

# SEXUALISED BEHAVIOUR IN CHILD SEXUAL ABUSE VICTIMS

Submitted by the Child Witness Institute

KEY CONCEPTS	
Trauma impact	Child Sexual Abuse
Sexualised behaviour	Sexual development
Traumatic Sexualisation	Traumagenics

## 1. Introduction

Society defines childhood as a time of innocence and purity and, therefore, is very reluctant to admit or acknowledge that children are capable of engaging in sexualised behaviours that are considered only appropriate for older persons. In fact, indications that children may have engaged in sexual behaviour are often met with shock, denial or disgust.

In cases of child sexual abuse, however, victims can present with concerning sexual behaviours as a result of the trauma they have experienced. Evidence of this is often presented to the court but without an adequate explanation of why these behaviours are concerning and what has caused them.

At the outset, it is important to acknowledge and understand that children develop sexually, as they do physically, cognitively and emotionally. This sexual development occurs along a continuum and includes infants and young children developing positive emotional attachment with a caregiver, learning about positive touch, such as hugging and cuddling and learning about body parts, including genitalia; to intimacy and consensual sexual experimentation among teenagers. This behaviour is an important and necessary part of a child's development.<sup>1</sup>

Children are born with the physical attributes of their sexual and reproductive systems in place and while these systems have not yet been fully triggered through puberty, this does mean that a child has the physical capacity to engage with a person or object in a sexual manner. When a sex offender interferes with the normal sexual development of a child by introducing sexual acts before a child is developmentally ready or willing, this can have immediate and long lasting implications for the child's sexual behaviour.

## 2. The impact of child sexual abuse

Child sexual abuse impacts on every aspect of a child's concept of self and ability to behave appropriately. The literature on the effects of child sexual abuse emphasises that the very

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<sup>1</sup> O'Brien, W. 2008. **Problem Sexual Behaviour in Children: A Review of the Literature**. Australian Crime Commission. Commonwealth of Australia.

core of a child is damaged when an older person forces or coerces that child into a sexual relationship.<sup>2</sup>

Children who have been sexually abused manifest a variety of trauma symptoms. The symptoms the child shows are important for two reasons. Firstly, with preverbal children, symptoms may be the only indication of ongoing abuse. Secondly, symptoms give some indication of the extent of trauma for children. The symptom that has received a considerable amount of attention, and is considered characteristic of child sexual abuse, is sexualised behaviour.

The impact of child sexual abuse on children's sexual behaviour is well defined within the Traumagenic Dynamics Model.<sup>3</sup> One of the dynamics of this model is traumatic sexualisation. This dynamic refers to the process in which a child victim's sexuality (including sexual feelings and sexual attitudes) is shaped in a developmentally inappropriate and interpersonally dysfunctional way. It occurs in a number of ways, including:

- when a child is repeatedly used for sexual behaviour inappropriate to his or her level of development;
- when sexual behaviour is conducted in exchange for affection, attention, privileges and gifts. The child learns to use sexual behaviour to manipulate others in order for the child to satisfy developmentally appropriate needs;
- when parts of the child's body are given distorted importance and meaning;
- when sexual behaviour and morality are confused by the offender; and
- when very frightening memories and events become associated in the child's mind with sexual activity.

The extent to which the child experiences traumatic sexualisation in response to sexual abuse depends on a number of factors, namely:

- if the offender evokes a sexual response from the child, the trauma is often more intense;
- if the child is enticed to participate, the trauma is usually greater than if the offender uses brute force; and
- the degree of the child's understanding also impacts on the extent of the trauma experienced. Child victims at an early age or stage of development may understand few of the sexual implications of the activities.

Traumatic sexualisation can result in a child victim presenting with inappropriate sexual behaviour. These behaviours have been referred to as childhood problem sexual behaviour.<sup>4</sup>

### 3. Childhood problem sexual behaviour

Childhood problem sexual behaviour broadly involves acts of aggressive or coercive sex by children.<sup>5</sup> There are three ways that the behaviour can be deemed problematic, namely:

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<sup>2</sup> Müller, K.D.; Bohler-Muller, N.; Hollely, K.A. and Minnie, D. 2009. **Women and Children as Witnesses in Cases of Gender-Based Violence**. Prinrite: Port Elizabeth.

<sup>3</sup>Finkelhor, D. and Browne, A. 1985. *The traumatic impact of child sexual abuse: a conceptualization*. **American Journal of Orthopsychiatry**. 55(4).

<sup>4</sup> Ibid. 1.

<sup>5</sup> Ibid

- if the behaviour puts the child at risk, interferes with their development and relationships, violates accepted rules, is self-abusive and/or is defined by the child as a problem;
- if the behaviour causes others to feel uncomfortable, occurs at the wrong time or place, conflicts with family or community values, and is abusive; and
- if the behaviour involves coercion and unequal power.<sup>6</sup>

The following are observations of clinicians regarding types of problem sexual behaviour in child sexual abuse victims:<sup>7</sup>

- Sexual preoccupations and repetitive sexual behaviour, such as masturbation or compulsive sex play. Adolescent boys often show sexual aggression and may try to victimize their peers or younger children;
- Sexual problems of adults who were child victims of sexual abuse. One of the most frightening consequences of this dysfunction is the noted increase in inappropriate sexual contact with their own children;
- The victim also suffers from confusion around sexual identity. Victimized boys, for example, may wonder whether they are homosexuals. Victimized girls may wonder whether their sexual desirability has been impaired and whether future sexual partners will be able to 'tell';
- There is also confusion about sexual norms and standards, for example, the role of sex in appropriate relationships. If child victims have learned to trade sex for affection, this may become their view of the normal way to give and obtain affection; and
- Negative connotations associated with sex. The sexual contact may become associated with revulsion, fear, anger, a sense of powerlessness or other negative emotions. These associations can contaminate future sexual experiences. These feelings also often account for the sexual dysfunction reported by victims.

In terms of age differentials, the following problematic sexual behaviours are noted in young children:<sup>8</sup>

- For children aged 0-5 years:
  - Curiosity about sexual behaviour becomes an obsessive preoccupation;
  - Exploration becomes a re-enactment of specific adult sexual activity;
  - Behaviour involves injury to self; and
  - Children's behaviour involves coercion, threats, secrecy, violence, aggression or developmentally inappropriate acts.
- For children aged 6-10 years:
  - Sexual penetration;
  - Genital kissing;
  - Oral copulation; and
  - Simulated intercourse.

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<sup>6</sup> Ibid

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Kellogg, N.D. 2010. *Sexual Behaviors in Children: Evaluation and Management*. **Am Fam Physician** 82(10):1233-1238.

<sup>8</sup> Ibid

- For children aged 10 years and older:
  - Behaviour involves sexual play, often with younger children
  - Forcing, coercing or requesting and older child or adult to engage in sexual intercourse;
  - Sexual aggression and criminal sexual acts; and
  - Promiscuity and prostitution.