

Understanding Problematic Sexual Behavior in American Indian and Alaska Native Youth

Much of Native culture is based on the Circle of Life. Culture teaches us that we are all relatives to all things in creation. Some of the threads in the Circle have become broken. Teachers can help mend the Circle by understanding normal sexual behaviors and problematic sexual behavior (PSB). PSB is youth-initiated behavior that involves sexual body parts in a manner that is developmentally inappropriate and potentially harmful.¹ Prevention of PSB in the schools can be supported by programming in classes as young as pre-K through high school. Privacy, boundaries, rules about sexual behavior, and responses to PSB can be readily taught and reinforced.

Addressing trauma, abuse, and neglect in tribal communities is necessary for understanding PSB. Trauma-informed principles can help us support all youth.

Youth need safety, supervision, protection, guidance, monitoring, and teachings. All youth must know they are connected, sacred, and honored.

Roles

School teachers, counselors and staff help ensure the safety, health and well-being of students. As mandatory reporters, school staff may identify students with PSB and child victims. Title IX requires schools to address sexual violence promptly, thoroughly and fairly. Title IX also requires schools to respond even if a sexual assault occurs off-campus and is not connected to a school-sponsored activity.²

Address Trauma

Trauma-informed principles include the need for safety, supervision, protection, guidance, monitoring, and teaching. Teachers must remind youth they are connected, sacred, and honored.³

Report Problematic Sexual Behaviors

- Know your school's policy on reporting suspected sexual abuse.
- If you are concerned that a student has problematic sexual behavior or is the child victim of problematic sexual behavior, follow school and tribal protocols, as well as state laws.
- Support school planning and revisions to update protocols as needed.



Know About Problematic Sexual Behaviors

- Work with school administrators to ensure these behaviors are identified, addressed and supports are in place.
- Consider development and behavioral issues including attention deficit hyperactivity disorder, posttraumatic stress disorder, autism spectrum disorder, language and learning disabilities and other reactions to trauma.

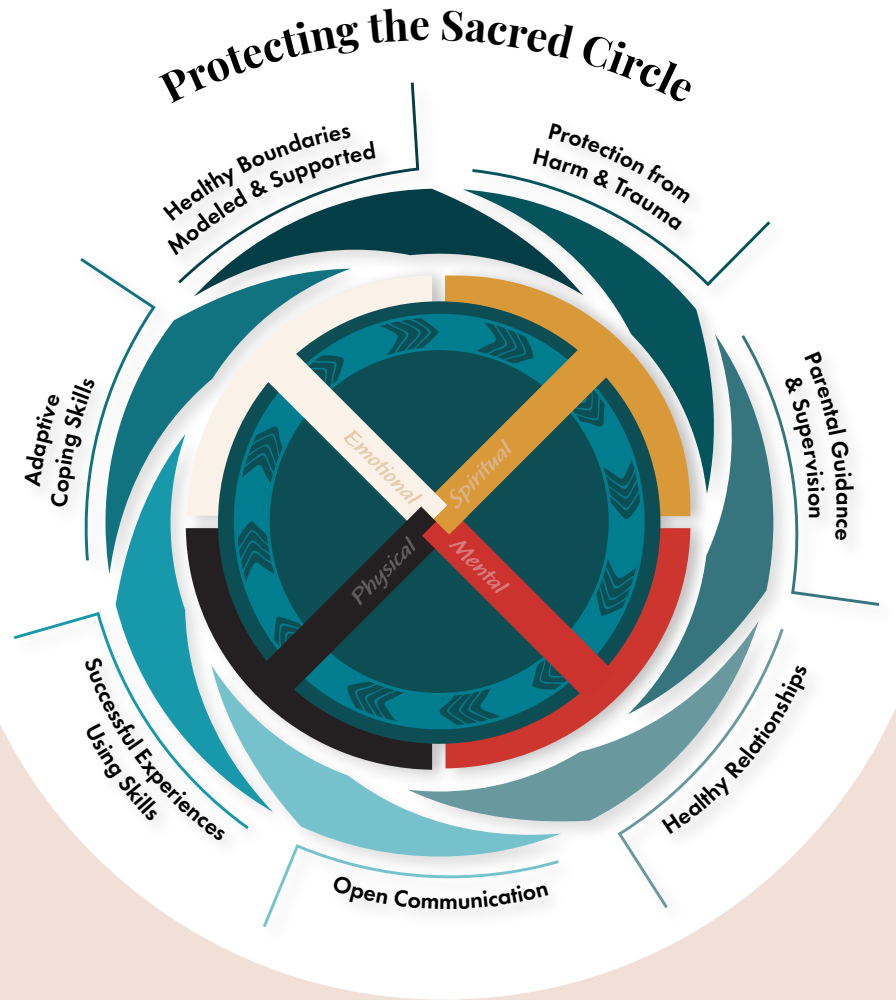
- Address sexual education topics with students, include technology-related issues such as sexting.
- Talk with students about personal space and privacy.
- Teach students to respect the privacy of others and healthy sexual boundaries.

Characteristics of Typical vs. Problematic Behaviors

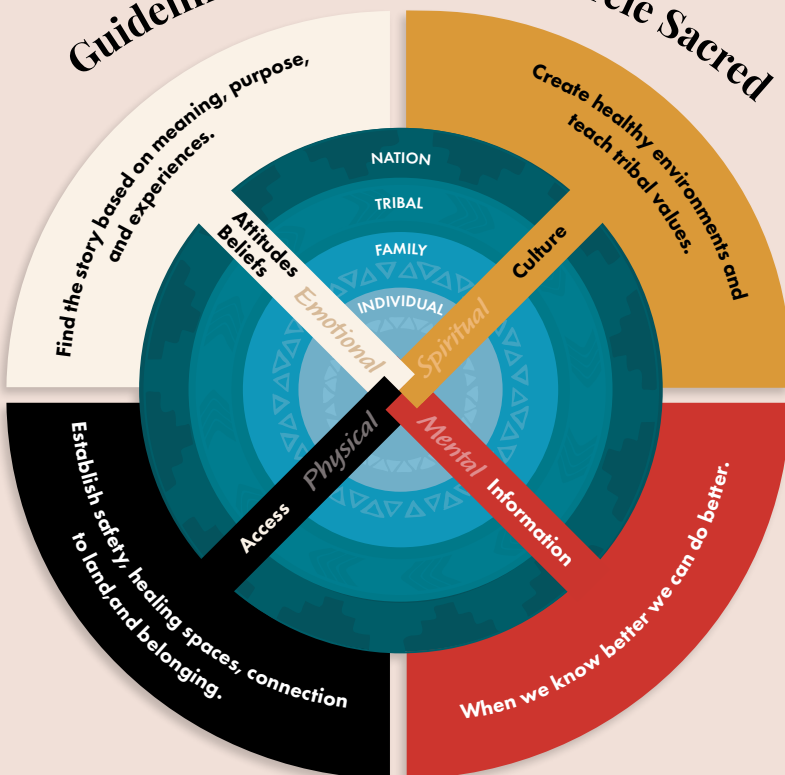
TYPICAL	VS	PROBLEMATIC
Occurs between children of same age and size		Children are different ages/abilities
Light-hearted Emotions		Strong negative emotional reaction
Infrequent		Frequent
Voluntary		Threats, force, aggression
Easily redirects		Does not respond to parental guidance or correction
<p>Typical Examples:</p> <ul style="list-style-type: none"> Two 5-year-old children spontaneously show each other private parts when outside playing in sprinkler A 10-year-old touching his/her private parts while alone in the bedroom 		<p>Problematic Examples:</p> <ul style="list-style-type: none"> A 12-year-old touching a seven year old's private parts A child threatening to send pictures of another child's private parts A child repeatedly looking under bathroom stalls after parents/school officials have previously corrected his/her behaviors

Protective Factors

Tribal protocol, practices and ceremonies can facilitate resilience and protective factors in youth. Healthy behaviors and good decisions at the individual, family and community levels keep the circle sacred.



Guidelines for Keeping the Circle Sacred



We stress that children are not offenders or predators, they are children and they are developing these behaviors—give them information. That is all that they need, that there is hope, they are not predators.

– Janet Routzen,
Associate Judge Rosebud Sioux Tribe



Risk Factors

Risk factors for youth with PSB are universal and not based solely on any demographic, psychological or social factors. The National Center for Sexual Behavior of Youth identified the following individual, family, and community-level factors that may be helpful for understanding youth with PSB.

- Child vulnerabilities may hinder a youth's ability to cope with stressful events or control impulses and respect the boundaries of others. These include attention deficit disorder, learning and language delays, reactions to trauma events or other factors.
- Lack of information or limited accurate information about bodies and sexuality, unhealthy boundaries or privacy in the home, exposure to adults sexual activity or nudity, sexual images, or other factors that contribute to a sexualized environment.
- Exposure to harsh or coercive interactions, such as family or community violence, physical abuse, bullying or other factors.
- Factors that hinder a parent or caregiver's ability to monitor, guide, support, and teach their children, such as depression, substance use, exposure to abuse and other factors.
- Sexual abuse experiences, particularly when young and curious, may lead to PSB through trauma responses as well as confusion about healthy interactions. While sexual abuse is an important risk factor, not all youth with PSB have been sexually abused.

Research

PSB does not increase based on sexual orientation, race, ethnicity or socioeconomic status.¹

1/3, of sexual offenses against youth are committed by other youth.^{3, 4}

12 to 14 years of age, is when PSB happens the most.³

1/2, of child victims of PSB are under 6 years of age.⁴

25% of PSB cases involve family members.³

Most PSB occurs between children/youth who know one another.³

<3%, is the average sexual recidivism rate for youth with PSB and illegal sexual behavior.⁵

Prevention And Treatment Of Problematic Sexual Behavior

- **Sex education is a key component.** Help the child identify someone he or she trusts to talk to about friendship, relationships, and questions about sex, rather than relying on peers or the internet.
- **Learn more about abuse-prevention and healthy coping skills, impulse-control strategies and decision-making skills, safety plans, and social skills.**
- **Advocate for public policies that support treatment for youth with problematic sexual behavior.** Use people-first language. Treat as children first and implement developmentally appropriate policies, laws and protocols.
- **Encourage parents to talk with their children about their bodies, body parts, and personal space and privacy** in a developmentally appropriate manner beginning at 3 to 4 years of age.
- **Support open communication about relationships, intimacy, consent, prevention of abuse, sexual images, and other related topics** in a developmentally appropriate manner with trusted adults.
- **Effective components of treatment address safety planning, sexual behavior rules, managing child behavior, boundaries, sex education, abuse prevention skills, and child self-regulation and self-control skills.** Treatment may also include emotional regulation skills, healthy coping skills, decision-making skills, social skills, restitution and amends.

Resources

CENTERS, ORGANIZATIONS AND PROJECTS



National Center on the Sexual Behavior of Youth
www.ncsby.org



National Child Traumatic Stress Network
www.nctsn.org

TOOLKITS AND GUIDES



Responding to Children's Problem Sexual Behavior in Elementary Schools



Private Part Rules for Preschoolers



Teaching Boundaries and Safety Guide



Childhood Sexual Behaviors: Normative, Cautionary, or Problematic?

The information contained in this toolkit and multimedia content represents the views and opinions of the creators and not the views of OUHSC or states, tribes, and agencies. Mandatory reporting requirements and response to PSB varies between jurisdictions. For more information about mandatory reportings of child abuse and neglect, visit: <https://www.childwelfare.gov/pubPDFs/manda.pdf>

References

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2. U.S. Department of Education (ND). Office of Civil Rights.
3. BigFoot, D. (2013). Child Trauma Series in Indian Country- 7 Part Series. Indian Health Service TeleBehavior Health Center.
4. Finkelhor, D., Turner, H., Ormrod, R., & Hamby, S. L. (2009). Violence, abuse, and crime exposure in a national sample of children and youth. *Pediatrics*, 124(5), 1411-1423.
5. Finkelhor, D., Ormrod, R., & Chaffin, M. (2009). *Juveniles Who Commit Sex Offenses Against Minors*. Office of Juvenile Justice and Delinquency Prevention, *Juvenile Justice Bulletin* December 2009.
6. Snyder, H. (2000). *Sexual Assault of Young Children as Report to Law Enforcement: Victim, Incident, and Offender Characteristics*. NCJ 182990.
7. Caldwell, M. F. (2016). Quantifying the Decline in Juvenile Sexual Recidivism Rates. *Psychology, Public Policy, and Law*, 22(4), 414.

