tardy self-destructive school dropout |
| Sexual Abuse | <ul style="list-style-type: none"> torn, stained, or bloody underclothing pain or itching in genital area difficulty walking or sitting bruises or bleeding in external genitalia venereal disease frequent urinary or yeast infections | <ul style="list-style-type: none"> withdrawal, chronic depression excessive seductiveness role reversal, overly concerned for siblings poor self-esteem peer problems, lack of involvement massive weight change suicide attempts hysteria, lack of emotional control sudden school difficulties inappropriate sex play or premature understanding of sex threatened by physical contact, closeness |
| Emotional Abuse | <ul style="list-style-type: none"> speech disorders delayed physical development substance abuse ulcers, asthma, severe allergies | <ul style="list-style-type: none"> habit disorders (<i>sucking, rocking</i>) antisocial, destructive neurotic traits (<i>speech disorders, inhibition of play</i>) passive or aggressive-behavioral extremes delinquent behavior developmentally delayed |

It is important to remember that even if you see signs, this does not necessarily mean a child has been abused. The signs will vary according to the type of abuse, the intensity, and the age of the child.

Some children who are abused display no signs. For this reason, it is important to listen carefully to any child who tells you about an act of abuse and to be aware of unexplained changes in the behavior of children with whom you have regular contact.

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