KEEPING YOUR CHILD SAFE:

A Parent’s Guide to

Abuse Prevention, Detection, and Intervention

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The purpose of this booklet is to make parents more aware of circumstances surrounding abuse. Informed parents can take steps to make their children safer from abuse by prevention, early detection, and getting help to address previous assaults.

ACKNOWLEDGEMENTS

This booklet was adapted and adopted by the Healthy Relationships, Sexuality and the Prevention of Abuse Advisory Committee (The Committee).

The Committee’s mission is to make our region “Abuse Free!”

Membership includes parents, self advocates and professionals.


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KNOWLEDGE IS POWER

What parents should know about abuse:

- Children with a developmental disability are often abused, which includes sexual abuse
- Children with a developmental disability are more likely to be abused than other children
- Very few abuses against people with disabilities are reported to the authorities
- Most of the abusers are well known and trusted by the victim
- Early education can help individuals avoid abuse as an adult

There are many types of abuse:

Physical Abuse: hitting, beating, slapping, burning, etc., sometimes resulting in bruises or welts

Emotional/Verbal Abuse: belittling, threatening, excessive yelling, not providing the warmth and love necessary to the development of a child

Neglect: not providing food, clothing, shelter, or other basic needs for the proper development of a child

Sexual Abuse: fondling, rape, exposure to pornographic materials, or any other activity of a sexual nature with a child
WHAT CAN I DO TO PREVENT CHILD ABUSE?

**Knowledge is Power** and parents who know what to look for have a better chance of preventing or detecting abuse early on. It’s important to take the time to notice everyday activities and typical behaviors of your child to be able to keep your child safe.

**STOP:** Take the time to notice and learn your child’s behaviors and body language. Is your child showing any out of the ordinary behaviors which are new or re-emerging? Does your child appear distressed, or has their appearance changed? If you notice a dramatic change in behavior or appearance it’s important to look into the cause.

**LOOK:** Examine your child during bath time and getting dressed in the morning or undressed for bedtime. If there are obvious physical signs of abuse take the child to the emergency room immediately.

**LISTEN:** Spend quality time with your child and listen to their stories; ask questions about their day and their friends. If a child is non-verbal, closely observe body language and listen for a change in vocalizations. Children rarely make up stories about being abused, and a disclosure of any type should be given attention.

**KNOW:** Be informed about your child’s daily routine and who is involved with your child on a daily basis. Is there a change in family members, friends, or school personnel? Ask questions and be informed if there are changes in teachers, bus drivers, classroom aides, janitors, or peer tutors.

**REQUEST:** If your child is involved in group activities or if placed outside of the classroom for 1:1 services, request that there is an aide to monitor and observe, or know the background and identity of the person working closely with your child.

**TEACH:** A child’s ability to assert themselves can be one of the most powerful tools in the prevention of abuse. Teach your child how to communicate their likes and dislikes and respect their feelings. This will increase their confidence to speak up if someone hurts them or makes them feel uncomfortable.

**UNDERSTAND:** Become informed about your child’s level of development. Assist others to understand where your child is with respect to their abilities. A child will be more respected and cared for when others have realistic expectations of their abilities and limitations.
SHARING WITH YOUR CHILD

Teaching your child about how people should treat them (what is appropriate and what is not) can require some creativity on the parent’s part. Pick ways to share with your child that are both comfortable to you and your child, and appropriate for their particular learning style.

Pictures provide a good way to discuss appropriate relationships, and social interactions. Parents can use:

- Family photos
- Line drawings
- Stickers
- Clip Art – Computer Graphics
- Felt board
- Picture Exchange Communication System (PECS) board
- Communication books

Full body drawings of your young child can provide a fun and interactive way to reinforce ownership of their body. Parents can:

- Trace the child’s body on large butcher paper
- Allow the child to fill in body parts such as eyes, nose, and hands
- Use the drawing as a discussion piece to identify private areas of the body. For example: Explain to your child that anything usually covered with clothing such as a bathing suit is considered an extremely private area. But, it is important to teach your child that their whole body is private and should only be touched by others with permission under very specific circumstances

Present information in small sequential steps, repeat frequently and practice real life situations which encourage decision making and problem solving.

- Make the practice realistic and applicable to the child’s immediate environment
- Include familiar people the child knows, such as teachers, bus drivers, family members, as well as, strangers
- Stage practice sessions in familiar settings such as the school playground or home
AGE APPROPRIATE EDUCATION

Developmental milestones are typically marked by a child’s speech and language skills, fine and gross motor skills, as well as their social and interpersonal skills. Parents can start at an early age to develop a child’s sense of personal safety, and appropriate body ownership and knowledge. Each stage builds onto the next. Revisit each stage as you move onto the next age range and through adulthood.

Ages 3 to 5

- Teach your child about body parts being careful not to omit reproductive organs and their appropriate names
- Reinforce the idea that a child’s body belongs to them
- Observe emerging personal boundaries and encourage assertion of instinctual knowledge between a touch which feels good and one that feels bad
- Empower a child to say “NO” to unwanted or uncomfortable touches or interactions with others. For example, do not force your child to hug or kiss anyone
- Understand children will engage in natural curiosity and exploration of their bodies
- Instill a positive self image in your child; allow your child to make choices and decisions in their everyday lives. This creates a sense of confidence which will enable a child to make difficult decisions, during stressful times
- Allow your child to set their own boundaries

Age 5 to 8

- Revisit the previous stages to reinforce each skill
- Continue to use correct names for all body parts and reproductive organs
- Compare and contrast good and healthy touching versus touching that is not appropriate
- Identify to your child who (doctors, neighbors, parents, teachers, friends) is allowed to touch your child, when, and what touch is appropriate
Age 5 to 8 continued

- Discuss similarities and differences between boys and girls
- Introduce the reproduction cycle
- Stress the qualities of a good relationship between friends, family and acquaintances
- It’s natural for children to explore their own bodies
- Establish an appropriate place for “private time”
- Teach the difference between “public” and “private” behavior

Age 8 to 11

- Revisit the previous stages to reinforce each skill
- Discuss the importance of discretion when revealing personal information with peers
- Discuss and model ways to stand up to peer and social pressure
- Encourage and facilitate healthy hygiene; explain what is needed and remind your child to use healthy hygiene practices
- Assist and model appropriate social skills including:
  - Clothing
  - Body language
  - Attitude
  - Conversation
  - Social interactions (appropriate greetings, social distance, manners, etc.)
- Discuss pubescent changes that occur:
  - In their body
  - In their emotions
  - In their relationships with peers of the opposite sex
  - Different changes between boys and girls
Ages 12 to 18

Teaching your child about sexuality does NOT mean they will become sexually active as a direct result. A lack of education in this area however, has been shown to increase the chances of abuse and unhealthy sexual behavior.

- Revisit the previous stages to reinforce each skill
- Understand that during the teenage years your child will probably begin to become interested in romance, relationships, and sex. This is normal even if your child has developmental challenges
- Discuss appropriate hygiene skills and needs as the body matures
- Discuss potential consequences of sexual behaviors such as moral dilemmas, pregnancy and STD; include books or social stories
- Provide and model examples of appropriate behaviors for intimate friendships
- Discuss that we may see inappropriate behaviors/attitudes being practiced by peers, the general public, and in the media
- Discuss and model how to make good choices in difficult social and sexual situations
- Provide, guide, and facilitate safe and appropriate social activities (see resource guide for listings)
- Discuss birth control options, including abstinence and the need for proper medical care such as yearly gynecological exams, as well as, breast and testicular self-exams

Ages 18 and older

For individuals 18 and older continue to review, support and reinforce key concepts including setting personal boundaries and respecting other people’s boundaries.
SIGNS OF SEXUAL ABUSE: WHAT TO LOOK FOR

Warning signs of abuse or “Red Flags” are exhibited in many ways. These may be unusual behaviors that come and go, or are simply new to the child’s character. Red flags are indicators of stress in a child’s life. Though often associated with abuse, these signs may also be due to changes in a child’s routine, or exposure to other forms of trauma (loss of a loved one, abrupt family changes such as divorce). A dramatic change in a child’s demeanor (moods, personality, behaviors) suggests a closer look.

- **Physical Signs**: unexplained bruises, injuries, or marks on body, genital pain or irritation, STDs (infection/discharge from genital areas)
- **Regressive Behavior**: withdrawal from typical activities, bedwetting or “accidents” during the day, self-stimulating behavior, thumb or finger sucking
- **Dramatic Reenactment**: reenacting events through play with dolls, other children, art, and/or stories
- **Problematic Behaviors**: heightened aggression, depression, anxious behavior, unprovoked crying, poor performance at school, changes in sleeping patterns (nightmares, insomnia), withdrawal from others or unusual activities
- **Self-Abusive Behaviors**: head banging, biting, cutting on body, picking at skin, pulling out hair, drug or alcohol use/abuse, picking fights with bigger or stronger individuals
- **Destruction of Property**
- **Increased Knowledge of Sexuality, or Increased Sexual Activity**: inappropriate play, interest in sex before puberty, disrobing, constant and/or painful masturbation
- **Lack of Personal Boundaries**: including compulsive sexual touching of family and friends
- **Extreme Avoidance of Particular Places or Specific People**
SUSPECTED CHILD ABUSE: WHAT TO DO NEXT

It is a difficult time for both parent and child when a suspicion of abuse arises. Parents play an important role in facilitating the needed actions and providing the emotional support that a child needs. If you become aware or suspect that your child has been abused you should immediately:

• Find a safe place for your child
• Check in with yourself. Disclosure is often a high stress time for both you and your child. Be sure to acknowledge emotions inside yourself which may be triggered by your child’s communication. The emotions you feel are often expressed by your body language and facial expressions
• Comfort and reassure your child
• If abuse is suspected, but not disclosed or proven, refrain from “interviewing” your child as it may compromise the legal process. Instead contact your local law enforcement and Child Protection Services. Request an “interdisciplinary team” to do the interview with your child. This approach will save your child from the added stress of repeated interviews from various agencies, such as, Child and Family Services (formerly Child Protective Services), Law Enforcement, and the District Attorney. They will be part of an interdisciplinary team and will assist one trained interviewer
• DO NOT confront a possible abuse suspect as this will interfere with any investigation law enforcement may conduct as well as place yourself in danger
• Report the abuse/suspected abuse to the proper agencies above and consider calling your FNRC Service Coordinator, who has useful information, referrals and support
• Keep anything that may be evidence including clothing, blankets, and towels in a paper bag (plastic bags can destroy evidence). Refrain from bathing the child until they have had a medical exam
• Take photographs of any signs of physical abuse (scratches, bruises, bite marks)
• Assist your child in getting medical and emotional/mental evaluations. Parents are advised to remain with their child through the exam and take the time to explain each procedure/evaluation to their child in advance
• Follow through with recommended medical and mental health care for your child. Victim assistance will be offered through your local District Attorney’s office.

• Continue to reassure and protect your child and remind them that they did nothing wrong and are not to blame for the assault.

• It is important to understand that the highest success rates of abuse recovery and trauma reduction are due to a supportive parent or adult assisting the child with the healing process. You may need to address personal issues for yourself during this time in order to properly support your child. As a parent you are also eligible to receive counseling services through the D.A. Victim Assistance Program.
RESOURCES

This resource section includes key local and regional organizations, books and information focused on people with developmental disabilities, the prevention of abuse and promoting healthy relationships. Parents are their children’s first and best teachers. All children can learn. Children are safest when they learn to be their own “first line of defense.” The better informed all people are, the better we are able to prevent or respond to abuse and exploitation. That is the goal of this book!

**Area 2 Developmental Disabilities Board**
1367 East Lassen Avenue, Suite B-3, Chico, CA 95973
(530) 895-4027
Robin.Keehn@scdd.ca.gov
Comments/suggestions on this publication are welcome and can be sent to this e-mail.

**Far Northern Regional Center**
Contact your child’s Service Coordinator.
Redding office: 1900 Churn Creek Rd # 319, Redding, CA 96002; (530) 222-4791
Chico office: 1377 E. Lassen Ave. Chico, CA 95973; (530) 895-8633
[www.farnorthernrc.org/mylifemychoice](http://www.farnorthernrc.org/mylifemychoice)
*This website offers a huge variety of information, resources and training reviewed and/or recommended by The Committee.*

**We Care A Lot Foundation**
2155 Larkspur Lane, Suite B, Redding, CA 96002
(530) 223-7771 - Redding
(530) 893-8003 - Chico
[www.wecarealot.org](http://www.wecarealot.org)

WCALF offers various presentations and trainings by adults with developmental disabilities for peers, staff, parents and schools, about healthy relationships, sexuality and abuse prevention. All presentations are FREE and include:

- *Same As You*: a school presentation for children on teasing, bullying and respect for everyone
- *Abuse Prevention Team*: a presentation for adults with developmental disabilities
• **Consumer Abuse Awareness Team:** training for staff on the culture of abuse

• **Me and You:** training for adults with developmental disabilities on healthy relationships

• **Respect Yourself:** training for adults with developmental disabilities on sexuality

**Community Living Options**
550 Clark Road, Suite #1, Paradise, Ca 95969
(530) 877-7320

*CLO creates an individualized “Personal Care Guideline” (PCG)* booklet for children/adults who need help with personal care. PCG’s promote safety, decrease abuse and increase self-care. PCG’s are funded by Far Northern Regional Center. You may obtain this service by contacting your child’s Service Coordinator.

**Rape Crisis Intervention & Prevention Butte/Glenn County**
Contact: Yvonne Looms, Outreach Coordinator
P.O. Box 423 Chico CA 95973
(530) 891-1331

Yvonne provides training, counseling and referral for parents, staff and people with developmental disabilities. P.A.S.E “Prevention Against Sexual Exploitation for People with Developmental Disabilities” is a training about preventing abuse, as well as, what to do if abuse has occurred.
RESOURCES: BOOKS AND VIDEOS

Hingsburger, Dave J.


Practical and clear guidelines for dealing with reports of sexual abuse from people with intellectual disabilities.

What to teach and How to teach people with developmental disabilities.

Understanding and reducing the risk of sexual victimization of people with developmental disabilities.

A series of short interviews by Hingsburger on: Healthy Relationships; Abuse Free; Family Support; Self-advocates; Hope & Fear; and Bullying and Teasing
www.farnorthernrc.org/mylifemychoice > Resource Link > Hingsburger

Harber, Mary and Dave J. Hingsburger
Video, booklet and curriculum about providing personal care while establishing and maintaining appropriate boundaries in service to people with developmental disabilities.

Melberg, Karen and Dave J. Hingsburger
Birth to adulthood stories on raising a son or daughter who is ready for healthy relationships.

Siegel, Peggy C.
Two clearly illustrated, simply worded explanation of puberty changes for girls or for boys. Includes a Parent’s Guide.

Diverse City Press; 7654 Fifth Line; Angus, Ontario; L0M 1B1; Canada
Telephone/Fax: (877) 246 5226 www.diverse-city.co

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