

Research on Selected Topics REVOLVING AROUND Child Sexual Abuse



saprea

SAPREA EXISTS TO LIBERATE INDIVIDUALS AND SOCIETY
FROM CHILD SEXUAL ABUSE AND ITS LASTING IMPACTS.

FOREWORD

The work around this collection of research summaries began in 2015 with a goal to establish a best practice of creating research-informed services, resources, and messaging. We gratefully acknowledge the efforts of countless academic colleagues, governmental agencies, NGOs, and research groups that have shared their hard-won findings and offer critical insights to understanding the issue of child sexual abuse and its impacts. As we increased our efforts to combat abuse and bring awareness to the issue, we soon found it prudent to not only share these findings with stakeholders within Saprea, but also other interested groups and individuals seeking to join in making a difference.

We expect those who read these drawn conclusions to be sobered at the immense scale of the problem of childhood sexual abuse. We likewise envision a sense of hope as readers recognize the actionable solutions they can take to confront the realities of abuse, support those who have endured it, and seek to prevent it from impacting other children and families.

We invite readers to carefully examine the included research and send along pertinent information to help us update these summaries. While we acknowledge the limits of our scope and review, we reiterate our commitment that began many years ago to bring the best information to the table as we collectively work to liberate individuals and society from child sexual abuse.

Kolene Anderson

EDUCATION MANAGER



Child sexual abuse occurs when another person (adult, sibling, peer, etc.) forces or coerces a child or teen into sexual activity—physically or non-physically. Physical sexual activity may include fondling genitals, masturbation, oral-genital contact, digital penetration, vaginal intercourse, or anal intercourse. Non-physical sexual activities are considered sexual abuse because they exploit innocent children and can lead to the same long-term trauma as physical sexual abuse. Non-physical sexual activities may include unhealthy sexual exposure, voyeurism, or sexually explicit imagery.

Gathering data about the prevalence, impacts, and risk factors associated with childhood sexual abuse can be challenging. Information can vary based on location and nuanced definitions of what constitutes abuse. At Saprea we seek to identify themes that arise throughout peer-reviewed research and extrapolate the best practices found in thoughtful studies and reports that examine the issue of child sexual abuse. This research is critical to our work in bringing awareness to the issues of child sexual abuse and the subsequent healing that we seek to extend to all who have suffered its traumatic impacts.

TABLE OF CONTENTS

Child Sexual Assault Statistics 2020	1
Child Sexual Abuse Prevention	7
Digital Safety - Parental Controls	15
Emotional Regulation	23
Managing Emotions	33
Sex Trafficking	41
Sexting & Cyberbullying	49
Technology-Facilitated Child Sexual Assault	59
Online Resource Index	69



Child Sexual Abuse | KEY STATISTICS AND CITATIONS

PREVALENCE OF CHILD SEXUAL ABUSE



Child sexual abuse is a **global issue** affecting the lives of millions of children.

Stoltenborgh, M., Van IJzendoorn, M. H., Euser, E. M., & Bakermans-Kranenburg, M. J. (2011). [A global perspective on child sexual abuse: Meta-analysis of prevalence around the world](#). *Child maltreatment, 16*(2), 79-101.



According to UNICEF, **1 in 8 children** will be victims of sexual abuse worldwide.

United Nations Children's Fund (2020). [Action to end child sexual abuse and exploitation: a review of the evidence 2020](#). UNICEF, New York.

70%

In **70%** of reported sexual offense cases, the victim is a child.

Finkelhor, D., & Shattuck, A. (2012). [Characteristics of Crimes against Juveniles](#).

66%

As high as **66% of female inmates** report being sexually abused as children.

Karlsson, M. E., & Zielinski, M. J. (2020). [Sexual victimization and mental illness prevalence rates among incarcerated women: A literature review](#). *Trauma, Violence, & Abuse, 21*(2), 326-349.



A 2023 report from the CDC notes that in the U.S., racial minorities experience **higher rates** of childhood sexual abuse than the national average (12.6%).

- American Indian/Alaska Native: 18.8%
- Black or African American: 14.6%
- Hispanic or Latino: 13.3%
- Multiracial (non-Hispanic): 21.6
- Native Hawaiian or other Pacific Islander: 21.2%
- White (non-Hispanic): 12.0%

Swedo, E. A., Aslam, M. V., Dahlberg, L. L., Nilon, P. H., Quinn, A. S., Simon, T. R., & Mercy, J. A. (2023). [Prevalence of Adverse Childhood Experiences Among US Adults—Behavioral Risk Factor Surveillance System, 2011–2020](#). *Morbidity and Mortality Weekly Report*, 72(26), 707.

INDIVIDUALS WITH ELEVATED RISK



Children living in a home with a **single-parent** and a **live-in partner** are at much higher risk of maltreatment, including sexual abuse.

Sedlak, A. J., Mettenburg, J., Basena, M., Petta, I., Mopherson, K., Greene, A., & Li, S. (2010). [Fourth National Incidence Study of Child Abuse and Neglect \(NIS-4\): Report to Congress: Executive Summary](#). PsycEXTRA Dataset.



Girls are at an **increased risk** of sexual abuse and/or sexual assault over a lifetime when compared to boys.

Finkelhor, D., Shattuck, A., Turner, H. A., & Hamby, S. L. (2014). [The Lifetime Prevalence of Child Sexual Abuse and Sexual Assault Assessed in Late Adolescence](#). *Journal of Adolescent Health*, 55(3), 329-333.



Children with **disabilities**, physical or mental, are **three times** more likely to be victims of sexual abuse.

A) Lund, E. M., & Vaughn-Jensen, J. E. (2012). [Victimisation of children with disabilities](#). *The Lancet*, 380(9845), 867-869.
B) Jones, L., Bellis, M. A., Wood, S., Hughes, K., Mocoy, E., Eckley, L.,... Officer, A. (2012). [Prevalence and risk of violence against children with disabilities: A systematic review and meta-analysis of observational studies](#). *The Lancet*, 380(9845), 899-907.
C) Martinello, E. (2019). Applying the ecological systems theory to better understand and prevent CSA. *Sexuality and Culture*, 24, 326-344. <https://doi.org/10.1007/s12119-019-09629-z>



LGBTQIA+ youth are nearly **four times** as likely as their peers to experience child sexual abuse.

Friedman, M. S., Marshal, M. P., Guadalupe, T. E., Wei, C., Wong, C. F., Saewyc, E. M., & Stall, R. (2011). [A meta-analysis of disparities in childhood sexual abuse, parental physical abuse, and peer victimization among sexual minority and sexual nonminority individuals](#). *American Journal of Public Health*, 101(8), 1481-1494.



LGBTQ girls report experiencing more than **three times** the amount of unwanted and distressing sexual advances online than heterosexual girls; **LGBTQ boys** report experiencing nearly **eight times** more.

May-Chahal, C. A., & Palmer, C. E. (2018). [Rapid evidence assessment: Characteristics and vulnerabilities of victims of online-facilitated child sexual abuse and exploitation](#).

87% 

87% of youth who are trafficked for sex have experienced sexual abuse **prior** to being trafficked.

Landers, M., McGrath, K., Johnson, M. H., Armstrong, M. I., & Dollard, N. (2017). Baseline characteristics of dependent youth who have been commercially sexually exploited: Findings from a specialized treatment program. *Journal of Child Sexual Abuse*, 26(6), 692-709.
<https://doi.org/10.1080/10538712.2017.1323814>

IMPACT ON SOCIETY



The estimated economic cost of child sexual abuse totals over **\$9.3 billion** annually.

Letourneau, E. J., Brown, D. S., Fang, X., Hassan, A., & Mercy, J. A. (2018). [The economic burden of child sexual abuse in the United States](#). *Child Abuse & Neglect*, 79(3), 412-422.

2x

One study found that those who had **not** participated in a sexual abuse prevention program were **twice as likely** to report having experienced sexual abuse as a child compared with those who had participated in a sexual abuse prevention program.

Kenny, M. C., Helpingstine, C., & Long, H. (2020). [College students' recollections of childhood sexual abuse prevention programs and their potential impact on reduction of sexual victimization](#). *Child Abuse & Neglect*, 104, 104486.

IMPACT ON THE SURVIVOR

3x

Children who experience sexual abuse are at least **three times** more likely to attempt suicide later in life.

Angelakis, I., Gillespie, E. L., & Panagioti, M. (2019). [Childhood maltreatment and adult suicidality: A comprehensive systematic review with meta-analysis](#). *Psychological Medicine*, 49(07), 1057-1078.

40%

Survivors of child sexual abuse are more likely to **leave school without graduating**. In one longitudinal study, youth who were sexually abused were up to **40% less likely to graduate high school**.

A) Fergusson, D. M., McLeod, G. F. H., & Horwood, L. J. (2013). [Childhood sexual abuse and adult developmental outcomes: Findings from a 30-year longitudinal study in New Zealand](#). *Child Abuse & Neglect*, 37(9), 664-674.

B) Mitchell, J. M., Becker-Blease, K. A., & Soicher, R. N. (2021). [Child sexual abuse, academic functioning and educational outcomes in emerging adulthood](#). *Journal of child sexual abuse*, 30(3), 278-297.



Survivors of childhood sexual abuse report experiencing **14 or more days** of poor mental or physical health **per month**.

A) Fergusson, D. M., McLeod, G. F. H., & Horwood, L. J. (2013). [Childhood sexual abuse and adult developmental outcomes: Findings from a 30-year longitudinal study in New Zealand](#). *Child Abuse & Neglect*, 37(9), 664-674.

B) Downing, N. R., Akinlotan, M., & Thornhill, C. W. (2021). [The impact of childhood sexual abuse and adverse childhood experiences on adult health related quality of life](#). *Child Abuse & Neglect*, 120, 105181.

5x

Youth who have been sexually abused are **five times** more likely than the general population to be **hospitalized** for a mental or physical health issue.

Daigneault, I., Esposito, T., Bourgeois, C., Hébert, M., Delaye, A., & Frappier, J.-Y. (2017). [Health Service Use of Sexually Abused Adolescents Aging Out of Care: A Matched-Cohort Study](#). *International Journal of Child and Adolescent Resilience (IJCAR)*, 5(1), 53-66.



1 in 5 survivors of childhood sexual abuse developed **alcohol or illicit drug dependence** by age 30.

Fergusson, D. M., McLeod, G. F. H., & Horwood, L. J. (2013). [Childhood sexual abuse and adult developmental outcomes: Findings from a 30-year longitudinal study in New Zealand](#). *Child Abuse & Neglect*, 37(9), 664-674.



It is widely accepted that child sexual abuse of **males is underreported and under researched**; nevertheless, existing research confirms that the detrimental outcomes widely studied in females is similar to the impacts experienced by males.

Murray, L. K., Nguyen, A., & Cohen, J. A. (2014). [Child Sexual Abuse](#). *Child and Adolescent Psychiatric Clinics of North America*, 23(2), 321-337.



Nearly half of survivors of child sexual abuse are sexually **revictimized** in adulthood.

Sooglio, A. A., Kraus, S. W., Szczyznski, J., Jooma, S., & Molnar, B. E. (2021). [Systematic review of risk and protective factors for revictimization after child sexual abuse](#). *Trauma, Violence, & Abuse*, 22(1), 41-53.



28% of childhood sexual abuse survivors developed **substance misuse** and **38%** developed **post-traumatic stress disorder**.

Hailes, H. P., Yu, R., Danese, A., & Fazel, S. (2019). [Long-term outcomes of childhood sexual abuse: an umbrella review](#). *The Lancet Psychiatry*, 6(10), 830-839.

PERPETRATORS OF CHILD SEXUAL ABUSE

50%+

Over half of survivors of child sexual abuse were abused by **juveniles**, most of whom were acquaintances.

A) Gewirtz-Meydan, A., & Finkelhor, D. (2020). [Sexual abuse and assault in a large national sample of children and adolescents](#). *Child maltreatment*, 25(2), 203-214.
B) Finkelhor, D., Shattuck, A., Turner, H. A., & Hamby, S. L. (2014). [The Lifetime Prevalence of Child Sexual Abuse and Sexual Assault Assessed in Late Adolescence](#). *Journal of Adolescent Health*, 55(3), 329-333.

80%

Children **know** the perpetrator in **80%** of the reported cases of sexual abuse.

Finkelhor, D., & Shattuck, A. (2012). [Characteristics of Crimes against Juveniles](#).



When it comes to child sexual abuse, **peers** present a greater danger for boys than for girls. Boys are more likely to be sexually abused by a peer acquaintance and girls are more likely to be abused by a **romantic partner**.

Gewirtz-Meydan, A., & Finkelhor, D. (2020). [Sexual abuse and assault in a large national sample of children and adolescents](#). *Child maltreatment*, 25(2), 203-214.

COMMERCIAL CHILD SEXUAL ABUSE (TRAFFICKING/SEXTORTION)



The International Labour Office estimates the annual global profits from forced sexual exploitation totals **\$99 billion USD**.

International Labour Office. (2014). *Profits of Poverty: The Economics of Forced Labour*. International Labour Office.

46%

The majority of child sex trafficking victims were trafficked by a **member of their family** and nearly **46%** were trafficked by a parent/guardian.

Cole, J., & Sprang, G. (2015). *Sex trafficking of minors in metropolitan, micropolitan, and rural communities*. *Child abuse & neglect*, 40, 113-123.



Most victims of child sex trafficking were forced into their first commercial sex act between ages **12 and 17**.

Fedina, L., Williamson, C., & Perdue, T. (2019). Risk factors for domestic child sex trafficking in the United States. *Journal of interpersonal violence*, 34(13), 2653-2673. <https://doi.org/10.1177/0886260516662306>



Child Sexual Abuse Prevention and Minors Who Sexually Harm Other Children

Although many efforts have been made to reduce child sexual abuse, most efforts have focused on teaching a child to protect themselves, or on management of people who have already offended. Relatively few efforts have been made to prevent a person from sexually harming another before the first offense occurs.

THIS RESEARCH BRIEF COVERS:

- Common **myths and misconceptions** about youth who have sexually harmed others.
- General **risk factors** that may **increase** the chance of youth sexually harming others.
- **Protective factors** that may **reduce** the likelihood of youth sexually harming others.

SAPREA HAS ADOPTED THE FOLLOWING TERMINOLOGY:

- Juveniles or minors who have sexually offended.
- Harmful sexual behavior(s).
- Concerning or problematic sexual behavior(s).

PREFACE

Saprea recognizes the pain and harm that may be experienced as a result of child sexual abuse, including when the abuse is the result of actions taken by another minor (sometimes referred to as child-on-child sexual abuse).

Because our mission is to empower parents and caregivers to protect their children, we educate parents to understand and talk to their children about the harms that are caused by inappropriate sexual activity with another child.

We intentionally avoid using “child-on-child sexual abuse” when describing these situations because we want these at-risk children to also receive help; we also avoid labeling them as “abusers.”

Because parents are in a position to intervene, Saprea teaches them to maintain awareness of concerning sexual behaviors and foster communication with their children. These efforts will help reduce the risk of minors sexually harming other minors.

Nearly 50% of all sex abuse incidents against children are committed by children under 18, with the peak age for perpetration being around 14 years old.^{11,18}

MYTHS AND MISCONCEPTIONS

Research and treatment of children who have sexually offended have changed over time and continue to change with advancements in research and clinical practice.¹ While early research focused on describing and classifying minors who sexually offend (MSO),^{1,2} more recent research and treatment efforts focus on the youth's environment, the behavior in context of development, and leveraging the youth's strengths.^{1,3,4,5,6,7,8,9}

Despite these advancements, **many myths and misconceptions still circulate** among the general public, policy makers, and even clinical practitioners.^{10,11,12,17}

These myths can lead to policies and treatment programs that may increase risk for future offending and harm to MSO.^{2,10,13,14}

MSO are often perceived as a specialized group who are sexually deviant, deceitful and manipulative, dangerous and lifelong perpetrators, and male.^{1,2,10,11,12,15,16,17} However,

research highlights vast differences among individual MSO,²³ noting that **sex offending by youth is typically “a behavior that is rarely repeated, rarely continued in adulthood, and more likely to be part of a pattern of general delinquency.”**¹¹ Although there are youth who may fit the aforementioned stereotypes, classifying the majority of MSO by these characteristics may prevent effective intervention.

MYTH #1: MINORS WHO HAVE SEXUALLY OFFENDED ARE SEXUALLY DEVIANT.

Around 60–75% of male MSO are most interested in consensual activities with age-appropriate partners.¹⁰ Youth who experience atypical sexual interests (e.g., arousal to younger children, animals, or nonconsensual sex) or who experience high sexual arousal to non-sexual things, may do so in connection to their own history of sexual abuse, early exposure to sexually explicit material or environments, or biological influences that are poorly understood.^{2,18,19,20,21}

On measures of antisocial attitudes and beliefs about sex, women, or sexual offending, MSO score no different than youth with non-sexual offenses (e.g., physical assault, larceny, trespassing, etc.).¹⁶ It is important to note, however, that MSO experiencing atypical sexual interests is one of the strongest factors that sets them apart from their peers whose offenses are non-sexual^{16,20} and may be a risk factor for re-offending.^{2,22} Consequently, atypical sexual interests combined with antisocial attitudes and beliefs about sex, women, or sexual offending are important distinctions to consider when treating these youth. Conversely, targeting MSO who don't show atypical sexual interests with treatments aimed at addressing such may actually influence an MSO to develop deviant interests.¹⁰

Due to the high levels of sexual and physical abuse experienced by many MSO in their childhoods, programs using ethically questionable methods²² to test atypical sexual interest, or treatments that use punishment or shame-based methods may cause greater harm.^{2,5,10,16}

MYTH #2: MINORS WHO HAVE SEXUALLY OFFENDED ARE DECEITFUL AND MANIPULATIVE.

MSO scored no different than youth who offended non-sexually on measures of impression management, denial, or lying.¹⁶ Denial is common among youth who have had illegal behaviors (sexual or not).²⁰ Despite evidence that MSO are not more likely to lie than those who have non-sexual offenses¹⁶ and that lie detector tests do not reduce reoffending rates,²⁴ about 50% of treatment programs designed for minors with sexual offenses continue to use lie detectors,²⁴ which may cause additional labeling and harm.

Around 50% of MSO have been sexually abused and around 60% have been physically abused.

MYTH #3: MINORS WHO HAVE SEXUALLY OFFENDED WILL BE LIFELONG, PERSISTENT, AND DANGEROUS PERPETRATORS.

MSO have consistently shown to have a less extensive criminal history than those who have committed non-sexual offenses.¹⁶ After having contact with the justice system for a sexual offense, a small percentage of MSO (3–15%) will sexually re-offend in youth or adulthood.^{1,11,15} Among MSO, the majority have only one recorded police contact for a sexual offense.¹⁵ If they are rearrested, it is much more likely to be for a non-sexual crime.^{1,15}

While the prevalence of committing a reported sex crime in adulthood is higher for MSO versus the general population (8.5% vs. 3%, respectively) this group is responsible for only 4% of all reported sex crimes perpetrated by adults.¹⁵ **Adult sexual offending is better predicted by the number of police reports in adolescence rather than the type of offense perpetrated in adolescence.**^{2,15} Addressing general criminal behavior among youth may better serve to reduce later adult sexual offending.

MYTH #4: ONLY MALES SEXUALLY OFFEND.

According to surveys of survivors, the proportion of females committing a sexual offense is approximately six times higher than what is reported. In addition, females are much less likely than males to be prosecuted for a sexual offense (40% of females vs. 72% of males).¹ While the majority of accusations and convictions for adolescent sexual offenses are male (around 90%^{2,16,39}), offending by females may be vastly underestimated.¹⁷ This may be due to cultural perceptions and ideas about females, such as the view that females are nurturers or that abuse by women and girls isn't as harmful, especially to male victims.^{17,25}

RISK AND PROTECTIVE FACTORS

MSO are an incredibly diverse group, **with over 81 risk and protective factors** related to sexual offending.⁵ There is a wide range of reasons a child may engage in sexually harmful behavior.^{2,7,8,9,19,20,26,27,28,29,30} This means that there is likely **no single method to prevent** a minor from sexually offending, but rather a combination of preventative approaches.

A youth's personal characteristics may change which risk factors apply to them.^{16,23} Similarly, characteristics of the offense may also impact what risk factors apply most for that youth.^{2,3,7,23,31} For example, those who offend against peers may have more delinquent risk factors like antisocial attitudes, substance use, and school problems, while those who offend against younger children tend to have more frequent risk factors of sexual abuse histories, lower self-esteem, and lower social competence.^{16,23}

Keeping in mind the high variability of risk and protective factors within MSO sub-groups, below are some generalized categories of factors that may serve as targets for general prevention efforts.

PRIOR TRAUMA

MSO have more than five times greater odds of having experienced sexual abuse than youth who have offended non-sexually.¹⁶ Additional trauma-related risk factors include experiencing other types of abuse (e.g., physical, neglect, emotional abuse), being bullied, parents involved in intimate partner violence or coercive sexual relationships, living in high-crime communities, or substance use in the home.^{2,6,11,23,28}

SEXUAL SCRIPTS (KNOWING WHEN, WITH WHOM, AND HOW TO HAVE CONSENSUAL SEXUAL EXPERIENCES)

Lacking sufficient sexual knowledge can increase risk of offending and many offenses by MSO are out of ignorance or curiosity rather than malice.¹¹ Early sexual exposure (e.g., sexually explicit media), sexualized family environments, learned beliefs (such as rape myths or gender norms that encourage power differences), and world views that support offensive behavior may increase risk for sexual offending.^{16,19,30,31}

SUPERVISION

Effective supervision (including online environments^{1,32}) as well as reinforcing appropriate discipline and boundaries may serve as effective intervention targets, particularly if modeled after Multisystemic Therapy³⁴, which involves caregivers and community in treatment.^{8,9,17,20,33} MSO's offenses against younger children tend to be more opportunistic and in the setting of a

nurturing role, such as babysitting or playing.^{11,17} For peer sexual harassment offenses, increasing supervision in high-risk areas in schools was effective at reducing rates, whereas classroom instruction on sexual harassment alone was not.¹¹

SELF-REGULATION (MANAGING STRONG BEHAVIORS AND EMOTIONS)

MSO may lack effective skills to self-soothe, may harbor antisocial attitudes, and may have difficulty navigating complex situations using problem-solving skills.^{5,19} Additionally, MSO may struggle with higher social anxiety, poor boundaries, lack of empathy, impulsivity, or anger management abilities.^{16,19,27,30,35} Improving self-regulation may help reduce the likelihood that a child will have sexual behavior problems. Mindfulness may be a promising approach for those with atypical sexual interests.¹⁰

SOCIAL RELATIONSHIPS

Social isolation is also one of the top factors that sets MSO apart from those who committed non-sexual offenses.¹⁶ MSO

are more likely to have peer groups with drug or behavior problems, experience greater difficulty interpreting others' nonverbal signals, or lack same-age friendships.^{16,17,19} Many MSO report poor relationships with parents.^{36,37} Increasing parental support and improving effective disciplinary practices may be a helpful target of intervention.^{8,9,20,23}

Around 43% of MSO will be rearrested for a non-sexual offense, while only about 3-15% will be rearrested for a sexual offense.

BIOLOGY AND DEVELOPMENT

The behavior, emotions, and sexual attraction of an MSO may be influenced by genetic differences, structural or functional brain differences, or complications during infancy or in the womb.^{11,19,38} MSO are more likely to have learning disabilities which may impact the ability to learn social conventions and nonverbal social cues.¹⁴¹⁻¹⁴³ Additionally, **those with high levels of developmental disorders may lack the ability to understand consequences of their actions** or may engage with those who match their mental age, but are physically much younger.^{7,19} MSO with these challenges may additionally be placed in situations that increase risk of offending (such as care homes with other children).¹⁹

CONCLUSION

In sum, minors are responsible for a large portion of sexual abuse incidents against other children. Many misconceptions about youth who have sexually offended may negatively impact policy, treatment, and prevention efforts. By addressing these myths and targeting various risk and protective factors, parents, community partners, and advocates have the opportunity to empower communities to create meaningful change.

APPENDIX A—RECOMMENDED INTERVENTION AND MESSAGING

PRIMARY MESSAGING TOWARD PARENTS

1. **Believe you can make a difference.**
 - a. If you are feeling overwhelmed as a parent, reach out for help.
 - b. Your love and effort to build a relationship with your child can make all the difference.
2. **Help your child manage big emotions.**
 - a. Personally model healthy problem solving and how to deal with difficult emotions.
 - b. Teach specifically how to manage rejection, loneliness, social anxiety, and impulsivity.
3. **Teach sexual literacy.**
 - a. Teach how to understand sexual messages from various media and how they reflect (or neglect) real, consensual relationships.
 - b. Talk about the role of consent in relationships and that it is both inappropriate and illegal to have sexual contact with younger children.
 - c. Talk about what to do if they are curious about something that might be taboo or embarrassing.
 - d. Talk about how to build healthy relationships with peers, including sexual relationships.
4. **Supervise.**
 - a. Identify and manage high-risk situations and increase supervision and safety.
 - b. Establish family boundaries for touch, play, and how to treat others.
 - c. Help them develop accountability for actions that may harm themselves or others.
5. **Seek help.**
 - a. If you are concerned about your child's sexual behaviors, or that your child has been sexually abused, try to remain calm and refrain from shame, blame, and judgement. Emphasize your love for them, focus on the behavior itself, and get help.
 - b. Early intervention can make a big difference in the long run. Both you and your child will likely be able to learn the skills and tools needed to live a safe, happy, and healthy life.
 - c. Most effective interventions focus on ensuring safety for everyone involved.

PRIMARY MESSAGING TOWARD COMMUNITIES

1. **Encourage parents to seek help for their children.**
 - a. Develop safe community services geared towards teens and children who are struggling with sexual difficulties, impulses, and sexual behavior problems.
 - b. Increase conversations around child sexual abuse and provide ways for parents to talk about struggles their children may be having.
2. **Hold children appropriately accountable for actions that harm others while increasing support to help them make effective changes in their life.**
 - a. Improve justice system response by providing trauma-sensitive training for personnel.
 - b. Decrease sensationalized publicity of sexual abuse cases.
 - c. Provide a way for teens/ children to reintegrate into the community safely after an offense.
3. **Increase supervision in problem areas in schools and communities.**
 - a. Identify "hot spots" of risk and increase supervision in those areas.
 - b. Provide increased support for addressing ACEs.
4. **Provide support for struggling parents.**
 - a. Support development of hotlines, in-home visits, and parenting support.
 - b. Help parents connect with other members of their communities for support and assistance.
 - c. Support advancement of medical treatments for out of control sexual behaviors.

PRIMARY MESSAGING TOWARD MEDIA

1. **Focus on need for early intervention and decrease sensationalized stories of sexual abuse.**
 - a. Sensationalizing a story may prevent others from reporting for fear of media attention and publicity. Address the negative impacts of the behavior, and shift focus to the actions of helpful bystanders, available prevention programs, and steps to get someone the help they need if there are early warning signs.
 - b. Approach child sexual abuse as an issue of public health and highlight the need for medical/ psychological research and intervention.
2. **Counter common myths.**
 - a. Combat broad misconceptions that MSOs are a specialized group who are sexually deviant, deceitful and manipulative, lifelong persistent and dangerous perpetrators, and only male.
3. **Focus on the unacceptability of the behavior, not the person.**
 - a. Use language that focuses on the behavior ("illegal sexual behavior" instead of "perpetrator"), and avoid labels such as "perpetrators," "abusers," "molesters," etc.
 - b. Highlight programs and resources that are working to help people change their behaviors.

APPENDIX B—KEY STATISTICS AND ADDITIONAL RESOURCES**KEY STATISTICS:**

- Nearly 50% of all sex abuse incidents against children are committed by children under 18.^{11,18}
- The peak age of sexual offenses by youth is around 14 years old.¹¹
- Only about 3–15% of youth who have sexually offended will be rearrested for a sexual offense.¹¹
- Around 50% of youth who have sexually offended have been sexually abused.¹⁶
- Around 60% of youth who have sexually offended have been physically abused.¹⁶

ADDITIONAL RESOURCES:

- Stop It Now resources:
<https://www.stopitnow.org/help-guidance/help-services#helpline>
- Find a specialized therapist:
<https://childmolestationprevention.org/treatment-sites-in-north-america/>
<https://safersocietypress.org/treatment-referrals/>
- Booklet: Taking Action: Support for Families of Children with Sexual Behavior Problems
<https://safersocietypress.org/store/taking-action-children-download/>
- Booklet: Taking Action: Support for Families of Adolescents with Illegal Sexual Behavior
<https://safersocietypress.org/store/taking-action-adolescents-1/>

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Allen, B., Berliner, L., Shenk, C. E., Bendixsen, B., Zellhoefer, A., Dickmann, C. R., ... Chen, M. J. (2018). Development and Pilot Testing of a Phase-Based Treatment for Preteen Children with Problematic Sexual Behavior. *Evidence-Based Practice in Child and Adolescent Mental Health*, 3(4), 274–285. <https://doi.org/10.1080/23794925.2018.1515580>

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Digital Safety: Parental Attitudes and Controls

Technology, digital media, and online activities have become an integral part of day-to-day life across the globe. Usage of smartphones, laptops, tablets, and other information and communication devices (internet connected technologies, or ICTs) is nearly universal, and access to these devices is becoming normalized among younger audiences. While this widespread access has provided advancements in communication, education, and entertainment, **it has also facilitated opportunities for exposure to sexually explicit material for children and teens.**

THIS RESEARCH BRIEF:

- Outlines the trends of increased technology use globally among youth.
- Describes some potential harms that children may encounter as they use technology.
- Reviews different actions parents are taking to mitigate the risks of their children experiencing or participating in harms facilitated by technology.
- Recommends strategies parents can use to increase their child's capability to operate online in safe and healthy ways.

TECHNOLOGICAL TRENDS AMONG TODAY'S YOUTH

It is estimated that one in three children globally is already an internet user. And when looking at the broader population, at any given time, a third of all internet users are children (under 18 years of age).¹ Internationally, mobile devices are how children are most commonly accessing the internet. Smartphone ownership and use has become a central part of teen life across genders, ethnicities, and socioeconomic backgrounds. According to the Pew Research Center, **95% of teens report owning a smartphone or have access to one.** Additionally, 45% of teens report they are online on a near-constant basis.² And while frequent ICT use is prevalent across various teen populations, daily screen time can vary among demographics. For instance, recent estimates of young people's screen time in lower-income homes reported an average of nearly two additional hours of screen media per day than peers in higher-income homes.³

The impact technology use and electronic media consumption have on the well-being of children has been investigated by many researchers and generated mixed reports.^{4,5} For instance, research has revealed how **healthy internet habits can correlate with positive outcomes such as academic achievement, literacy, and even cognitive development.**⁶ Digital media and technology can also supply youth with information and education regarding sexual health and development that may have otherwise been unavailable, particularly among low-income populations. Increased usage of technology also coincides with inherent risk of harmful encounters with material that is neither age-appropriate nor accurate.

POTENTIAL HARMS FACILITATED THROUGH TECHNOLOGY

Increased online activity and technology use among children and youth can **facilitate exposure to content that may adversely impact a youth's sexual education, behaviors, and attitudes.**⁷ Additionally, parents and caregivers should be aware individuals online may target vulnerable children and teens via the technology that is ever-present in their daily lives. And while some of these harms are perpetrated by older teens or adults, they can also be perpetrated by a youth's peers. Such peer victimization has been attributed, in part, to **increased levels of problematic internet use** among children and adolescents, which may be exacerbated by the online disinhibition effect.^{8,9}

Given these valid concerns, it is no surprise then that most parents express discomfort or distress regarding their children's engagement with digital media and technology. One study showed that 65% of parents experience concern over the types of experiences their child or teen is encountering via ICTs. The same study showed that nearly six out of ten parents routinely check their child's browsing history and/or text messages.¹⁰ Researchers suggest that **such concerns among parents are indeed merited**, especially as ICTs continue to become more intrinsic to daily connections and functioning.⁹

Parents and caregivers commonly express feeling inadequately equipped to address the following elements of their child's online experience:¹¹

- Managing the pressures and impacts of increased social media activity.
- Early exposure to mature content.
- Excessive screen use.
- Struggling with or an inability to have in-person interactions.
- Cyberbullying.
- The exchanging of explicit messages and images.

SEXUALLY EXPLICIT CONTENT

Sexually explicit content, which includes what many term as "pornography," has been made available to younger audiences through the widespread use of ICTs.

This access increases the risk of children's early exposure to graphic sexual material, whether intentionally or through accidental encounters. Such exposure remains prevalent among youth across demographics, backgrounds, and geographic locations. One 2016 study in the UK found that **among the 11- to 16-year-olds they surveyed, 53% had viewed sexually explicit material at least once.** Of this sample, 94% had been exposed to such material before the age of 14.¹²

Early exposure to explicit material is not only age-inappropriate but can also lead to adverse effects in a youth's sexual development. Sexually explicit content found online often **portrays inaccurate and violent depictions of sexual behaviors**, and the consumption of such materials can adversely impact the sexual attitudes, behaviors, and expectations among children and teens.^{7,13} This is especially the case if engaging with explicit themes becomes a sustained pattern at a young age. Repeated viewing of sexually explicit materials may distort a young person's view of sexual relationships, gender roles, and increase the likelihood of youths demonstrating sexist attitudes and perpetuating harmful stereotypes within their own relationships.^{14,15}

PARENTAL ATTITUDES AND CONTROLS

While most parents feel that the benefits of their child being online outweigh the potential harms, they generally report chief concern over protecting children from inappropriate material or persons with malintent.¹⁶

Parental controls to mediate their children's interactions with potential harms can take various forms: restricting technology use or access to devices; limiting screen time;¹⁷ outlining approved activities; establishing home rules and expectations revolving around technology use;¹⁸ restricting use through technical means (content filters, network access limits, etc.);⁷ monitoring use through technical means (surveillance, checking online activities, logs of accessed media, etc.); and engaging with children to educate them about the risks/benefits of various online activities.¹⁹

While no single strategy will eliminate risk, **it is important for parents to consider the individual circumstances of their child and what controls may help to mitigate risky behavior**—particularly with children who lack maturity or struggle with problematic internet use.²⁰

Parenting styles and confidence can vary according to education, socio-economic status, cultural background, and geographical location.²¹ Parents with the highest confidence in managing their child's technology use are also most likely to believe that they know more than their child does about technology and online activities. Investigation on parent awareness of online risks reaffirmed **the importance of the parent-child relationship in dealing with a child's negative online experiences**. Sampled parents reported that a child's disclosure of a harmful encounter was the primary way they found out about these experiences. The next most common way parents found out about their child's online experience was through their own investigation or through reports from their spouse or partner.

It should be noted that children often report encountering objectionable content and negative online experiences outside the home. Evidence suggests that household-level filtering is generally ineffective in reducing the chance of children from ever encountering adverse online experiences, partly because of the ubiquitous nature of internet availability away from home.^{22, 23} Furthermore, parents should consider the merits of the argument that “by limiting their access to [a broader] range of content, users are not learning the information literacy skills that afford genuine and sustainable protection in the digital arena.”²⁴ **While filters and controls can be a helpful tool, they should not be viewed as fool-proof or a permanent solution to entirely mitigate online risks.**

Educating and orienting children to the online landscape is a critical foundation for any strategy.¹⁵ In this vein, **parents can teach and model what a healthy relationship with technology looks like**, not only in terms of what content they consume, but also what content they create and what identity they present to others.⁸ A media use plan will help a child better understand the importance of digital citizenship and the magnitude of their digital footprint. As parents provide a supportive role along with the expressed goal of helping children self-regulate their internet and social media use, young people can develop the “online resilience” and “digital optimism” needed to take advantage of the positive aspects of the internet and steer clear of potential harms.

Monitoring and supervision strategies can be tailored to the specific circumstances for children who are accessing social media and other online content. For some children, simply identifying the risks and showing them how to navigate around or away from harmful material/situations will be sufficient. For those who are more prone to engage in risky behaviors, a more direct approach might be needed to alert parents and caregivers when boundaries are crossed (see “Controls” section above).

While parental enforcement of controls regarding technology is crucial, it may also spur potential tension with the child. For this reason, **controls should be applied judiciously**, as fractures in the child-parent relationship can prompt additional complications or even more online risky behavior. **We do not endorse parents threatening a complete withdrawal of “internet privileges” as a negative consequence** (research demonstrates that such threats act as a barrier to future communications where a child needs help), but parents could consider the option to closely monitor online activity until the child builds trust and confidence in their ability to engage online in a healthy way.

Pairing this education with well-understood boundaries and value-based expectations is a natural extension for any behavior (online or otherwise). Discussions about boundaries, consent, empathy, privacy, communication, and healthy sexual behaviors will not only help increase a child's digital literacy but will also increase their resilience and autonomy in other areas of life. As many ICT-facilitated harms occur in conjunction with offline harms,²⁵ and can yield similar adverse impacts, **the support and two-way communication a parent fosters in the home are essential** to the child's ability to navigate through difficult situations, both online and offline.⁸

Ultimately, parents who want to proactively protect their children can take the following researched-based actions: enabling their children's capacity through critical thinking, empathy, and high self-esteem; fostering the technical capabilities of their children (and others they interact with) to establish well-informed security measures and monitoring strategies; promoting constructive two-way communication between peers and adults; and accentuating positive peer status, academic performance and mentorship, which can act as barriers to online abuse.¹⁹

CONCLUSION AND RECOMMENDATIONS

ICTs have become an integral component of 21st-century living; the impacts of this integration will continue to shape the social developments, trends, behaviors, and relationships among youth. While proactive parents understand that there are certain activities that carry unduly high risk and should wisely be avoided, they acknowledge the reality that children and youth expect (and in many cases are required) to operate in a digital environment and abstaining from all online activities is not a reasonable solution. **Thus, parents and mentors should actively help to prepare children for a wide spectrum of encounters (positive and negative).** We recommend preparing children by orienting them to the risks that are present for the online activities they will be participating in, along with strategies for navigating away from offensive material and getting support to identify potentially harmful situations.

APPENDIX A—RECOMMENDED INTERVENTIONS

PRIMARY MESSAGING TO PARENTS

- 1. Teach and model digital literacy.**
 - a. Help your child learn to navigate and regulate equitable, age-appropriate ICT use.
 - b. Learn about risky internet behaviors and their potential harms. Teach your child about them and their adverse effects—for all parties involved.
 - c. Educate children on recognizing sexually inappropriate advances or solicitations—whether in-person or online—and how to navigate around such encounters.
 - d. Initiate frequent, open discussions about sexually explicit content and what your child can do when they encounter such content.
- 2. Enforce structure around ICT-use.**
 - a. Clearly and consistently communicate boundaries around screen times, access to devices, what constitutes appropriate content, online activities, social media engagements, and other conditions of technology use.
 - b. Monitor internet use, including the ICTs your child uses, the accounts and profiles they've created, and the sites and social media channels they frequent.
 - c. Determine what security measures, filters, and other controls/supervision you want to implement on your child's ICTs. As your child matures, involve them in identifying and employing safe strategies.
 - d. Be aware of which adults can communicate to your child via ICTs and monitor their communications.
 - e. With any approach, be mindful of guiding youth toward the eventual goal of being capable independent digital users.
 - f. Avoid penalizing children with the complete withdrawal of their digital privileges.
- 3. Build communication and trust.**
 - a. Educate and model the importance of boundaries, consent, regulation, communication, and other skills essential to your child's autonomy in online and offline spaces.
 - b. Within the boundaries you have set, allow your child the space and opportunity to familiarize themselves with ICTs in order to help build their skills in digital literacy and participate in meaningful engagements online.
 - c. Inquire after your child's questions, concerns, and curiosities related to tech-facilitated interactions, content, and behaviors. Listen with empathy and openness to their disclosure of any missteps.

PRIMARY MESSAGING TO COMMUNITIES

- 1. Model parental interventions.**
 - a. Educate parents and caregivers about the importance of having frequent, open conversations with their children about the sexually explicit content they will inevitably encounter via ICTs, and how the child may feel and/or respond when they come across such content.
 - b. Prompt other parents and caregivers to examine their own relationship with ICTs, their views regarding sexual content, and what factors (cultural values, religious beliefs, etc.) contribute to those views.
 - c. Explain what a media use plan is, why it is helpful in increasing digital safety, and how it can be effectively implemented in the home.
- 2. Raise awareness around internet controls.**
 - a. Clarify that while internet filters and other security measures can be useful tools in mitigating tech-facilitated risks, they should not serve as substitutes to more effective protective factors, like open communication, modeling healthy regulation, and fostering a safe and supportive home environment.
 - b. Help connect parents with tools that identify/bring awareness to websites, platforms, and apps that are likely to place a child's safety at risk.
 - c. Collaborate with educators and other community members to help address, examine, and/or improve the security measures being implemented at schools and other youth-serving organizations in your area.

PRIMARY MESSAGING TO MEDIA

- 1. Help parents make more insightful decisions around the content they consume and encourage.**
 - a. Provide ratings, warnings, and descriptions that accurately convey the maturity level and targeted audience of the content being presented.
 - b. Use transparency to clearly communicate the criteria assigned to blanket terms such as "kid friendly," "general audiences," and "TV-MA."
 - c. Ensure audience settings for streaming services and multimedia platforms are accessible, transparent, and easy to adjust.
- 2. Educate and raise awareness around solution-based efforts.**
 - a. When promoting security measures such as filtering systems, clarify that children are still at risk of encountering harmful content and/or behaviors even with such measures in place.
 - b. Call out trends, sites, platforms, and apps that may increase the risk of a child experiencing technology-facilitated harm and what parents can do to combat such risks.
 - c. Raise awareness around legislation policies, community events, parental education initiatives, and other solution-based efforts around reducing the risk of technology-facilitated harms

APPENDIX B—KEY STATISTICS AND ADDITIONAL RESOURCES

KEY STATISTICS

- 53% of 11–16-year-olds report seeing online pornography at least once. Of this sample, 94% report viewing online pornography before age 14.¹²
- 95% of teens report owning a smartphone or having access to one.²
- In 2020, about 4.67 billion people (59% of global population) were active internet users.²⁶
- 45% of teens report that they are online almost constantly.²⁷
- Adolescents who report having a positive relationship and open communication with their parents engage in fewer risky sexual behaviors, online and offline.⁸

ADDITIONAL RESOURCES

- Thorn.org <https://parents.thorn.org/situation/>
- AMAZE.org <https://amaze.org/?topic=personal-safety>
- Global Kids Online <http://globalkidsonline.net/updates/>
- Social Media Safety <https://www.rainn.org/safe-media>
- Teaching Digital Citizens in Today's World https://dte2bohyu2u2w9.cloudfront.net/education/sites/default/files/tlr_component/common_sense_education_digital_citizenship_research_backgrounder.pdf
- Everything You Need to Teach About Digital Citizenship <https://www.commonsense.org/education/digital-citizenship>

APPENDIX C—GLOSSARY OF TERMS

Digital footprint is the record of data generated through online activities linked back to a specific person. This can include a user's browsing/search history, images/messages they post or send (even deleted ones), content they "liked" on social media, and online profiles they create.

Digital literacy describes a person's level of technical and social ability specifically used to navigate the online environment in an effective way. Understanding and practicing safety during online activities is a key component of digital literacy.

Filters are controls or measures that restrict an internet user from accessing certain websites or content. "Underblocking" occurs when a filter incorrectly allows a user to access text or images that should be blocked. "Overblocking" occurs when a filter doesn't allow content to be shown that is, in fact, suitable for the user.

Internet of Things (ICT, IoT): includes smart-devices (cameras, TVs, speakers, appliances, etc.) that are connected to the internet and are often found in the home.

Media use plans are one way that parents can work with their children to establish defined expectations relating to how they consume media or use technology. Effective media use plans outline appropriate online *content, conduct*, and what to do when a child encounters a challenge.

Online disinhibition effect: when people say and do things online that they wouldn't ordinarily say and do in the face-to-face world.

Problematic internet use (noted as PIU in academic literature) occurs when an individual's preoccupation with online activities results in social, occupational, or financial difficulties. In some cases, pathological behavior connected with internet use is present.

Screen time is a common expression that measures the amount of time spent using any computer, television, mobile device, or game console.

APPENDIX D—RISKY ONLINE BEHAVIORS**RISKY ONLINE BEHAVIORS**

- Visiting sites with content intended for adults (e.g., pornography).
- Sending/receiving sexually explicit images.
- Having sexual conversations with adults.
- Posting personal information about yourself or others.
- Providing financial information to unsecure sites.
- Visiting sites with smart feeds or recommendations that continue to provide content automatically (e.g., Youtube's video algorithm and continuously streamed video services).
- Accepting friend requests from strangers on social media.
- Sharing your address or current location with others online.
- Having public profiles that can be viewed by anyone.
- Creating social media accounts that parents are not aware of.
- Using gaming applications or services that allow chats or unmonitored communication.
- Access to accounts where unmonitored purchases can be made.

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EMOTIONAL REGULATION IN CHILDREN:

How a Child's Ability to Cope with Emotion Serves as a Protection from Child Sexual Abuse

THIS RESEARCH BRIEF DESCRIBES:

- the relationships between child sexual abuse (CSA) and emotional regulation.
- the developmental course of emotional regulation, and
- how children can learn strategies to regulate their emotions.

CHILD SEXUAL ABUSE AND EMOTIONAL REGULATION

Emotional regulation difficulties (referred to in this brief as *emotional dysregulation*) are tied to both **CSA victimization and sexually harmful behavior** and is often **cyclical in nature**.^{2,10} (See *Figure 1*.)

Children who are impulsive, lonely, have high emotional needs, are struggling from the effects of past trauma, or other mental health difficulties may be at an increased risk for being sexually abused.^{1,3} If victimization does occur, the **effects of trauma can impact emotional regulation** (e.g., elevated PTSD, anxiety disorders, acting out behaviors) as well as factors related to the individual's ability to learn how to regulate

The ability (or inability) to regulate emotions has large impacts on a child's life, including their risk of being sexually abused, sexually harming others, or the ability to recover if they are abused.^{1,2,3,4} Although there are many ways to define the term *emotional regulation*, for the purposes of this brief we define *emotional regulation* as the ability to redirect the course of emotional experiences in a helpful, adaptive way.^{5,6,7,8,9} And because a child's ability to cope with their emotional experience is such an important protective factor, Saprea has adopted this information as part of our toolkit for empowering parents to raise capable kids.

their emotions.^{2,3,11,12,13} These include factors like brain development, sensitivity to stress, and the ability to relate and feel securely attached to others. **Emotional dysregulation due to trauma can escalate** throughout childhood and into adulthood, and can result in difficulties with describing feelings, mood disruptions, a

Accordingly, helping children to regulate emotions such as loneliness, impulsivity, anxiety, anger, boredom, lack of empathy, and low self-esteem may reduce the risk for problematic sexual behaviors or that they will sexually harm another later in life.¹⁶

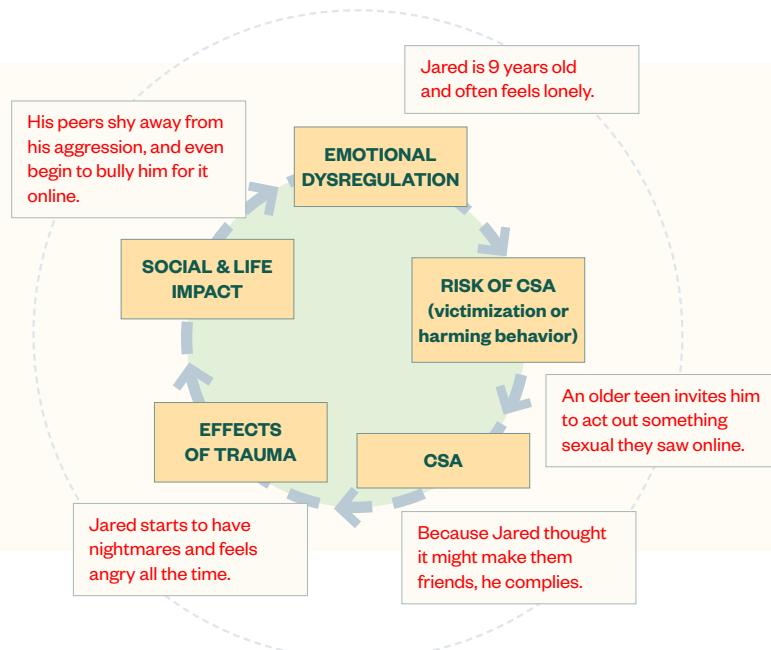
sense of emptiness or dissociation, explosive anger, empathy deficits, risky behavior, and impairments in social and life functioning.^{1,2,3,10,11,14,15} It's important to note that **dysregulation doesn't mean a child has been sexually abused**; there can be multiple reasons

why a child might show dysregulated emotional behavior (e.g., stress at home or school, autism, growing pains, bullying, ADHD, etc.).^{1,2,5}

Figure 1.

EXAMPLE:

Jared feels worse about himself which increases his emotional reactivity and risky behaviors. In turn, this makes him more susceptible to further relationship difficulties and risk for revictimization.



Along with being a risk for and potential consequence of sexual abuse victimization, emotional dysregulation may also be a risk factor for **problematic sexual behaviors that may harm others**. Accordingly, helping children to regulate emotions such as loneliness, impulsivity, anxiety, anger, boredom, lack of empathy, and low self-esteem may reduce the risk for problematic sexual behaviors or that they will sexually harm another later in life.¹⁶

Building a child's resilience and ability to regulate through early intervention and caregiver support may be a protective factor against this cycle and the risk of future perpetration, victimization, or general emotional dysregulation.^{10,11,13,17}

DEVELOPMENTAL COURSE OF EMOTIONAL REGULATION

Figure 2.



The development of emotional regulation begins at birth and continues through life. After birth, **both genetics and the child's interaction with their surroundings** continue to influence how they learn to manage emotional experiences.^{8,18} A child's gender may influence how a parent responds to their child's various emotions.^{11,12,19} For example, parents are less likely to hold and soothe baby boys. Across all developmental stages, those who lack adequate **nutrition, exercise, sleep, and emotional warmth** from caregivers are at higher risk for emotional dysregulation, which influences a child's risk of CSA.²⁰

In **infancy and toddlerhood (0-2 years old)**, a child's brain is rapidly developing and forming the **critical neurological framework** that establishes basic emotional expectations and world views (e.g., "I am safe." or "I am abandoned.").^{10,18} These expectations can later influence how a child evaluates or interprets an emotional situation and their capabilities to self-soothe.⁶ In this stage, infants learn to get their caregiver's attention when distressed, imitate the caregiver's emotional expressions,

and will escalate emotional cries quicker if caregivers typically wait to intervene until the child is very distressed.^{18,21,22} Because the neurological hardware of emotional regulation is still forming, **infants primarily rely on their caregivers to regulate emotions for them.**^{8,10,12,14,18}

Early childhood (3–5 years old) marks a pivotal phase of **emotional regulation milestones.**^{12,18} Emotional dysregulation becomes more apparent during this stage through acting out behaviors (e.g., bullying or hitting others) and withdrawing behaviors (e.g., lack of eye contact or high anxiety).^{11,12,23} What is considered regulated or dysregulated behavior is heavily influenced by culture.^{8,24} When emotional regulation is well developed, children are met with **positive responses from their environment.**^{10,21,22} They can acquire a sense of being in control of their emotional experiences which then leads to a positive self-image and optimism to face further emotional challenges, resulting in improved future outcomes.¹⁸ On the other hand, behaviors that go against social or cultural norms can elicit negative reactions (e.g., bullying, shame, isolation, etc.) from the child's social environment. In turn, these **negative reactions can either worsen or maintain the original regulation problems.**²³

Through school-age (6–9 years old), basic emotional regulation skills are accompanied by an increased awareness of **social expectations** around emotions.^{18,22}

By around age 10, children are **capable of using most regulation strategies** including more complex forms like being able to reframe or “reappraise” emotional experiences. Additional group dynamics become more significant **during adolescence (14–18 years old),** and regulation skills **continue to develop** throughout life.¹⁸

HOW CHILDREN LEARN TO REGULATE EMOTIONS

Emotional regulation skills that can help reduce the risk of or effects from CSA are learned through three primary ways: the emotional climate of the family, observation, and direct coaching from caregivers and school programs.^{22,25,26}

LEARNING THROUGH THE EMOTIONAL CLIMATE OF THE FAMILY.

The emotional climate of the family entails several factors, including the quality of the child's relationship with caregivers (“attachment”), parenting styles, the quality of the relationship between caregivers, and cultural influences.

The caregiver relationship is the first and most important relationship the child forms. It creates the basis through which children learn to observe, understand, and regulate their own emotions.^{22,23} Children whose relationships with their caregivers

are characterized by **confidence and stability** (a secure attachment) are more likely to develop effective emotional regulation, which can have a cyclical positive effect through development.^{13,27} For example, teenagers who classified their parental relationship as secure demonstrated higher emotional regulation skills and lower feelings of anxiety and/or hostility.²²

The influence of parenting styles, the quality of the relationship between caregivers, and cultural practices on the family climate and emotional regulation are discussed further in the *Managing Emotions* research brief published by [Saprea](#).

LEARNING THROUGH OBSERVATION.

Children, especially young children, learn about emotions through **mirroring the behaviors, facial expressions, and relationships** modeled by their caregivers.²³ As children observe a wide range of emotions experienced by their caregivers or other important models, they begin to learn the value of different emotions in responding to various situations, as well as emotional responses expected in their culture.^{6,22,24,28}

Through specifically observing the **caregivers' interpersonal relationships**, children also learn about the relational role of emotions and how they are used to communicate. How the child is treated by their caregivers as well as how their caregivers treat one another can impact what emotions and behaviors children believe are appropriate to display in their own relationships, such as aggression, coercion, empathy, or patience.^{22,23}

In the aftermath of a disclosure of child sexual abuse, children often **observe their caregivers to learn how to cope** with emotional distress. Researchers have found that children may struggle to recover as quickly if their caregiver is not provided the social support necessary to manage their own emotional regulation.²⁹

LEARNING THROUGH DIRECT COACHING FROM CAREGIVERS AND SCHOOL PROGRAMS.

Beyond having a healthy emotional family climate and learning through observation, children can learn through direct emotional regulation coaching by caregivers or school programs.

Effective emotional regulation coaching includes **sequenced skills** (e.g., learning basic emotions before complicated ones) that are appropriate to development, **consistency and repetition, active participation** (e.g., roleplays), **personalization**, and **learning a variety of strategies.**^{22,23} Rather than only focusing on managing unpleasant emotional experiences (e.g., learning to breathe when angry), effective emotional regulation also includes learning to increase pleasant emotions (e.g., learning to savor small moments).^{22,30} Strategies that many people use but which can lead to more emotional dysregulation over time include suppression (e.g., not thinking about or physically showing emotions), rumination (e.g., repetitiously getting caught in emotions), or

avoidance (e.g., avoiding situations that elicit certain emotions).¹

Across age groups and along the trauma continuum, **the most common emotional regulation skill is awareness and acceptance of emotions.**²¹ This includes the child being able to recognize and label a variety of emotions; identify how their body, behaviors, and emotions connect to each other (e.g., their stomach hurts when they are anxious, or they stomp their foot when they are angry); and to notice what unmet needs their emotions may be indicating. As a child develops these skills early on in their youth, the ability to emotionally regulate can translate into predictive lasting benefits extending into maturity. For instance, one study found that three-year-olds who could regulate frustrating emotions were found to be more likely to be rated as high in cooperation and low in problem behaviors in later school years.²²

It is important to note that caregivers may struggle with awareness and acceptance of their own emotions—even pleasant emotional experiences. This highlights the importance of resources for caregiver regulation, as children will observe and emulate what is modeled by those who raise them. (See Appendix C for suggested emotional regulation learning by specific age group and for supplementary techniques.)

CONCLUSION

Emotional regulation is vital in the prevention of and recovery from child sexual abuse. It is developed throughout the course of childhood, and can be deliberately taught through attentive caregivers who, through their own regulation and deliberate coaching, can have a lifetime of impact on a child's emotional well-being.

APPENDIX A – PRIMARY MESSAGING

MESSAGING TO PARENTS:

1. Be an example.
 - a. Develop your personal emotional regulation skills and be patient with yourself.
 - b. Check the emotional climate of your family and take steps to enhance positive experiences (e.g., hold regular family dinners).
 - c. Learn what your child's early emotional triggers are and respond early.
 - d. Utilize stories or media to help you demonstrate effective/ineffective emotional regulation.
2. Teach a variety of strategies your child can use to increase pleasant emotions and manage unpleasant ones. Find more information about strategies at saprea.org or check out this list of emotional regulation resources.
 - a. Begin with teaching awareness and acceptance of emotions.
 - b. Discover what your child values and help them problem-solve to meet goals.
 - c. Give your child opportunities to practice emotional regulation and connect with others.
3. Teach as they grow.
 - a. Start when they are young, build on skills, and be patient as they learn new strategies.
 - b. Provide children control and information about difficult situations, when possible.
 - c. Meet their basic needs of sleep, nutrition, exercise, and love.
 - d. Talk to your pediatrician if you have concerns about your child's emotional development.

MESSAGING TO COMMUNITIES:

1. Facilitate parent's ability to regulate.
 - a. Provide hotlines, in-home visits, or access to other support resources to help parents regulate strong emotions.
 - b. After a child's disclosure of abuse, provide mental health support for caregivers.
 - c. Facilitate community connection and opportunities to socialize.
2. Support emotional regulation-informed education.
 - a. Include social-emotional learning in school curricula.
 - b. Include emotional regulation components in treatment for students with behavioral or mental health problems.
3. Provide children as much control of their situation as possible.
 - a. In interactions with the justice system, provide children as much information and control as possible.
 - b. Provide hotlines or other support resources that children can reach out to if needed.

MESSAGING TO MEDIA:

1. Develop media/cartoons that demonstrate effective emotional regulation.
 - a. Develop stories that parents can use to teach about emotions.
 - b. Provide wide access to programming that is emotionally beneficial to children (e.g., *Sesame Street*).
2. Deliver supportive messaging to parents.
 - a. Combat stigma for families to seek help.
 - b. Promote community awareness campaigns and programs that support families.
3. Highlight stories of successful responses to difficult situations.
 - a. Highlight community programs working to improve emotional regulation in children and communities.
 - b. Highlight community members who are resilient when faced with difficulty.

APPENDIX B – KEY PRINCIPLES AND STATISTICS**KEY PRINCIPLES:**

- Difficulties with emotions is a risk factor for child sexual abuse and/or concerning sexual behaviors.
- Child sexual abuse trauma can result in difficulties with emotions.
- Children look to their caregivers to learn how to regulate their emotions.

KEY STATISTICS:

- About 29% of children who had been sexually abused had emotional-behavioral problems, compared to about 7% of those who hadn't been abused.³²
- 17% of students reported they had seriously considered committing suicide sometime in the last year.³³
- The median age of developing an anxiety disorder is 17 years old.³⁴
- Cultural values impact a person's perception of an emotional situation.²⁴
- Western and European cultures tend to focus on emotions related to individuality, while Eastern cultures tend to focus on emotions related to collective harmony.²⁴
- For every \$1 invested in social-emotional learning, there is an \$11 return on investment.²⁶

APPENDIX C – SUPPLEMENTAL DEVELOPMENT CHARTS

This chart represents a breakdown of typical emotional development in children, red flags to watch for, and suggested emotional regulation learning for specific age groups.

Note: The red flags on this list are not necessarily indicative of sexual abuse since emotional dysregulation can be the result of (or risk for) many different disorders or life circumstances. However, the difficulty with regulation should still be addressed. Pediatricians, therapists, or other qualified specialists can provide additional assistance and resources.

AGE	TYPICAL STRATEGIES & MILESTONES	RED FLAGS	SUGGESTED ER LEARNING
Toddler (About 0-2)	<ul style="list-style-type: none"> Emotionally reactive Relies heavily on caregiver for soothing Learns to imitate caregiver emotions Learns to distract or move away from distressing situations 	<ul style="list-style-type: none"> Frequently inconsolable Uninterested in exploration or play Lack of emotional expressions 	<ul style="list-style-type: none"> Seek to regulate your own emotions as a caregiver. Rock, cuddle, redirect, and use a soothing voice. Watch for and respond to early emotional signals. Teach names of and demonstrate a variety of emotions.
Early Childhood (about 3-5)	<ul style="list-style-type: none"> Critical period of ER development Can suppress emotions, distract themselves, and change their environment Develops basic ability to change thinking about emotions Develops greater empathy, emotional regulation for most emotions, and conflict-resolution skills 	All previous plus: <ul style="list-style-type: none"> Lack of eye contact Overly aggressive Isolation or running away Frequently "zoning out" Emotions too intense for situation Uninterested in play with peers Highly anxious 	Caregiver regulation and responsiveness plus: <ul style="list-style-type: none"> Help them identify emotions. Use stories as examples. Teach mindfulness, slow breathing, and thinking through problems. Allow expression of emotions then redirect behavior to constructive outlets. Encourage playdates. Give them ways to control their environment.
School Age (about 6-9)	<ul style="list-style-type: none"> Becomes more aware of social expectations of ER Begins to more concretely adjust their thinking about situations Greater ability to intentionally select an ER strategy 	All previous plus: <ul style="list-style-type: none"> Bullying behaviors School/academic problems Lashing out with fists, biting, or throwing objects Highly negative outlook Lack of social competence with peers 	All previous plus: <ul style="list-style-type: none"> Practice perspective-taking. Practice changing mindset. Encourage goal-directed behavior and activities. Help develop more advanced problem-solving. Promote prosocial activities and regular family dinners. Encourage sharing positive events with others. Spread out positive rewards.
Tween (about 10-13)	<ul style="list-style-type: none"> Able to use most regulation strategies Can identify emotional states Can actively change mindset 	All previous plus: <ul style="list-style-type: none"> Risky behaviors like hypersexuality, cutting, or substance use Frequent depressed or anxious mood Emotional suppression, avoidance, or excessive rumination Eating disorders 	All previous plus: <ul style="list-style-type: none"> Encourage autonomy. Help them explore their values. Explain reasons behind family and social rules. Find ways for them to use their strengths. Create growth opportunities. Provide both love and consistent boundaries. Help them identify early emotional triggers.
Teen (about 14-18)	<ul style="list-style-type: none"> Are often driven by group dynamics May alter emotions based on group expectations or responses Increases in ability to manage impulses Can make appropriate decisions based on good information 	All previous plus: <ul style="list-style-type: none"> Aggressive or sexualized behavior toward younger children Being bullied/bullying others Low self-esteem Contact with police Lack of empathy Suicidality 	All previous plus: <ul style="list-style-type: none"> Help them align with their goals and values. Help them find positive meaning in difficult or ordinary events. Discuss peer relationships and emotional boundaries. Encourage them to visualize a fulfilling future. During conflict, reaffirm love and hold consistent boundaries.
Adult	<ul style="list-style-type: none"> Continues to develop emotional regulation into old age Can generally regulate most emotions, particularly in social situations May struggle with emotional regulation based on biology, upbringing, trauma, or disorders and diseases May continue to struggle with recognition or naming emotions May continue to use suppression, avoidance, indulgence, or rumination to cope 	All previous plus: <ul style="list-style-type: none"> Domestic violence Substance use Harsh or absent parenting practices Persistent depressed or anxious moods Excessive aggression Risky sexual behaviors Relationship difficulties Overwhelmed by positive or negative emotions High shame or guilt Frequent "zoning out," losing time, or feeling out of body 	All previous plus: <ul style="list-style-type: none"> Build personal support networks. Reach out to support networks and professional assistance for help when overwhelmed. Practice self-care, meditation, mindfulness, and changing mindset. Place yourself in circumstances where you will likely experience positive emotions. Use journaling to help work through difficult emotions or situations. Share good news with others, savor small moments, and have good events you can anticipate. Align what matters most to you with your actions.

APPENDIX D — ADDITIONAL RESOURCES

The following table contains additional resources individuals can use to teach children emotional regulation.

*Resources in **blue** denote resources for the parent in that age group and resources in **red** denote resources for schools in that age group.

AGE	APPS	ACTIVITIES	WEBSITES	BOOKS
PreK-Early Elementary (2-5)	<ul style="list-style-type: none"> Breathe, Think, Do with Sesame Street Headspace (all age groups, including adults) Curated list of additional apps and games* (PreK-teenager) 	<ul style="list-style-type: none"> Feelings and Dealings: An Emotions and Empathy Card Game PBS Kids: Daniel Tiger's Neighborhood: Guess the Feeling Twelve Games to Teach Social-Emotional Learning by Playworks* (PreK-tween) Emotion Regulation: Feelings Identification Activities by Kiddie Matters* (PreK and middle childhood) Social Emotion Learning Activities by WeAreTeachers 	<ul style="list-style-type: none"> MindUp™ program: *(PreK-teenager) GreatSchools and Yale Center for Emotional Intelligence's RULER program *(PreK-teenager) Parent resources here. The Gottman Institute: An Age-by-Age Guide to Helping Kids Manage Emotions* (PreK-teenager) Second Step program* (PreK-teenager) Childhood 101* (PreK-tween) The Parent Guide to Resilience (all ages) 	<ul style="list-style-type: none"> <i>The Feels Book</i> presented by Slumberkins <i>Me and My Fear</i> by Francesca Sanna <i>When Worry Takes Hold</i> by Liz Haske <i>The Bad Seed</i> by Jory John and Pete Oswald* (PreK and middle childhood) <i>Wilma Jean - The Worry Machine</i> by Julia Cook and Anita DuFalla* (PreK and middle childhood) <i>The Whole Brain Child: 12 Revolutionary Strategies to Nurture Your Child's Developing Mind</i> by Daniel Siegel* (PreK-teenager) <i>Permission to Feel: Unlocking the Power of Emotions to Help Our Kids, Ourselves, and Our Society Thrive</i> by Marc Brackett* (all age groups, including adult) <i>Raising An Emotionally Intelligent Child: The Heart of Parenting</i> by John Gottman and Joan DeClaire* (PreK-teenager) <i>The Opposite of Worry: The Playful Parenting Approach to Childhood Anxieties and Fears by Lawrence J. Cohen*</i> (PreK-teenager)
Middle Childhood (6-10)	<ul style="list-style-type: none"> Stop, Breath & Think Kids Calm Child 	<ul style="list-style-type: none"> Mad Dragon: An Anger Control Card Game Feelings Game Pack by Counselor Chelsey Big Life Journal* (middle childhood and tween) 	<ul style="list-style-type: none"> 4Rs Program Caring School Community Kidlitutions: Solutions for Kids PATHS program Yale Center for Emotional Intelligence's RULER program* (middle childhood-teenager) 	<ul style="list-style-type: none"> <i>The Good Egg</i> by Jory John <i>Finding Sunshine After the Storm: A Workbook for Children Healing from Sexual Abuse</i> by Sharon A. McGee <i>The Worry Workbook for Kids: Helping Children to Overcome Anxiety and the Fear of Uncertainty</i> by Munira S. Khanam and Deborah Roth Ledley <i>Anxious Kids, Anxious Parents: 7 Ways to Stop the Worry Cycle and Raise Courageous and Independent Children</i> by Reid Wilson and Lynn Lyons* (middle childhood-tween) <i>The Explosive Child: A New Approach for Understanding and Parenting Easily Frustrated, Chronically Inflexible Children</i> by Ross W. Greene* (middle childhood-teenager) <i>A Volcano in My Tummy: Helping Children to Handle Anger</i> by Eiane Whitehouse and Warwick Pudney* (middle childhood-tween)
Tween (11-13)	<ul style="list-style-type: none"> The Zones of Regulation Smiling Mind Mood Meter* (tween and teenager) 	<ul style="list-style-type: none"> Emotional Language Signs* (tween and teenager) Activities to Build Emotional Vocabulary Skills by Speech Paths 	<ul style="list-style-type: none"> Social and Emotional Changes in Teens presented by The University of Minnesota Extension 	<ul style="list-style-type: none"> <i>The Red Tree</i> by Shaun Tan <i>The Get Up and Go Diary</i> (Boys and Girls specific versions) <i>A Smart Girl's Guide</i> series by American Girl <i>Outsmarting Worry: An Older Kid's Guide to Managing Anxiety</i> by Dawn Huebner
Teenager (14-18)	<ul style="list-style-type: none"> Stop, Breathe & Think (full version)* (useful for ages teenager and adult) Mitra* (useful for ages teenager and adult) Smiling Mind 	<ul style="list-style-type: none"> Emotional Intelligence Activities by Ohio State 	<ul style="list-style-type: none"> Youth helpline at YouthLine Teaching Emotional Intelligences to Teens and Students by Positive Psychology.com Center for Parent and Teen Communication Five Ways to Balance Teen Emotions from Newport Academy Promoting Self-Regulation in Adolescents and Young Adults: A Practice Brief by Desiree W Murray and Katie Rosanbalm 	<ul style="list-style-type: none"> <i>Conquer Negative Thinking for Teens: A Workbook to Break the Nine Thought Habits That Are Holding You Back</i> by Mary Karapetian Alvord and Anne McGrath <i>The Self-Compassion Workbook for Teens</i> by Karen Bluth <i>Mindfulness for Teen Worry: Quick and Easy Strategies to Let Go of Anxiety, Worry, and Stress</i> by Jeffrey Bernstein
Adult	<ul style="list-style-type: none"> Happify Calm Headspace Aura Stop, Breathe & Think 	<ul style="list-style-type: none"> Self-Therapy: A Step-by-Step Guide to Creating Wholeness and Healing Your Inner Child Using IFS by Jay Earley, PhD. (This is a workbook.) 	<ul style="list-style-type: none"> Psychologytoday.com (has articles about emotion regulation and ER skills for adults) Brenebrown.com (particularly the <i>Unlocking Us</i> podcast) 	<ul style="list-style-type: none"> <i>Permission to Feel: Unlocking the Power of Emotions to Help Our Kids, Ourselves, and Our Society Thrive</i> by Marc Brackett <i>Healing Self-Injury: A Compassionate Guide for Parents and Loved Ones</i> by Janis Whitlock and Elizabeth Lloyd-Richardson <i>Come to Your Senses: Demystifying the Mind-Body Connection</i> by Stanley H. Block <i>Mindsight: The New Science of Personal Transformation</i> by Daniel J. Siegel

APPENDIX E – REFERENCES

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Managing Emotions:

HOW A PARENT'S EXAMPLE OF EMOTION REGULATION MAY INFLUENCE THE RISK OF THEIR CHILD BEING IMPACTED BY SEXUAL ABUSE

THIS RESEARCH BRIEF EXPLORES:

- Risk-factors related to emotional regulation, and how a parent's behavior affects their child's risk of being impacted by sexual abuse (either as a victim or as an offender).
- Protective factors parents can model that may reduce the risk of youth being sexually abused or sexually abusing someone else, as well adding to resiliency where abuse has already occurred.
- Recommended interventions for parents, communities, and media (Appendix A).

There are many things a parent can do to reduce their child's vulnerability to child sexual abuse (CSA), as well as prevent their child from sexually harming another. Parents also have a very important role to play where abuse has already occurred. A parent's own example of modeling behavior is one of the most powerful tools they can arm their child with. **Because parents' behaviors have significant impact on their child's development**, Saprea has a goal of helping parents identify the most important behaviors they can model to reduce the risk of their children being sexually abused, abusing someone else, or to reduce the effects of trauma in situations where abuse has already occurred.

VULNERABILITY TO CSA

Several risk factors relating to a child's emotional well-being have been studied and identified in research around CSA. Notably, children who struggle with feelings of isolation,

loneliness, low self-esteem, bullying, and low parental attachment are especially vulnerable to abuse.¹⁻³ In part, this may be because they may have higher susceptibility to being groomed (as often times the attention from the "groomer" feels like a solution to some of the struggles). Additionally, youth with these particular challenges also have an increased tendency to act impulsively or to engage in high-risk or anti-social activities, thus increasing their exposure to risky situations.⁴⁻⁹

As parents are able to combat the struggles listed above, they also reduce the child's vulnerability to abuse or to sexually harming another child.^{3,6,10,11} Additionally, in situations where abuse has occurred, the more parents are actively involved in reducing isolation, shame, loneliness, etc., the less likely it is that the child will be revictimized or experience significant long-term trauma effects.¹²⁻¹⁵

SOCIAL LEARNING THEORY

Parents have the ability to reduce the risk of their child being impacted by child sexual abuse through their example (or modeling). This natural tendency of learning by example has been termed by researchers as social learning theory. Social learning theory argues that most human behavior is learned through the observation and modeling of others' behaviors, attitudes, and emotional reactions.^{16,17}

Results from decades of research surrounding social learning theory show that parents are among the most influential examples in a child's life, starting in infancy.⁶ The behaviors that parents model play a vital role in shaping how a child views themselves and the world around them. **How a child observes and models family connectedness, communication, problem-solving, and managing emotions will influence the likelihood of whether they are sexually abused or will abuse someone else.**^{2,3,10,11,18,19}

PROTECTIVE FACTORS PARENTS CAN MODEL

EMOTIONAL REGULATION

A child's understanding and ability to manage emotions can affect how they respond to confusing or frightening interactions, how they interpret the social and emotional cues of others, how they manage difficult emotions they experience, and what they choose to communicate to you as their caregiver. For all of these reasons, **one of the most important protective factors that parents can model for their children is healthy emotional regulation.**

Emotional regulation is one's ability to handle difficult, stressful, or overwhelming emotions.²⁰ It includes being aware of and understanding one's own emotions as well as being able to perceive the emotional cues of others. Parents who model and foster emotional regulation equip their children with the tools they need to successfully cope with emotions and situations, whether in childhood, youth, or adulthood. Emotional regulation increases a child's social competence, awareness of their own emotions, self-esteem, and the ability to self-regulate, self-soothe, and respond to challenging peer situations.^{6,21-24}

HEALTHY REACTIONS TO EMOTIONS

Modeling and teaching a child how to identify, understand, and utilize their emotions in healthy ways will help them manage overwhelming emotions that might otherwise result in them acting out of character or becoming more vulnerable to CSA. This type of modeling and instruction has been termed "emotional coaching" and can begin as early as the child's infancy.^{6,20} This involves

“...the core of social learning theory argues that what one internalizes in early childhood, before self-identity is fully formed, provides the blueprint for how to engage socially throughout the rest of their life.”
(Miranda H. Sitney).

parents modeling constructive reactions to their child's emotions. Such reactions might include:

- Validating the emotion.
- Labeling the emotion.
- Discussing the causes of the emotion and what that emotion means to the child.
- Displaying comfort.
- Problem-solving.^{6,21,24,25}

Parents who have an emotional coaching mindset see their children's display of overwhelming emotions as an opportunity to educate and nurture. On the other hand, parents with an emotional dismissing mindset see their children's overwhelming emotions as "negative" or "toxic" and believe they have to change their child's emotions as quickly as possible.^{21,24}

Parental warmth, acceptance, and non-judgmental awareness of the child's emotions fosters emotional regulation within that child as well as decreases the likelihood that the child will act out in harmful or socially inappropriate ways.^{22,23,25,26} On the other hand, responding to the child's emotions with punitive punishments will devalue the legitimacy of that child's emotional experience and will increase the child's anxiety toward emotional arousal, both in themselves and as displayed by others.⁶

POSITIVITY

Another essential component is how often parents model positive emotions.^{22,23,27} While it is important for a child to observe a moderate amount of negative emotions handled in appropriate ways, positive expressivity shown by the parents has been linked to higher levels of emotional regulation in children. This expressivity can also contribute to a child's heightened level of positive emotions, self-esteem, and prosocial behavior.^{21,22} In turn, when parents express negativity as the dominant emotion, children are more likely to experience emotional dysregulation, over-arousal, a lack of constructive coping skills, and depression.^{22,23,28}

PROBLEM-SOLVING

One of the most impactful models a parent can display is how to handle stressful situations. Children who observe their parents managing stress in constructive ways and with positive expressivity are likely to model similar effective ways of coping with difficult emotions and emotionally driven behavior.^{6,15,21-23,29} The child learns by example the importance of dealing with disagreements through healthy strategies, such as negotiation or compromise, rather than unhealthy strategies, such as unchecked anger, aggression, or violence.^{9,12,26}

Parents who model unhealthy coping strategies, such as alcohol and substance abuse, increase the risk of their children experiencing CSA or of perpetrating CSA.^{1,2,10,18,30,31} These risks can also be linked to parents who model high levels of marital conflict or display persistent negativity, unchecked stress, or depression.^{4,18,19,22,32-34} Ultimately, how a parent expresses both positive and negative emotions, both with the child and in general family interactions, influences the emotional climate of the home.^{25,26}

HEALTHY SOCIALIZATION

Parents' displays of emotion also affect how they model socialization, as a child observes and processes how the parent handles emotions in social settings. The parent's emotion-related social behavior (ERSB) models to the child what expressions of emotion are both socially and culturally acceptable. If the child repeatedly witnesses healthy ERSB from their parent in a variety of settings and situations, that child will be more likely to manage their emotions in a way that helps them navigate through social interactions, achieve social goals, and maintain positive relationships.^{6,22,35} Without the ability to manage their emotions in a socially acceptable manner, a child may become isolated, lonely, and lacking in self-confidence, all of which can make them more susceptible to being abused or abusing someone else.

A parent's expressiveness can also provide information about how to interpret and understand the emotional reactions of others. Through the parent, the child can acquire knowledge about emotional cues—both verbal and nonverbal. This knowledge builds on the child's emotional intelligence and helps shape their social behavior in regard to how they interpret people, events, and situations.⁶ It can also help develop the child's empathy toward others, a factor that can be a significant moderator if the child has been exposed to other risk factors, like harmful depictions of hostile masculinity or violence against females.¹¹

SELF-WORTH

A parent who models positive self-talk and self-praise helps promote high levels of self-esteem and self-worth within the child. Modeling self-care is another component that displays the importance of valuing one's needs and treating oneself with patience and acceptance.¹² Parents who model self-efficacy, or the belief in their abilities, increase the likelihood that their child will adopt those same beliefs, which will positively affect their adjustment to stressful or challenging situations.³⁶ In contrast, a parent displaying predominantly low self-esteem can act as a risk factor for CSA.³⁷

FAMILY CONNECTEDNESS

By modeling family togetherness and connectedness, parents instill protective factors in their children. They do this by creating a warm emotional environment in the home that fosters structure, communication, and security.²⁶ Parents who model parent-child communication by initiating and engaging in conversations with their children, as well as actively listening and responding to their child's needs, reduce the risk factors of their children being impacted by CSA.^{5,19} Parent-child communication not only strengthens the relationship but provides structure, clarifies expectations, and builds trust.^{9,15}

Family resilience is the ability of the family as a unit to successfully manage and/or adapt in the face of significant adversity or crises.¹⁶ **Research has shown that one way effective parents can build and promote familial resiliency, curtail high-risk behavior in adolescents, and create family connectedness is through family meals.**⁸ Daily family rituals, like having dinner together as a family, can give parents the opportunity to model family cohesion and flexibility.¹⁵

CONCLUSION

In sum, the day-to-day example a parent sets for their child will impact the likelihood of the child experiencing or reexperiencing sexual abuse, or sexually harming another child. It is within the parent's power to build up protective factors against CSA by modeling emotional regulation, positivity, problem solving, healthy socialization, self-worth, and family connectedness. These protective factors will not eliminate the risk of CSA entirely, but they will bolster the child's self-esteem, social skills, ability to manage overwhelming emotions, and ability to bounce back if abuse does take place.

APPENDIX A—RECOMMENDED INTERVENTION AND MESSAGING

PRIMARY MESSAGING TOWARDS PARENTS

1. Believe you can make a difference.
 - a. If you are feeling overwhelmed as a parent, reach out for help.
 - b. Your example in responding to and handling emotions can contribute to reducing risk of CSA and decreasing risk that your child will sexually harm another child.
2. Model healthy emotional regulation.
 - a. Develop your personal emotional regulation skills and be patient with yourself.
 - b. Respond to your children's emotions with a constructive, emotional coaching mindset (rather than with dismissiveness or punishment).
 - c. Demonstrate healthy coping skills such as problem-solving, conflict resolution, and positivity when dealing with overwhelming emotions and challenges.
 - d. Display behavior that is socially and culturally acceptable during your interactions with others to help teach children about healthy socialization.
 - e. Be emotionally expressive with your children, starting when they are young, to provide context for emotional cues and to help them develop empathy.
3. Model family connectedness.
 - a. Schedule and maintain family time through routines and rituals (e.g., hold regular family dinners) to model family cohesion, promote feelings of comfort and predictability, and create a warm emotional environment.
 - b. Initiate parent-child communication that is open, consistent, and includes difficult topics like sexual literacy.
 - c. Build family resiliency by modeling collaboration, problem-solving, open emotional expression, and communication.

PRIMARY MESSAGING TO COMMUNITIES

1. Facilitate a parent's ability to develop healthy coping skills.
 - a. Provide hotlines, in-home visits, or access to other support resources to parents or caregivers dealing with substance abuse, alcoholism, intimate partner violence, or other unhealthy coping methods in the home.
 - b. Provide support to parents or caregivers who suffer from severe depression, anxiety, low self-esteem, or other mental health issues.
 - c. Offer accessible prenatal parenting classes that provide resources, support, and education.
 - d. Facilitate community connection and opportunities to socialize.
2. Provide ways to help build family resilience, particularly in at-risk environments.
 - a. Support interventions that will help reduce stressors on the family environment (for example, insufficient food, housing, medical care, childcare).
 - b. Provide sensitivity training for police officers responding to allegations of intimate partner violence.
 - c. In cases of intimate partner violence, conduct follow-up check-ins by professionals, provide rehabilitation, and offer training to manage anger, aggression, and other overwhelming emotions.
3. Ensure the safety and support of children and/ or caregivers who have been displaced.
 - a. In cases where necessary, provide resources and accommodations where members of a family can obtain safety and refuge. When possible, help families reunite in a safe, constructive way.
 - b. Make improvements in foster care processes and systems to ensure and prioritize the safety of children who have been removed from homes.

PRIMARY MESSAGING TO MEDIA

1. Develop media that represents healthy models of behavior.
 - a. Depict examples of healthy emotional regulation, problem-solving, communication, and coping skills.
 - b. Have appropriate messaging about gender equality, healthy masculinity, and consensual relationships.
2. Deliver supportive messaging to parents.
 - a. Drive attention to helpful interventions or resources that caregivers can utilize to better manage their behaviors and relationships.
 - b. Combat the stigma against addiction and mental illness to encourage caregivers experiencing these issues to seek help.
 - c. Promote community awareness campaigns and programs that support families.
3. Counter common myths.
 - a. Provide warnings on sexually explicit media that depicts inaccurate portrayals of consent, harmful stereotypes, and sexist attitudes.

APPENDIX B—KEY STATISTICS AND ADDITIONAL RESOURCES

KEY STATISTICS:

- Young children with parents who practice emotional coaching display higher levels of cooperation, empathy, and social skills.^{6,24}
- Youth who eat frequent family meals are half as likely to report substance abuse, depressive symptoms, attempted suicide, antisocial behavior, violence, eating disorders, or school behavior problems than youth who eat very few family meals.⁸
- Families who practice open parent-child communication are less likely to experience child sexual abuse.^{5,9}
- Parental warmth and responsiveness to a child's emotions fosters a child's emotional regulation and social competence in early and middle childhood.^{4,6,21,22,24,25}
- Families who experience intimate partner violence and violent communities are more likely to experience child sexual abuse.¹⁰
- Children at the highest risk of CSA are in families that contain high levels of marital conflict, low parent-child attachment bonding, parents with adjustment problems, and parents with alcohol or substance abuse problems.¹²
- Low parental warmth, communication difficulties, harsh parenting practices, and low parental involvement can increase the risk of child sexual abuse.¹

ADDITIONAL RESOURCES:

- Triple P Parenting
<https://www.triplep-parenting.com/us/triple-p/>
- 9 Activities to Build Grit and Resilience and Children
<https://biglifejournal.com/blogs/blog>
- Positive Guidance: A Guide for Parents
<https://www.brighthorizons.com/family-resources/positive-guidance-guide-for-parents>
- Resilience Booster: Parent Tip Tool
<https://www.apa.org/topics/parenting/resilience-tip-tool>
- Role Model the Behavior You Want to See From Your Kids
<https://www.verywellfamily.com/role-model-the-behavior-you-want-to-see-from-your-kids-1094785>
- Guidebook: It Starts With You: How to Raise Happy, Successful Children by Becoming the Best Role Model You Can Possibly Be By Suzanne J Gelb PhD
- How Social Learning Theory Works
<https://www.verywellmind.com/social-learning-theory-2795074>
- What Is Emotional Regulation? + 6 Emotional Skills and Strategies
<https://positivepsychology.com/emotion-regulation/>
- The Surprise Side Benefit of Regulating Your Emotions
https://www.ahaparenting.com/blog/Change_Your_Child
- Growing Happy Card Deck: Positive Psychology Practices for Teens and Adults

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Child Sex Trafficking in the United States: Knowing the Facts

THIS RESEARCH BRIEF EXPLORES:

- Child sex trafficking and how it differentiates from other forms of child sexual abuse.
- Risk factors that increase the likelihood of a child or youth being sex trafficked in the United States.
- How the issue of child sex trafficking aligns with our mission at Saprea.
- Interventions for parents, communities, and the media (Appendix A).

DEFINITION

Child sex trafficking is a subset of human trafficking which the United Nations defined in 2004 as the **recruitment, transportation, transfer, harboring, or receipt of a child for the purpose of exploitation**.² Put simply, child sex trafficking occurs whenever a minor is exploited into sexual activity for the gain or advantage of another person or group. However, the term trafficking can be misleading as such exploitation doesn't necessarily involve abduction or physical transport of a victim from one place to another. Similarly, exploitation can take many forms and may not always involve physical contact. Some common examples of sexual exploitation include **child pornography, pimping or prostitution, exchanging sex for basic necessities or other items, forced marriages, or involving children in sexual services or displays**. Whatever the form of exploitation, the dynamic generally involves an imbalance of power between the trafficker

and the victim, and oftentimes comprises of the victim being coerced into sexual activity (a) in exchange for something the victim needs or wants, and/or (b) for the financial gain or increased status of the trafficker or facilitator.³

PREVALENCE

While there's no denying that sex trafficking is a global issue that makes up the majority of human trafficking cases,⁴ determining the actual prevalence of sex trafficking in the United States is challenging.⁵ There is not presently any consensus accepted by academic studies, government reports, or NGOs on exactly how many children are domestically trafficked each year. The range of published estimates is rather dramatic—between 1,400 and over 2 million.^{6,7}

The most concrete numbers relate to incident reporting. For example, of the 2,065 cases of suspected sex trafficking cases that were investigated between 2008–2010, about 40% involved commercial exploitation of a minor. The National Human Trafficking Resource Center disclosed that nearly 6,000 cases had been reported over the five-year period (2007–2012) and also had a substantial percentage of minor victims (40.69%).⁸ Data published by the NHTRC from 2019 reported 8,248 situations of sex trafficking that included both adults and minors.⁹ Another commonly cited figure comes from The National Report on Domestic Minor Sex Trafficking, which estimated in 2009 that between 100,000 and 300,000 children are victimized in prostitution each year.¹⁰

WHO IS BEING TRAFFICKED?

While the number of youth who are exploited is difficult to assess, researchers have succeeded in identifying who is at greater risk of being exploited. These risk factors can be found at the individual level, relationship level, and societal level.

INDIVIDUAL LEVEL

Risk factors at a youth's individual level range from personal history to emotional and behavioral health to physical characteristics. For instance, females are more likely to be victims of trafficking, with the average of recruitment falling between 12 and 14 years old.^{11,12} Females of color (specifically Black girls) are also at higher risk, likely a result of systemic challenges facing marginalized populations.^{12,13}

In addition to gender, age, and ethnicity, another glaring risk factor is emotional well-being. Youth who suffer from **low self-esteem, low self-worth, depression, anxiety, and conduct disorder** are more vulnerable targets for sex traffickers.^{6,13,14} This is especially true for youth who struggle with feelings of rejection and experience bullying or other forms of ostracization.¹⁵ These feelings of worthlessness and low self-esteem can influence the susceptibility of a child or youth to the manipulative behaviors of the trafficker, particularly during the grooming phase. Such vulnerability is a primary reason why sex traffickers commonly target youth who are already ostracized due to their race, sexual orientation, economic status, or trans identity.¹⁶

Among the most significant risk factors at the individual level are **prior experiences of victimization**. Many prostituted children have already experienced at least one type of abuse prior to being commercially exploited.^{12–16} The trauma of sexual abuse, in particular, can greatly increase the odds of a child or youth being revictimized.^{13,15,17} In fact, studies have found that a majority of sex trafficking survivors have self-reported a history of child sexual abuse prior to being sex trafficked, leading to polyvictimization.^{11,13}

Additional risk factors at the individual level include untreated mental health problems, involvement in criminal activity, and high rates of **alcohol or substance abuse**.^{1,11,13,16} The latter can play a critical role in impairing judgment, instigating dependent behaviors, and drawing youth into exploitative circles.^{13,16}

RELATIONSHIP LEVEL

At the relationship level, one of the leading causes to a youth being victimized by sex trafficking is a **dysfunctional home life**. This may include a lack of familial support, lack of parental supervision, and insecure parental attachments.^{14,17} Such instability may be due to parental illness, financial strain, substance abuse, domestic violence, neglect, and other forms of maltreatment.^{14,16} Not only does a lack of support in the home ensure a youth is more vulnerable to the emotional security provided by a sex trafficker, but it also increases the chances of the youth running away from their current living situation and becoming more reliant on illegitimate sources of income.^{11,17,18}

A lack of secure relationships and parental support also extends to children and youth who have been placed in group homes, detention centers, or child protective services.^{11,16} A significant portion of sex trafficked youth have a history of involvement with **child welfare services and foster care**.^{17,18} Similar to youth in destabilized home environments, youth in these systems commonly lack support networks and healthy attachments, which increases their vulnerability to the psychological coercion and manipulation of a trafficker.¹⁶ In fact, one study showed that even when the basic needs of a minor were met, the lack of an attentive adult in that minor's life played a role in their victimization.¹⁹

COMMUNITY LEVEL

While sex trafficking occurs across all regions, communities, and demographics, there are a number of factors that put certain populations at more risk. **Poverty** is among the most notable components linked to child sexual trafficking.^{14,16} Children and youth who are at a socioeconomic disadvantage not only struggle with financial instability but also with unsafe housing, minimal education, and limited opportunities for legitimate employment. These risks become especially salient for youth who are marginalized due to their **race, ethnicity, or gender**.^{6,12,16}

Within these impoverished and marginalized populations, youth who are deprived of their basic needs or perceive those needs as being threatened are at a heightened risk of resorting to "survival sex," or sex that is driven by a desperation to survive. In these instances, youth are motivated by promises of economic gain or essential provisions such as food, clothing, and shelter.^{11,14} Many youths who are vulnerable to sex trafficking also struggle with feelings of **displacement, forced migration, unsafe housing, and homelessness**.^{1,16}

WHO IS TRAFFICKING AND “SOLICITING”?

While the risk factors linked to an individual being sex trafficked are numerous and varied, not a lot is known about the risk factors that increase the *likelihood of an individual becoming a trafficker*.

One common characteristic, however, is the trafficker having a personal connection to or relationship with the young person they are exploiting. Sadly, as is the case with the larger landscape of child sexual abuse, **children who are being sexually exploited know their trafficker in the majority of cases**. While many may believe that sex trafficking is perpetrated by those involved in transnational organized crime, research suggests three specific groups who are most often responsible for a child's exploitation: a family member, a peer, or a significant other.^{11,12,14,16} One study suggested mothers were most likely to traffick their daughters,²⁰ and another study highlighted the involvement of boyfriends gaining the trust of a partner, only to demand “repayment” for their support by demanding the partner enter into sexual exploitation.^{11,16} In other studies, victims were recruited by peers, either as a mechanism for meeting basic needs (“survival sex”), or to maintain good standing with pimps or traffickers. In many of these instances, the victims will engage in the orchestrated transactions out of fear, obligation, or loyalty to their trafficker.^{11,13}

Ultimately, each of these exploitative transactions are perpetuated by **demand**. Research and case studies describe the business strategies at play, including the forums that exist for traffickers to share information and strategies for building and maintaining their operations.²¹ The “solicitors” involved in these transactions fall into a wide range of ages, demographics, and races. Studies show that they come from all walks of life and socio-economic status, but more often than not they are a little more affluent as they are able to participate in a transaction that often includes some sort of financial or material exchange and may even involve sex tourism.²²

WAYS TO HELP

A variety of systemic issues contribute to the continuation of child sex trafficking, and Saprea seeks to resolve some of those issues. As with other forms of child sexual abuse, one of the most prevalent factors that places a child at risk of being sex trafficked is the lack of stability in the home.¹⁴ Many survivors have cited the lack of a caring adult in their family as a significant contributor to being victimized by sex trafficking.¹² To this end, Saprea strives to confront child sex trafficking by strengthening families and parent-child relationships through our online and community resources. These resources include developing awareness, skill sets, and self-efficacy among parents, as well as helping them build their child's capability and social skills. Such tools will ensure a child or teen is a more difficult target for sex traffickers.

Another risk factor that Saprea seeks to resolve is the vulnerability of children or teens with a history of sexual abuse. Given that many instances of child sex trafficking are a form of revictimization, Saprea strives to interrupt this cycle by providing parents with resources that not only help them protect their children from sexual abuse, but help them respond to abuse that has already occurred. Research shows that when parents respond effectively to a child who has been sexually abused, the likelihood of that child being revictimized—whether by a sex trafficker or another type of sexual abuser—significantly decreases.²³

Ultimately, when parents are more educated on how to raise capable children and to foster resilient parentchild relationships through emotional support and open communication, society as a whole can move one step closer toward eradicating child sex trafficking and its impacts.

APPENDIX A—RECOMMENDED INTERVENTIONS

PRIMARY MESSAGING TO PARENTS

1. Believe you can make a difference.
 - a. Learn more about the risk factors of a child becoming sexually exploited so that you can be better informed on how to effectively reduce those risk factors.
 - b. Raise awareness among the parents and community members in your life by sharing accurate, evidence-based information on child sex trafficking.
 - c. Know that, as with all forms of child sex abuse, your example and support as a parent can significantly reduce the likelihood of your child being sexually exploited.

2. Model trust and communication.
 - a. Initiate parent-child communication that is open, consistent, and includes difficult topics like sexual literacy.
 - b. Educate your child or teen on the specifics of sex trafficking. Explain that sexual exploitation can be initiated by a friend, family member, or significant other and that it doesn't always pertain to physical contact.
 - c. Set and maintain consistent family boundaries and check-ins that apply within the home, outside the home, and in online spaces.
 - d. Help build your child's sense of self-worth through quality family time, engaged conversations, and your own example of self-worth.

PRIMARY MESSAGING TO COMMUNITIES

1. Raise awareness on the issue of child sex trafficking.
 - a. Teach classes to those in your community about the facts of child sex trafficking and how to reduce the risk in your neighborhood.
 - b. Collaborate with other community leaders and influencers on how to best spread accurate and useful information about child sex trafficking to parents and caregivers in your area.
 - c. Learn what common myths or misplaced fears surrounding child sex trafficking are most prevalent in your area and help communicate research-based data and education that will dispel those myths.

2. Raise funds to help reduce the risk of child sex trafficking.
 - a. Donate to organizations that are taking innovative steps to stop sex trafficking, both in your local area and nationwide:
saprea.org
thorn.org
unicefusa.org
 - b. Host a volunteer event, campaign, or fundraiser to raise funds that will help support the eradication of child sex trafficking.
 - c. Donate to homeless shelters, group homes, foster homes, and foster care closets in your area.

PRIMARY MESSAGING TO MEDIA

1. Develop media that accurately depicts the issue of child sex trafficking.
 - a. Understand the facts about child sex trafficking and the audiences who would be most impacted by learning those facts.
 - b. When delivering content related to child sex trafficking, avoid sensationalism, politicized bias, and inaccurate or exaggerated data.
 - c. Understand the common myths or misunderstandings about child sex trafficking and deliver content that helps dispel those myths.

2. Develop media that reduces the stigmatization surrounding sex trafficking victims.
 - a. Refrain from portraying victims of child sex trafficking as criminals, prostitutes, or other harmful stereotypes, particularly victims of marginalized communities and ethnicities.
 - b. When recreating or portraying scenarios of child sex trafficking, be intentional about capturing the imbalance of power between the trafficker and the victim.

APPENDIX B—KEY STATISTICS AND ADDITIONAL RESOURCES

KEY STATISTICS

- The National Report on Domestic Minor Sex Trafficking estimated that between 100,000 and 300,000 of American minors are victimized through sex trafficking each year.¹⁰
- Sex trafficking accounts for approximately 70–80% of human trafficking in the United States.¹⁵
- Most victims of child sex trafficking engaged in their first commercial sex act between ages 14 and 17.⁸
- In 2016, 70% of reported sex trafficking cases in the United States involved female victims.¹²
- In one study, 62.7% of child sex trafficking victims were victimized by a member of their family, with 45.8% reporting their trafficker to be a parent or guardian.¹⁴
- 87% of youth who are sex trafficked have experienced sexual abuse prior to being trafficked.¹³
- Low socioeconomic status is among the highest risk factors for a child or youth to be victimized by sex trafficking.¹⁶
- Black females between the ages of 16–18 are at a higher risk of being sex trafficked.¹²
- A multi-state evaluation of outreach programs to victims of sex trafficking found that more than one-third of the clients had previous involvement with child welfare agencies and juvenile justice systems.²⁴
- The International Labour Office estimates that the annual global profits from forced sexual exploitation total 99 billion USD.²⁵
- One out of every six runaways reported to the National Center for Missing & Exploited Children® in 2014 was likely a victim of sex trafficking.²⁶
- Youth who were trafficked as minors had more than 5 times the odds of running away from home prior to entering the sex trade, after controlling for other risk factors and demographics.⁸

ADDITIONAL RESOURCES

- Thorn.org <https://www.thorn.org/child-trafficking-statistics/>
- Polaris Project <https://polarisproject.org/child-sex-trafficking/>
- Missing Kids <https://www.missingkids.org/theissues/trafficking>
- Human Trafficking Hotline <https://humantraffickinghotline.org/training-resources/referral-directory>
- EOPAT-USA <https://www.ecpatusa.org/child-trafficking>
- Understanding and Addressing Trauma and Child Sex Trafficking—The National Child Traumatic Stress Network https://www.dea.gov/sites/default/files/2018-07/Understanding_and_Addressing_Trauma_and_Child_Trafficking.pdf

APPENDIX C—GLOSSARY

Commonly Used General Synonyms for Trafficking and Exploitation

Sex trafficking CSE, CSEC, CSEY (Commercial sexual exploitation of children/youth) Domestic minor sex trafficking (DMST) Sex trade

Exploitation occurs when a person takes advantage of another person, unethically or unjustly for one's own ends.

Facilitators are individuals or businesses that are complicit in or benefit from the commercial sexual exploitation and sex trafficking of minors. Examples of facilitators include limousine and taxi drivers, hotel and motel operators, landlords, and advertisers, among others. While facilitators enable and support commercial sexual exploitation and sex trafficking of minors—actively or passively—they are not the purchasers or sellers of sex with minors.

Human trafficking is defined by the US Department of Homeland Security as using of force, fraud, or coercion to obtain some type of labor or commercial sex act. Traffickers might use violence, manipulation, or false promises of well-paying jobs or romantic relationships to lure victims into trafficking situations.

Pimps

A variety of terms—including traffickers, exploiters, and pimps—are used to describe individuals who exploit children for financial or other gain. While the word pimp originally was used to describe an individual who sells prostitutes, its meaning and use have evolved. It is also important to note that traffickers and exploiters come in many forms; they may be family members, intimate partners, or friends, as well as strangers.

Polyvictimization is a paradigm for understanding the cumulative effects of repeated exposure to traumatic life events. This paradigm is useful when referencing trafficking because most often there are several events of trauma that occur for trafficked persons.

Exploited Child, Not Child Prostitute

Some victims of commercial sexual exploitation and sex trafficking are referred to as child prostitutes, juvenile prostitutes, or adolescent prostitutes. Prostitution is illegal in nearly all jurisdictions in the United States, and individuals who engage in prostitution are considered criminals. Therefore, the terms child prostitute, juvenile prostitute, and adolescent prostitute suggest that prostituted children are criminals; that is, victims and survivors of commercial sexual exploitation and sex trafficking may be viewed as willing participants in an illegal activity.

At Saprea our view is that these young people should be recognized as victims and not as criminals. Our broader vision is that commercial sexual exploitation and sex trafficking are forms of child sexual abuse. We also note the legal conundrum that exists when patterns of exploitation begin when an individual is under 18, but persist after the child has reached the legal age of majority. Our mantra: "Exploitation is exploitation, regardless of age, but especially abhorrent when these patterns are targeted at children and youth."

Sex tourism can be loosely defined as individuals planning travel around the purposes of engaging in sexual activity.

Sex work occurs when consenting adults make an informed choice to engage in the provision of sexual services (such as pornography, exotic dancing, prostitution, etc.) in exchange for payment.

Solicitors and purchasers are individuals who pay for sex with minors and thus represent the demand for commercial sexual exploitation and sex trafficking of minors. These individuals may actively seek to purchase sex with underage individuals or may be unaware of or uninterested in their age. Solicitors and purchasers often are referred to as "johns."

Survival sex includes having sex with someone to get money, food, a place to stay, drugs, or something else a young person wants.

Transnational organized crime occurs where criminal activity is conducted over multiple sovereign borders. Sex trafficking has long been perceived by many of the general public as falling primarily in this realm, however several organizations have aimed to bring awareness to the narrowness of this fallacy.

Victims or Survivors

The terms victim and survivor both are used to refer to minors who are commercially sexually exploited or trafficked for sexual purposes. These terms don't have to be mutually exclusive as the terms could be applied to the same individuals at different points along a continuum. For example, the term victim indicates that a crime has occurred and that assistance is needed. Being able to identify an individual as a victim, even temporarily, can help activate responses—including direct services and legal protections—for an individual. Whereas the term survivor has therapeutic value and may extend more appropriately as the displacement increases between the events of abuse and efforts of recovery.

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Digital Safety Brief: Sexting and Cyberbullying

THIS BRIEF FOCUSES PRIMARILY ON TECHNOLOGY-ASSISTED HARMS INVOLVING SEXUAL VICTIMIZATION AND EXPLOITATION.

THIS RESEARCH BRIEF:

- Describes the vast usage of devices among children and teens.
- Identifies the ways in which technology can facilitate peer-to-peer victimization among youth.
- Defines the practices of sexting and cyberbullying and outlines common motivations for youth to engage in those behaviors.
- Alerts parents to ways they can help protect their kids against the potential harms of sexting and cyberbullying.

INTRODUCTION

Technology and digital media have become an integral part of day-to-day life across the globe. Usage of smartphones, laptops, tablets, and other information and communication devices (internet connected technologies, or ICTs) is nearly universal, and access to these devices is becoming normalized among younger audiences. And while this widespread access has provided advancements in communication, education, and entertainment, it has also facilitated opportunities for harm, including maltreatment towards children and teens. **This brief focuses primarily on technology-assisted harms involving sexual victimization and exploitation.** It will also examine risks that may impact a youth's sexual development

and cultural attitudes. As parents and caregivers seek to inform themselves on the risks their children face in the digital era, they are empowered to protect their children from the impacts of technology-facilitated harms.

As parents and caregivers seek to inform themselves on the risks their children face in the digital era, they are empowered to protect their children from the impacts of technology-facilitated harms.

UBIQUITY OF TECHNOLOGY

It is estimated that one in three children globally is already an internet user. And when looking at the broader population, at any given time, a third of all internet users are children (under 18 years of age).¹ Internationally, mobile devices are how children are most commonly accessing the internet. Smartphone ownership and use has become a central part of teen life across genders, ethnicities, and socioeconomic backgrounds. According to the

Pew Research Center, in the US **95% of teens report owning a smartphone or have access to one.** Additionally, 45% of teens report they are online on a near-constant basis.² 84% of teens say they have or have access to a game console at

home, and 90% say they play video games (on a game console or mobile device). Roughly nine in ten boys (92%) have or have access to a game console at home, and 97% say they play video games in some form or fashion.²

The impact technology use and electronic media consumption have on the well-being of children has been investigated by many researchers and generated mixed reports.^{3,4} For instance, research has revealed how **healthy internet habits can correlate with positive outcomes** such as academic achievement, literacy, and even cognitive development.⁵ In one study, teens credited technology, particularly social media, with enhancing their ability to strengthen friendships, interact with diverse voices and viewpoints, raise awareness around underrepresented causes, receive support through difficult times, and feel more connected to the people in their lives. 71% of sampled teens reported feelings of inclusion rather than exclusion, and 69% reported feelings of confidence rather than insecurity. Many feel that digital technology provides a safe space to meet and interact with others with similar interests, pursuits, or backgrounds.⁶ This is especially the case for youth who identify as LGBTQIA+ and are seeking to form social and romantic connections.⁷

Digital media and technology can also supply youth with information and education regarding sexual health and development that may have otherwise been unavailable, particularly among low-income populations.⁸ However, despite these significant benefits, **higher access to and usage of technology also presents inherent risks of harmful encounters and practices.**

SEXTING

With the advancement of technology and internet devices, **sexual content may be self-generated, forwarded, and/or exchanged through ICTs, a phenomenon most commonly known as “sexting.”** This trend is increasing in prevalence among children and youth, with one study finding that 27% of adolescents engage in sexting.^{9,10} Despite the growing literature around sexting, its exact definition is still widely contested among researchers. Some define sexting as the creating and sharing of sexual images, videos, or texts, while others limit the definition to images and videos only.¹¹ There is further debate still on whether such images must be explicit (featuring exposed genitals or masturbation) to qualify as sexting, or if sexting also includes partial nudity, erotic poses, and other forms of sexual suggestion.⁷

No matter the precise definition, researchers largely agree that sexting is a complicated and controversial subject. For instance, sexting can be viewed as sexual experimentation between two consenting youth in a romantic relationship, even if such experimentation is deemed unacceptable by parents and other adults. And yet, **even within the context of what constitutes as “consensual,” sexting remains up for debate.** Research shows that girls in particular are more likely to feel coerced or pressured

into sexting as a result of gendered norms or expectations.^{9,12} These sexting-related pressures are also prevalent among LGBTQIA+ youth, who are often more reliant on the internet to explore their sexuality. In one study, 37.5% of sexual minority youth reported receiving pressure to sext, compared to the 19.6% reported from their heterosexual counterparts.⁹

Coercion and social pressure are not the only risks connected with sexting in romantic relationships.⁷ While the original sharing of self-generated sexual images between teens may have been consensual (or perceived as consensual), **there remains the possibility that such images may be later forwarded and shared without the sender's consent.** This type of non-consensual sharing of sexually explicit images is known as sexual exploitation or image-based sexual abuse.⁹

Those who engage in image-based sexual abuse may do so for a variety of reasons. One of the most popularly cited is “revenge porn,” in which someone forwards their partner’s sexted images after the relationship has ended, out of anger or spite.¹³ However, **the non-consensual sharing of sexual images can occur outside the realm of romantic partners or exes.** It can be perpetrated by a peer, acquaintance, or stranger and can be driven by a desire to harm, manipulate, embarrass, harass, or bully.¹¹ It may also be used as a form of blackmail, in which the victim is forced into doing something to prevent their sexual images from being revealed. This tactic of coercion and exploitation is an example of sexual extortion (otherwise known as “sextortion”).^{13,14}

While these examples of “aggravated sexting” often overlap with the intention to shame or threaten, such animosity is not always the case. **Children or teens who share images without consent may do so to gain approval or status among their peers.**⁷ This is especially the case for adolescent males, who have reported participating in image-based sexual abuse to increase male bonding, impress their friends, prove their masculinity, and demonstrate sexual prowess. This desire for acceptance and social reinforcement has been cited as two of the main reasons that teenagers across all demographics engage in sexting.¹⁰

Such motivations may be indicative of the more normalized and nonchalant attitudes youth have developed toward sexting and image-based sexual abuse. For instance, youth have reported that they engaged in sexting to have fun or to flirt.¹⁵ In another study, nearly a quarter of the teenagers sampled stated that they’d forwarded a sexted image as a joke.⁹ Such justifications may also contribute to the lack of action or intervention by bystanders.¹⁶ In a sample of teenagers who had received a forwarded sexted image, 72% said they did nothing.⁹

In fact, researchers have suggested that **the increase in image-based sexual abuse among youth and adults may be due to a lack of seriousness or understanding towards its potential impacts on the victim.**¹⁵

Such impacts can affect multiple areas of a youth's life. For instance, in some states a teen who sexts a self-generated image could face legal ramifications for the distribution of "child pornography." Other parties involved, such as a recipient who forwards the sexted images, could also face prosecution. In fact, in certain states, a teen who has sexted can be charged as both an offender and a victim.^{8,17} Along with legal repercussions, youth who sext are also at risk of being excluded from opportunities in employment and/or education.⁸ Sexting can also adversely impact a youth's mental and emotional well-being. **Youth involved with sexting are at a higher risk of experiencing symptoms of depression and poor self-esteem.**¹⁸ Victims of image-based abuse often struggle with feelings of shame, helplessness, and regret, in some cases to the degree that they no longer want to attend school or face their peers.¹⁹ This is especially the case for girls, who generally experience more negative consequences of sexting than boys.¹⁰ These consequences include impacts on health, relationships, reputation, and mental well-being.²¹

Each of these adverse impacts can be exacerbated by another risk associated with sexting and image-based sexual abuse—cyberbullying.

CYBERBULLYING

Cyberbullying refers to the targeted harassment, degradation, dehumanization, and/or blackmailing of another individual through technology-assisted communications. Oftentimes, cyberbullying perpetration (CBP) involves aggression and hostility, bolstered by the intent to harm or to seek revenge.¹¹ However, cyberbullying can also result from joking or banter between friends that is misinterpreted due to a lack of face-to-face interaction.²² It might also be motivated by a desire to gossip, feel more included, and be more involved in the online conversation.¹⁹ Virtual gossip and social inclusion are especially common motives among girls, who are more likely to be both the victims and/or perpetrators of cyberbullying than boys (though cyberbullying remains a widespread issue among all genders).^{9,10,23}

Cyberbullying involves a variety of tactics: cyberstalking, hate speech, creating imitation profiles, posting false rumors, or distributing maligning information.¹¹ It is especially prevalent among social cliques and within relationships.²² In one study, 52% of the teens sampled cited that the number one reason they

chose to disengage from social media was cyberbullying. Another study reported a 49.4% prevalence of cyberbullying among a sample of 1,497 minors.¹⁰ **Like many types of technology-facilitated victimization, cyberbullying often overlaps or is fueled by face-to-face bullying.**¹¹ However, unlike face-to-face bullying, cyberbullying can occur at any time and can follow the victim anywhere, even into the supposed refuge of their home or bedroom.²²

While cyberbullying varies in method and intent, one of its most common manifestations is peer-to-peer sexual victimization.⁷

¹¹ For example, victims are often cyberbullied via image-based sexual abuse and/or sextortion. It is no surprise then that **youth who participate in sexting are significantly more likely to experience cyberbullying.** As stated above, when a youth sexts, they are at risk of that image being forwarded and dispersed without their consent. This non-consensual forwarding may be the means in which cyberbullying occurs, or it could incite retaliatory cyberbullying. In many cases, cyberbullying is both the motivator and the negative outcome of sexting.¹⁰

Just as sexting is strongly associated with a higher likelihood of cyberbullying, the reverse is also true. **Youth who suffer from cyberbullying are more likely to engage in sexting.** This pattern may be due to a bullied youth's motivation to reattain or increase status among their peers. Or, their participation in sexting may be influenced by loneliness, reduced self-esteem, or other adverse impacts of cyberbullying. Such impacts also include heightened depression, anxiety, self-harm, face-to-face bullying and harassment, and other forms of victimization, both online and offline.^{10,11} Despite these impacts, **youth are often hesitant to report cyberbullying due to fears that adults will respond by restricting ICT access or completely taking their devices away**, thus cutting them off from their primary means of social connection.²²

CONCLUSION

Children and youth need to exercise caution as they navigate the ever-increasing volume of digital interactions. While all interpersonal exchanges carry some amount of risk, the trends of sexting and cyberbullying acutely highlight the lasting harm that can be facilitated through technology and online means. Compounded with the drastic expansion of time children and youth spend connecting with others online, **these risks should prompt discussions about safe practices and prosocial behaviors youth can employ as they gain more access to technology and communication platforms.** While informed parents may rightly feel distressed when confronted by the stark realities of harmful trends, they are not powerless.

Both parents and adult mentors can help children understand the risks associated with online communication and encourage the practice of healthy boundaries. Explaining the

potential consequences of creating and sharing sexually explicit material with others or perpetrating online harassment is essential to helping youth become effective citizens of digital communities and connect with others in a healthy way. As parents model clear boundaries in both online and offline settings, children can gain the confidence to employ such boundaries in all interactions, but specifically when applied to relationships and intimate exchanges.

Lastly, the ubiquity of digital communication should prompt parents **to work with their children to prepare for when harmful encounters occur, not exercising a false hope that such instances will magically pass them by.** As adults proactively address the topic of digital safety, this approach should be paired with understanding and compassionate responses when mistakes are made—offering aid and support to manage fallout of harmful actions taken by others.

APPENDIX A—RECOMMENDED INTERVENTIONS

PRIMARY MESSAGING TO PARENTS

1. **Help your child understand what a healthy relationship looks like.**
 - a. Teach your child about the fundamental characteristics of healthy relationships, including respect, consent, authenticity, honesty, and open communication.
 - b. Model these characteristics in your own relationships.
 - c. Explain to your child how sexting might disrupt or subvert a healthy relationship. Discuss factors such as power dynamics, social pressures, and gender stereotypes and expectations.
 - d. Educate children on sexually inappropriate advances or solicitations—whether in-person or via ICTs—and how to navigate around such encounters.
2. **Educate your child on the risks and impacts of sexting and cyberbullying.**
 - a. Learn about risky behaviors and their potential harms. Teach your child about how these actions adversely affect all involved.
 - b. Teach your child about image-based sexual abuse, sextortion, and cyberbullying. Clarify that even if an image is shared consensually, there is still a risk of that image being forwarded and/or used as blackmail later.
 - c. Discuss the potential legal ramifications of sexting. Review with your child the laws within your state regarding sexting and the distribution of child pornography.
 - d. Have open conversations with your child about any sexted images they may have come across, received, and/or forwarded. Discuss the bystander effect, its harmful impacts, and the importance of empathy.
3. **Build communication and trust.**
 - a. Inquire after your child's questions, concerns, and curiosities related to online interactions and behaviors. Listen with empathy and openness to their disclosure of any missteps.
 - b. Initiate conversations about topics such as sexual development, sexual intimacy, peer pressure, and societal attitudes and expectations towards sex.
 - c. Assure your child that their safety and well-being is your primary concern—more so than their reputation.

PRIMARY MESSAGING TO COMMUNITIES

1. **Raise awareness.**
 - a. Promote education in your community about technology-facilitated harms common among youth.
 - b. Explain to parents the potential impacts of severing a child's connections to ICTs as a disciplinary or precautionary measure. Discuss other possible responses or preventative actions (boundaries around ICT use, parent-child communication, regulation modeling).
 - c. Teach parents, educators, and community members about common risky internet behaviors among youth, the impacts of these behaviors, and measures to help mitigate these behaviors.
 - d. Inform others on existing channels for reporting cyberbullying, image-based sexual abuse, and other types of peer-to-peer victimization.
2. **Advocate for change.**
 - a. Advocate for education initiatives in schools and community youth programs that center on cyberbullying and non-consensual image sharing, the importance of empathy, skills for deescalating or disengaging, ways to offer support to victims, and where to seek help.
 - b. Advocate for comprehensive programs that integrate the education of both online and off-line risks (e.g., address cyberbullying in bullying prevention programs).
 - c. Collaborate with families, schools, and communities to create a response plan for peer-to-peer cyberbullying, image-based sexual abuse, and other forms of victimization.

PRIMARY MESSAGING TO MEDIA

1. **Develop media that accurately portrays the impacts of sexting and cyberbullying among youth.**
 - a. When delivering content related to sexting, cyberbullying, image-based abuse, and other forms of online harassment, convey the gravity of such behaviors and the impacts on all involved parties.
 - b. Develop media that confronts and/or challenges societal attitudes, expectations, and behaviors that reinforce harmful stereotypes around sexual intimacy, dating, and gendered roles.
 - c. When presenting content on sexting or image-based abuse, avoid messaging and terminology that shames or criminalizes the victim.
2. **Raise awareness around the realities of sexting and cyberbullying among youth.**
 - a. Promote sources of support for victims of cyberbullying, image-based abuse, sextortion, or other forms of technology-facilitated abuse.
 - b. Identify the factors that can contribute to tech-facilitated victimization among youth (e.g., the disinhibition effect, bystander apathy, ubiquity of technology, shifts in dating norms and expectations, and gendered pressures).
 - c. Call attention to the harmful impacts children and teens can experience as a result of sexting and cyberbullying (depression, isolation, revictimization, legal prosecution, employment and career opportunities withheld and/or revoked).

APPENDIX B—KEY STATISTICS AND ADDITIONAL RESOURCES

KEY STATISTICS

- 95% of teens report owning a smartphone or having access to one.²
- In 2020, about 4.67 billion people (59% of global population) were active internet users.²⁴
- 45% of teens report that they are online almost constantly.²⁵
- 59% of US teens have experienced at least one form of abusive online behavior.²⁵
- 90% of teens believe online harassment is a problem among their peers.²⁵
- 71% of teens report feeling more connected and included in their friends' lives through social media.⁷
- 97% of girls report experiencing negative impacts from having their sexted images forwarded/shared.⁷
- Prevalence of sexting among youth increases by 12 times between the ages of 12 and 17.¹⁰
- Conservative estimates report that 1 out of 10 kids will experience cyberbullying victimization.¹⁰
- 46.8% of youth report having received a sexting image.⁹
- 72% of youth who receive a forwarded sexting image don't report it. Only 2.6% told their parents, 6.8% contacted the sender to stop, and 5.3% took some other action (blocked the sender, deleted the picture).⁹
- A quarter of youth justify their forwarding of a sexted image as a "joke."⁹
- Of adolescents abused online, 71.9% had sent a nude of themselves the preceding year.²⁶
- Youth who sext are more likely to become victims of cyberbullying.¹⁰
- Youth who are cyberbullied are more likely to engage in sexting.¹⁰
- Adolescents who report having a positive relationship and open communication with their parents engage in fewer risky sexual behaviors, online and offline.⁸

ADDITIONAL RESOURCES

- Thorn.org <https://parents.thorn.org/situation/>
- Stopbullying.gov <https://www.stopbullying.gov/cyberbullying/what-is-it>
- Cyberbullying: What It Is and How to Stop It <https://www.unicef.org/end-violence/how-to-stop-cyberbullying>
- 6 Things Every Teen Needs to Know About Sexting <https://www.verywellfamily.com/things-teens-do-not-know-about-sexting-but-should-460654>
- Using Technology to Hurt Others <https://www.rainn.org/safe-tech>
- Talking About "Sexting" <https://www.commonsensemedia.org/blog/talking-about-sexting>
- "Sexting Handbook"—Common Sense Education https://www.commonsensemedia.org/sites/default/files/uploads/landing_pages/sexting_handbook_ce_1020_1.pdf
- AMAZE.org <https://amaze.org/?topic=personal-safety>
- Social Media Safety <https://www.rainn.org/safe-media>
- Online Dating and Dating App Safety Tips <https://www.rainn.org/node/3478>
- Teaching Digital Citizens in Today's World https://d1e2bohyu2u2w9.cloudfront.net/education/sites/default/files/tlr_component/common_sense_education_digital_citizenship_research_backgrounder.pdf
- Everything You Need to Teach About Digital Citizenship <https://www.commonsense.org/education/digital-citizenship>

APPENDIX C—GLOSSARY OF TERMS

- **Aggravated sexting** involves either harassment to coerce a person into sharing sexual images, or the distribution of those images without the consent of the original sender.
- **CBP:** acronym for cyberbullying perpetration.
- **Decoy victims** are trained adult members of law enforcement who pose undercover as children or adolescents to converse with perpetrators of online child sexual abuse.
- **Experimental sexting** is the sharing of sexual images in a mutual, consensual, same-age relationship often to gain the attention of others but with no criminal intent.
- **Internet of Things (ICT, IoT):** includes smart-devices (cameras, TVs, speakers, appliances, etc.) that are connected to the internet and are often found in the home.
- **Self-generated sexual material** can be comprised of still images or videos (usually taken via phone or webcam) that are sexually themed. This could include posing partially undressed, naked, or exposing genitals, masturbation and live webcam recordings of sexual intercourse, or other sexual acts. Such material is often shared online through means of blogs, vlogs, avatars, text messages, or emails.
- **Sexting** is the intentional sharing of self-generated images of a sexual nature with others. Sexting can be very nuanced and shouldn't be over-generalized. For example, there is a distinction between individuals in a consensual romantic same-age relationship sharing images voluntarily with each other and an individual sharing images because of harassment or extortion by another person who is much older. While the action of sexting is present in both illustrations, the context and outcomes are very different.
- **“Sextortion”** refers to a form of sexual exploitation when threats to expose a sexual image are used to compel a person to do something against their will. Sextortion can be done for other reasons, such as blackmail, revenge, or humiliation.
- **Technology-assisted sexual abuse** refers to abuses that can be facilitated through technology or use of digital communication. Common examples can include the following:
 - **Image-based abuse:** when someone shares or threatens to share an intimate/sexual image of another person, without consent. This includes a range of activities:
 - Sending unsolicited sexual images, or “cyberflashing.”
 - Recording/photographing others without their consent, including intimate videos of consensual sexual activity.
 - Filming or sharing images of sexual assault.
 - Augmenting sexually explicit photos with someone else’s image.
 - Deepfakes: where algorithms are used to create fake images or videos which look realistic.
 - “Sexting”—sharing sexually explicit images through mobile devices. This also includes forwarding such images without consent.
- **Cyberbullying or trolling:** using technology to deliberately harass or humiliate someone, usually over an extended period of time with the intention to hurt the victim socially, psychologically, or physically. In some cases, anonymous/fake social media accounts are used for this purpose.
- **Email scams or sextortion:** a victim is blackmailed/threatened with exposing some sexual activity (usually fake/fictional) unless a payment is made.
- **Romance scams (catphishing):** engineering a scam through fake online accounts/profiles to exploit unsuspecting online users and engage in virtual romantic relationships and exploit them.
- **GPS tracking/smart home stalking/hidden cameras:** GPS trackers and spyware apps can enable an abuser to track their victim's movements/whereabouts.

APPENDIX D —RISKY ONLINE BEHAVIORS**RISKY ONLINE BEHAVIORS**

- Visiting sites with content intended for adults (e.g., pornography).
- Sending/receiving sexually explicit images.
- Having sexual conversations with others.
- Posting personal information about yourself or others.
- Accepting friend requests from strangers on social media.
- Sharing your address or current location with others online.
- Having public profiles that can be viewed by anyone.
- Creating social media accounts that parents are not aware of.
- Using gaming applications or services that allow chats or unmonitored communication.
- Access to accounts where unmonitored purchases can be made.
- Keeping sexually explicit material on personal devices.

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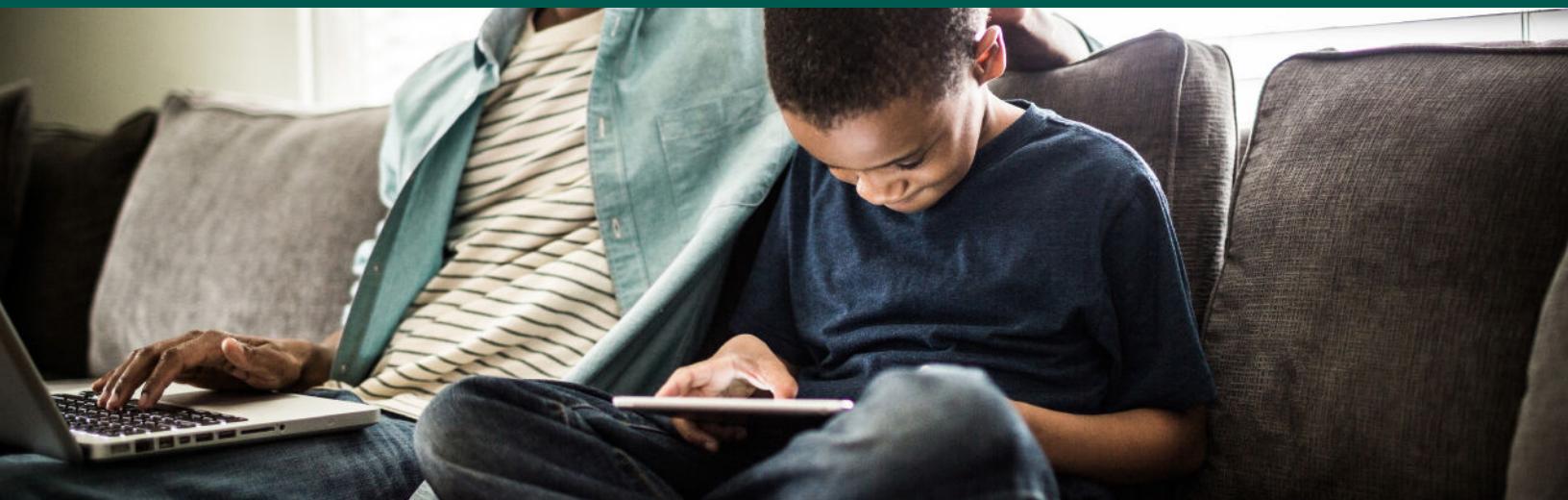
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**DIGITAL SAFETY:**

Technology-Facilitated Child Sexual Abuse

THIS RESEARCH BRIEF:

- Outlines what technology-assisted child sexual abuse is, and what methods are most commonly used.
- Identifies factors that place youth at a higher risk of experiencing child sexual abuse, via technology or otherwise.
- Discusses the potential impacts that victims of technology-facilitated abuse may experience.

DEFINITION, MYTHS, AND EXPLANATION

Technology-assisted child sexual abuse (CSA) involves **an adult utilizing internet connected technologies (ICTs) to perpetrate the sexual grooming and victimization of a child or adolescent**. Typically, technology-assisted CSA involves an adult soliciting a child to engage in sexual acts such as sexting, cybersex, sharing personal sexual information, and/or performing sexual behaviors in front of a webcam (stripping, masturbating, participating in sex games).¹⁻³

One myth that persists among parents is that all offenders who sexually target children online do so to have sex offline. For some offenders, however, the online engagement with a child or teen is the primary goal of their perpetration. Known as **fantasy-driven offenders**, these adults have little interest in meeting their victims in-person. Rather, they are motivated by the desire to sexually climax during ICT-facilitated interactions, such as

Children and youth today spend a significant portion of their lives in the online sphere. Ongoing advancements in technology combined with the mass-proliferation of personal mobile devices and digital media enables them to connect with others with unprecedented speed, frequency, and reach. While such connection offers substantial positive opportunities, it comes with an added measure of risk as they connect with others. Digital media and mobile technologies can facilitate sexual victimization between youth peers. They can also enable an adult to sexually abuse a minor.

sexting, exhibitionism, voyeurism, or cybersex.⁴ In contrast, **contact-driven offenders** target victims with the purpose of achieving in-person sexual contact.⁴⁻⁶ They use technological means of grooming and desensitizing the victim into agreeing to meet and have sex offline. Contact-driven offenders often target multiple potential victims at once. They introduce sexual topics into the conversation quickly.^{2,7} In addition to these two categories of offenders, there are **profit-driven offenders** who sell sexually explicit content of children or teens for financial gain (also known as sex trafficking).¹⁴

Another myth about technology-assisted CSA is that all offenders whom children meet online are strangers. However, **most adults who sexually abuse online had real-world connections with their victim beforehand**.^{1,7,8} In fact, sexual abuse via ICTs can also occur in conjunction with abuse that is taking place offline. Technology-assisted CSA can be perpetrated by an acquaintance, a neighbor, a family member, a teacher, a youth-serving organization leader, or anyone else the child has real-world connections to.

One study found that **in over half the reported cases of technology-assisted CSA, the perpetrator was either an acquaintance to the child (27%) or was a member of their family (26%).**⁹ In some cases, these “in-person offenders” might seek to initiate grooming via ICTs or continue grooming and abuse that has already begun offline. Through ICTs, offenders can gain more access to their targeted victim to initiate or further sexual interactions. They can also more easily carry on these interactions in secret, avoiding the attention of the child’s caregivers or other adults.¹⁰ These activities can range from asking the child about their sexual experience to requesting or sending nude images/videos.¹ Unfortunately, as with cases of contact CSA, the public discourse around technology-assisted CSA tends to focus on stranger danger rather than adults who are already part of the child’s life.⁸

GROOMING PATTERNS

Whether a perpetrator is a stranger the child met online or someone they already know, **offenders who groom through ICTs often use many of the same techniques as offenders who groom in person.** These grooming techniques have been identified by researcher R. O’Connell as the “core grooming strategies.” These strategies consist of five stages. First, the offender seeks to form a relationship by building rapport, gathering information, and identifying the vulnerabilities of the victim. Next, the offender conducts a risk assessment to determine the overall risk of being exposed. If they feel safe to continue the grooming process, they will attempt to isolate the child, fostering a sense of secrecy and exclusiveness between themselves and the victim.

During the sexual stage, the offender will begin bringing sexual topics and behaviors into the conversation, oftentimes introducing sexually explicit content to push the child’s boundaries.¹⁰ While many online offenders employ these five grooming strategies, they may do so in a nonsequential progression, sometimes skipping certain stages altogether.¹¹ For instance, contact-driven offenders may skip the relationship-building stage and jump right to the sexual stage, introducing sexual topics early in the conversation to examine the child’s vulnerability. In one study that coded 100 transcripts of adults attempting to groom decoy victims met online, **89% introduced sexual content within the first 30 minutes of the conversation.**¹⁰

There are a variety of tactics online offenders use during these stages of grooming, the most prevalent being flattery. **During initial interactions, many offenders offer compliments on the victim’s physical appearance and sexual attractiveness** to make the child feel “special” or to slowly ease them into sexual conversations.^{2,10}

One study found that 89% of offenders used flattery during the initial stages of conversation, employing statements such as “you are so pretty” and “you must be so smart.”¹⁴ Other common tactics include deception (such as engineering fake online accounts to commit scams like catphishing) and bribery.⁸ Offenders may offer gifts or money to demonstrate affection, build exclusivity, and gain greater access to the child—online and offline. For example, if an offender gifts a minor a webcam, it becomes more challenging for the minor to refuse requests for self-generated sexual material or participation in cybersex or other sexual activities initiated by the offender.³ Similarly, an offender may gift a child a cellphone with which they can pressure the child to keep in contact or engage in sexting. This reliance on cellphone communications is not limited to in-person offenders. Even if an offender meets their victim online, there is a high likelihood (83%) that they will expand their communication patterns with cellphones and text messaging.¹⁰

Other ways offenders seek to build trust and lower inhibitions include expressing similar interests as the child, showing sympathy towards the child’s concerns, inquiring about the child’s sexual experience (“are you a virgin?”), expressing love and trust toward the child, and sprinkling in sexual topics within non-sexual conversations.^{1,4,7}

Whatever the order, timing, and tactics implemented throughout the grooming process, the offender’s intent remains the same: **to isolate and coerce the child into sexual situations.**¹²

ONLINE CHATTING AND LIVE STREAMING

Social connection and communication are integral components of the online experience. **45% of teens report they are online on a near-constant basis.**¹³ Many platforms and applications include chat or streaming features that allow for users to communicate together and share information. These applications can operate in real-time as in the case of live streams, or in asynchronous modes like message boards or recorded streams.

Participating in **online gaming or streaming** are both common contexts that attract youth. 84% of teens say they have or have access to a game console at home, and 90% say they play video games (on a game console or mobile device). Roughly nine in ten boys (92%) have or have access to a game console at home, and 97% say they play video games in some form or fashion.¹³ Chat features often are used to enhance the gameplay experience and are embedded in gaming platforms or commonly used chat channels that integrate to games or consoles (e.g., Discord, Slack).

These chat services or features are not inherently designed to perpetuate abuse (and have clearly stated terms of service that prohibit such behaviors). In fact, many of these services, apps, and platforms have become integral to how youth communicate and connect with one another. That being said, in most cases, communications between users simply cannot be monitored or regulated entirely. **Grooming, harassment, and sexual solicitations can occur through these chat services.** And, while several chat features can be adjusted or disabled entirely by users, infractions that violate the terms of services are often the responsibility of victims to report.

Ultimately, with the ever-changing digital landscape, and the variety of apps and platforms that contain unmonitored chat functions, livestreams, shared content, and other problematic features, parents may feel overwhelmed trying to keep up. Luckily, **there are several curated guides parents can reference** to help identify the potential harms their children might encounter online. Some examples of these guides are found at [Family Education](#), and [ParentsTogether](#).

WHO IS AT RISK?

DEMOGRAPHICS

While all youth face some degree of risk, there are certain factors that can increase the likelihood of a child or teen becoming a victim of technology-facilitated CSA. As with other ICT-facilitated harms—such as cyberbullying and image-based sexual abuse—**girls are more likely to be targeted than boys.**^{2,5,9,14} However, boys are more likely than girls to seek out sexually explicit material, post sexual images of themselves, and engage in other problematic internet behaviors.⁷ **LGBTQIA+ youth are also significantly more vulnerable to technology-facilitated CSA**, with one study showing that 42% of queer girls and 30% of queer boys experienced distressing sexual advances and requests for sexual favors, compared with 12% for heterosexual girls and 4% for heterosexual boys.^{5,9} Studies also show that **older teens (13–17 years of age) are more at risk** than younger teens (under 13 years) due to their frequent internet use, higher social media presence, greater unsupervised access to ICTs, and higher propensity for risk-taking and impulsivity.^{5,10,15} That being said, younger children are more likely to experience more severe forms of technology-facilitated CSA and are less likely to report the abuse.⁹

Other demographic segments that are significantly vulnerable with online risks include children from poorer households, children in communities with a limited understanding of different forms of sexual abuse and exploitation, children who are out of school, and children with disabilities.¹⁶

PERSONAL FACTORS

Similar to other types of victimization, **the greatest risk factors for experiencing sexual abuse (via technology or otherwise) are adverse childhood experiences.**⁹ These are experiences that can lead to significant, long-term impacts on a child's mental health, well-being, and relationships. Often, adverse childhood experiences (ACEs) are characterized by an unstable home environment, parental conflict, lack of emotional and/or physical security, and poor relationships among family members. ACEs also encompass other forms of victimization, such as physical abuse, sexual abuse, maltreatment, or neglect.² One study found that **96% of victims of technology-facilitated sexual abuse had prior experiences of victimization.**⁹

Whether a child has a history of victimization or a lack of support in the home, **adverse childhood experiences can lead to lowered self-esteem, higher levels of depression, and other mental health issues.** The child may also experience intense feelings of isolation and rejection, prompting them to seek for affection and attention from sources outside the home.² Each of these effects, paired with a natural curiosity about sex, increase a child's vulnerability to technology-facilitated sexual abuse.¹⁴

BEHAVIORAL FACTORS

Along with prior traumatization and poorer psychological health, **another significant risk factor is problematic internet use.** Individuals who engage in online sexual behaviors, share personal information, and post nudes on an online forum place themselves at a higher risk.¹⁴ Such sensation-seeking behaviors are often linked to a minor's need to seek validation and prove their sexual maturity.⁹

Ultimately, a child's vulnerability to technology-facilitated CSA is informed by:

- Age, gender, and sexual identity.
- Adverse childhood experiences—past and present.
- Mental, emotional, and psychological well-being.
- Their relationship with parents.
- Behavioral patterns—online and offline.

IMPACTS OF TECHNOLOGY-ASSISTED CSA

Victims of technology-assisted child sexual abuse **experience many of the same impacts as victims of contact child sexual abuse.** These impacts can include depression, isolation, low self-esteem, post-traumatic stress symptoms, eating disorders, behavioral problems, physical health difficulties, self-harm and suicidality, revictimization, and other outcomes that adversely affect a child's development.^{4,11,14,17,18}

Studies also suggest that **victims of technology-facilitated CSA may experience more blame for their abuse than victims who were abused in person.** This divergence may be due to the lack of physical force, intrusion, or contact relating to the abuse, as well as risky behaviors displayed by the victim (often including sharing self-generating explicit images). Unfortunately, victim-blaming by some professional respondents fails to acknowledge the complexities of online grooming. Blaming victims has been raised as a systemic problem that has been noted among many types of professionals who work with victims of CSA including trauma therapists, CPS caseworkers, and members of law enforcement. These problematic attitudes may be due to a lack of resources, preparation, and training for applicable cases of tech-facilitated CSA.¹⁸ In addition, **a parent's response to a child's experience of abuse is critical to that child's well-being and long-term healing.**¹⁹ Blame placed on the victim can also lead to the victim's own feelings of shame and self-blame, which can reduce the likelihood of future disclosure or seeking support.¹⁸

CONCLUSION

As parents assess the risk to their children, they should give due consideration to online interactions and the inherent potential of abusive situations that accompanies high access to personal devices. It is important to both: 1) acknowledge the importance of technology-facilitated connection in today's world and 2) be aware of the hazards that can lead children into sexually exploitative situations. Caregivers who recognize that **technology-facilitated abuse can occur in tandem with offline abuse** are more empowered to be attentive to behaviors that warrant concern. They are also more likely to take action to reduce vulnerability and intervene when problematic internet use occurs.

While many similarities exist between abuse that is conducted online and offline, parents and youth should be aware of the nuances of connecting with others in a digital space and discuss them openly with each other. Children need to be equipped with **the necessary tools and strategies to identify when boundaries have been crossed and how to respond appropriately.** Parents should avoid minimizing the impact of abuse that may have already occurred in an online space, and seek to provide support as in all other cases of abuse.

APPENDIX A—RECOMMENDED INTERVENTIONS

PRIMARY MESSAGING TO PARENTS

1. Teach and model digital safety and literacy.
 - a. Learn about risky internet behaviors and their potential harms. Discuss these behaviors with your child, why they are considered risky, and the adverse effects they can lead to.
 - b. Seek to model a healthy relationship with ICTs, including effective time management, self-regulation, appropriate online interactions, and protecting sensitive information.
 - c. Explain to children what a digital footprint is and the potential near-term and long-term impacts of what you share and consume online.
2. Help youth make more insightful judgments about romantic relationships.
 - a. Initiate frequent, open discussions about broader topics around relationships, sex, boundaries, consent, and coercion.
 - b. Distinguish the differences between gestures that are affectionate and gestures that may be sexually exploitative. Discuss how gifts, bribes, and flattery can be used as grooming tactics.
 - c. Educate children on recognizing sexually inappropriate advances or solicitations—whether in-person or online—and how to navigate around such encounters.
 - d. Explain why a relationship with someone who is much older is inappropriate and harmful. Clarify that the older person is committing a crime and could be prosecuted.
3. Foster support and communication.
 - a. Encourage your child to disclose to you if they have already experienced sexual advances and/or abuse, whether online or offline.
 - b. Clarify that if your child does experience tech-facilitated harms, you will not withdraw their ICT privileges. Work together to develop healthy boundaries related to tech use, as well as appropriate responses when those boundaries aren't honored.
 - c. Inquire after your child's questions, concerns, and curiosities related to tech-facilitated interactions, content, and behaviors. Listen with empathy and openness to their disclosure of any missteps.

PRIMARY MESSAGING TO COMMUNITIES

1. Raise awareness.
 - a. Promote education in your community about technology-facilitated harms such as child sexual abuse. Clarify that harms experienced online often occur in tandem with harms experienced offline.
 - b. Educate other parents and caregivers on the ways in which ICTs can facilitate grooming, either by a stranger met online or by someone the child already knows.
 - c. Discuss with other parents and caregivers effective ways to respond if technology-facilitated abuse has occurred.
 - d. Inform others on existing channels for reporting technology-facilitated sexual abuse.
2. Advocate for change.
 - a. Advocate for education initiatives on digital citizenship and tech safety in schools and community youth programs.
 - b. Push for sex education programs to include models of healthy relationships, as well as problematic behaviors or warning signs of unhealthy relationships.
 - c. Lobby for digital literacy and safety training for parents, caregivers, teachers, and community leaders.
 - d. Lobby for equipping child protection professionals, law enforcement members, and trauma therapists with adequate resources and training on the complexities of technology-facilitated CSA.
 - e. Advocate for practices that promote checks against unhealthy ICT-facilitated contact between youth and adult educators, mentors, and program leaders.

PRIMARY MESSAGING TO MEDIA

1. Develop media that accurately portrays technology-facilitated harms that impact youth.
 - a. When delivering content related to technology-facilitated child sexual abuse, convey the severity of such behaviors and the impacts on all those involved.
 - b. Ensure portrayals of technology-facilitated child sexual abuse communicate the complexities of online grooming, particularly when self-generated material by the victim is involved.
 - c. Understand the common myths and misunderstandings about technology-facilitated CSA (e.g., the overemphasis on stranger danger) and create content to dispel those myths.
2. Raise awareness around technology-facilitated harms that impact youth.
 - a. Promote sources of support for victims of technology-facilitated child sexual abuse.
 - b. When reporting on incidents of technology-facilitated child sexual abuse, treat such incidents with the same level of gravity and impact as incidents of contact sexual abuse.
 - c. Shift the focus of educational messaging away from the dangers of internet predators and towards models of healthy relationships, as well as examples of unhealthy relationships (partner is significantly older, persistent pressure to sext, violation of boundaries).

APPENDIX B—KEY STATISTICS AND ADDITIONAL RESOURCES

KEY STATISTICS

- 59% of US teens have experienced at least one form of abusive online behavior.²⁰
- In one quarter of reported cases for technology-facilitated child sexual abuse, the perpetrator is a family member.⁹
- In over half of reported cases of technology-facilitated child sexual abuse, the perpetrator is either an acquaintance of the victim (27%) or a family member (26%).⁹
- During interactions with a victim, 98% of online groomers introduce sexual content into the conversation within the first day, 69% introduce sexual content within the first 30 minutes.¹⁰
- Among offenders who met victims online, 83% extend the communication to cellphones.¹⁰
- 89% of online offenders employ flattery during the first stage of conversation with the victim.⁷
- 93% of reported online perpetrators request images from a child or young person.⁹
- Of adolescents abused online, 71.9% had sent a nude of themselves the preceding year.¹⁴
- Among 14–15-year-olds, 48% of girls and 18% of boys experience unwanted sexual advancements from adults met online (Swedish study).¹⁴
- 45% of transgender youth experience unwanted and distressing sexual advances online, in contrast to boys (11%) and girls (19%) who do not identify as transgender.⁹
- 42% of lesbian/queer girls, 41% of bisexual girls, and 30% of gay/queer boys report experiencing unwanted and distressing sexual advances online, in contrast to heterosexual boys (4%) and heterosexual girls (12%).⁹
- 96% of victims of technology-assisted child sexual abuse have experienced other forms of victimization beforehand.⁹
- Children who are victimized by technology-facilitated sexual abuse are likely to experience self-blame, depression, and low self-esteem.²¹

ADDITIONAL RESOURCES

- Thorn.org <https://parents.thorn.org/situation/>
- Fightchildabuse.org <https://fightchildabuse.org/>
- Using Technology to Hurt Others <https://www.rainn.org/safe-tech>
- AMAZE.org <https://amaze.org/?topic=personal-safety>
- Global Kids Online <http://globalkidsonline.net/updates/>
- What Works to Prevent Online and Offline Child Sexual Exploitation and Abuse? <https://www.unicef.org/eap/media/4706/file/What%20works.pdf>
- Social Media Safety <https://www.rainn.org/safe-media>
- Online Dating and Dating App Safety Tips <https://www.rainn.org/node/3478>
- Teaching Digital Citizens in Today's World https://d1e2bohyu2u2w9.cloudfront.net/education/sites/default/files/tlr_component/common_sense_education_digital_citizenship_research_backgrounder.pdf
- Everything You Need to Teach About Digital Citizenship <https://www.commonsense.org/education/digital-citizenship>
- 11 Social Media Flags Parents Should Know About <https://www.commonsensemedia.org/blog/11-social-media-red-flags-parents-should-know-about>

APPENDIX C—GLOSSARY OF TERMS

- **Child sexual abuse** involves another person (adult, sibling, peer, etc.) who forces or coerces a child or adolescent into sexual activity. This activity may include fondling genitals, masturbation, oral-genital contact, digital penetration, vaginal intercourse, and/or anal intercourse. Child sexual abuse is not restricted to simply physical contact—it may include unhealthy sexual exposure, voyeurism, and child pornography.
- **Contact-driven offenders:** when individuals use online means to meet and have sex with youth. This includes offenders who groom with the purpose of eventual offline sexual contact.
- **Decoy victims** are trained adult members of law enforcement that pose undercover as children or adolescents to converse with perpetrators of online child sexual abuse.
- **Fantasy-driven offenders:** when individuals use online means to achieve sexual gratification and confine such activities to the online sphere. These activities can include using images, participating in sexually explicit chats (with children), cybersex, voyeurism, or exhibitionism.
- **Internet of Things (ICT, IoT):** includes smart devices (cameras, TVs, speakers, appliances, etc.) that are connected to the internet and are often found in the home.
- **Problematic internet use** (noted as PIU in academic literature) occurs when an individual's preoccupation with online activities results in social, occupational, or financial difficulties. In some cases, pathological behavior connected with internet use is present.
- **Profit-driven offenders:** when individuals create or market sexual material to online customers.
- **Risk assessment** refers to strategies which help determine the possibility or exposure of harmful content/experiences. Risk assessment should be conducted by parents/caregivers to examine the online environment, interactions, and relationships that their children are participating in. Ideally, parents should also mentor children in performing their own risk assessments, particularly relating to online behaviors and interactions.
- **"Sensation seeking" behaviors** are characterized as disinhibited actions taken by children and young people who are seeking out new/novel experiences, and usually involve taking on heightened risks (on and offline).
- **Sexting** is the intentional sharing of self-generated images of a sexual nature with others. Sexting can be very nuanced and shouldn't be overgeneralized. For example, there is a distinction between individuals in a consensual, romantic same-age relationship sharing images voluntarily with each other and an individual sharing images because of harassment or extortion by another person who is much older. While the action of sexting is present in both illustrations, the context and outcomes are very different.
- **Technology-assisted child sexual abuse** refers to abuses that can be facilitated through technology or use of digital communication. Common examples can include the following:
 - **Image-based abuse:** when someone shares or threatens to share an intimate/sexual image of another person, without consent. This includes a range of activities:
 - Sending unsolicited sexual images "cyberflashing."
 - Recording/photographing others without their consent, including intimate videos of consensual sexual activity.
 - Filming or sharing images of sexual assault.
 - Augmenting sexually explicit photos with someone else's image.
 - Deepfakes: where algorithms are used to create fake images or videos which look realistic.
 - "Sexting" – sharing sexually explicit images through mobile devices. This also includes forwarding such images without consent.
 - **Cyberbullying or trolling:** using technology to deliberately harass or humiliate someone, usually over an extended period of time with the intention to hurt the victim socially, psychologically, or physically. In some cases, anonymous/fake social media accounts are used for this purpose.
 - **Email scams or sextortion:** a victim is blackmailed/threatened with exposing some sexual activity (usually fake/fictional) unless a payment is made.
 - **Romance scams (catphishing):** engineering a scam through fake online accounts/profiles to exploit unsuspecting online users and engage in virtual romantic relationships and exploit them.
 - **GPS tracking/smart home stalking/hidden cameras:** GPS trackers and spyware apps can enable an abuser to track their victims movements/whereabouts.

APPENDIX D—RISKY ONLINE BEHAVIORS

RISKY ONLINE BEHAVIORS

- Visiting sites with content intended for adults (e.g., pornography).
- Sending/receiving sexually explicit images.
- Having sexual conversations with adults.
- Accepting gifts from adults that facilitate unsupervised interactions.
- Posting personal information about yourself or others.
- Accepting friend requests from strangers on social media.
- Sharing your address or current location with others online.
- Having public profiles that can be viewed by anyone.
- Creating social media accounts that parents are not aware of.
- Using gaming applications or services that allow chats or unmonitored communication.

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ONLINE RESOURCE INDEX

Healing Resources

RESOURCES FOR SURVIVORS OF CHILD SEXUAL ABUSE (LANDING PAGE)

A collection of research-based online resources to help survivors address symptoms that are commonly associated with child sexual abuse trauma.

EFFECTS OF CHILD SEXUAL ABUSE

An overview of the whys behind the effects that childhood sexual abuse can have on a survivor, with information about trauma and its impact on the brain and body, the long-lasting effects of shame, and the connection between trauma and physical symptoms.

COMMON SYMPTOMS EXPERIENCED BY SURVIVORS OF CHILD SEXUAL ABUSE

When experiencing high levels of stress, the body releases hormones (adrenaline, cortisol) to prepare the body to respond to the stressor; this starts a chain of physiological responses in the body, which can disrupt sleep, negatively affect mood, hinder metabolism, interfere with the immune system, obstruct concentration and memory, or create a sense of discontent that may lead a survivor to try to numb the pain with substances, relationships, or other distractions.

SLEEP ISSUES

Sleep disorders are the most reported symptom of child sexual abuse.

PANIC ATTACKS

Post-traumatic stress, which may be caused by child sexual abuse, is frequently associated with panic attacks.

DYSFUNCTIONAL RELATIONSHIPS

The trauma of child sexual abuse can influence the survivor's sense of safety, self-worth, and understanding of what a relationship looks like.

ADDICTIONS

Researchers have established a strong relationship between childhood sexual abuse and increased rates of substance use.

FEELINGS OF SHAME

Shame is especially common among survivors of child sexual abuse, in part because of the stigma associated with sexual abuse.

LONELINESS

Since the abuse involved another person(s), survivors can endure severe emotional injuries like betrayal, self-hatred, and depression. These can make it very difficult to connect with others or sustain meaningful relationships.

DEPRESSION

Research suggests that by the age of 30, 85% of survivors of child sexual abuse experience a mental health issue such as depression.

ANXIETY

When a person's body and brain is in a constant state of alert, as in the case of child sexual abuse, the chronic sense of danger can manifest as anxiety.

FLASHBACKS

Survivors of childhood sexual abuse commonly experience flashbacks and sudden intrusive memories of the abuse, even after many years have passed.

UNHEALTHY BEHAVIORS

When a survivor is triggered, the brain defaults to a behavior that has provided relief in the past. While some of these behaviors have been helpful before or may work in moderation, in the long run the behavior may become dysfunctional and cause even more distress in the survivor's life.

COMMUNICATION ISSUES

Child sexual abuse can have a profound effect on the way a survivor's brain receives and interprets information and social cues.

EMOTIONAL NUMBNESS

The trauma of child sexual abuse causes the brain to work in overtime, and sometimes the brain's solution to overwhelming emotions and feelings is to shut the feelings off altogether.

TRIGGERS

Child sexual abuse trauma causes an individual to be extra sensitive to sights, sounds, smells, or feelings that can be connected in any way to the sexual abuse. And when it does detect such reminders, the brain and body will sound off an alarm bell (a trigger) to warn the individual against danger.

CHRONIC PHYSICAL PAIN

There is a higher prevalence of chronic physical pain occurring in survivors of child sexual abuse, likely because the hormones that are released to generate the body's stress response can increase inflammation, heighten muscle tension, and disrupt the immune system.

DIFFICULT RELATIONSHIP WITH THE BODY

The physical, emotional, and sexual trauma a survivor endured as a youth can have long-term impacts on their relationship with their own body, including their body image, sense of ownership, and physical health.

SEXUAL INTIMACY ISSUES

Because of the nature of child sexual abuse, sexual intimacy may serve as a physical, mental, or emotional reminder of that abuse.

DISSOCIATION

When an individual experiences increased helplessness during a trauma, such as sexual abuse, the brain may resort to the self-protective strategy of dissociation.

HEALING ACTIVITIES (LANDING PAGE)

Research-based, applicable and practical activities that offer a survivor new information, inspiration, and techniques to facilitate emotional and mental healing.

3 HEALING PRACTICES: ACKNOWLEDGEMENT, MINDFULNESS, ASPIRATION

Saprea's core practices that are clinically sound and inform and enhance the way a survivor engages in activities and learning.

SELF-COMPASSION

This resource encourages a survivor to actively love and value themselves for who they are right now. It involves extending warmth, kindness, and deep understanding toward perceived inadequacies, failures, or suffering.

PACED BREATHING

This grounding technique is central to helping survivors reconnect with the present moment due to the critical role that the breath plays in an individual's physical and emotional responses.

PRACTICING BOUNDARIES

Through boundaries, survivors can initiate and build meaningful connections supportive to their healing, as well as identify and manage those relationships that can create further stress and pain.

ASSERTIVE COMMUNICATION

The trauma of sexual abuse can deeply affect a person's confidence, their perception about relationships, and their willingness to open up to others.

YOGA

Yoga can help a survivor become more aware of their thoughts, emotions, and physical sensations.

DEVELOPING ASPIRATIONAL THINKING

As a survivor considers what they want for themselves and their future, they are more empowered to focus on healing thoughts and actions in the present.

CREATING A BACK-UP PLAN

A back-up plan is any sort of safety precaution a survivor puts in place to help manage or cope with any trauma-related symptoms they might experience.

GROUNDING TECHNIQUES

A foundational technique survivors can learn to help manage triggers is called “grounding,” which involves bringing the self back to the present moment.

MOVEMENT

Reconnecting with the body is an integral part of the healing process. Additionally, getting the body moving can benefit a survivor’s mental, emotional, and physical health.

EMOTION WHEEL

Emotions are critical pieces to understanding how a survivor is experiencing the world around them, and the emotion wheel can assist a survivor in identifying what they are feeling at any given moment.

SLEEP AFFIRMATIONS

Sleep affirmations are short, positive statements that can help a survivor calm the limbic system and clear their thoughts when trying to fall asleep.

MUAY THAI

Muay Thai teaches a survivor to focus on controlled movements and intentional breaths. This focus can serve as an anchor that keeps the survivor grounded and strengthens their brain-body connection.

CREATING INTENTIONAL BEHAVIORS

For many survivors of child sexual abuse, a key part of healing from trauma is feeling empowered by the choices they make.

CHALLENGING COGNITIVE DISTORTIONS

A cognitive distortion is a mental shortcut the mind takes that is rooted in feelings of shame, judgment, and self-blame. Such shame-based mental shortcuts are especially common among survivors of child sexual abuse.

SUPPORT NETWORK

A survivor’s ability to heal from past trauma is greatly accelerated when they have the strength, care, and support of others.

PROGRESSIVE MUSCLE RELAXATION

A key part of healing from child sexual abuse is feeling more connected with the body. This relaxation exercise centers around tensing and releasing major muscle groups to help the survivor notice, appreciate, and relax those muscles.

GUIDED MEDITATION

Guided meditation and guided imagery can build a survivor’s ability to practice mindfulness and focus on themes and actions that will facilitate healing.

SEXUAL HEALTH

Many survivors of child sexual abuse experience a difficult relationship with sexual intimacy. To build a healthier relationship with intimacy often requires developing a better understanding of sexual health.

CREATIVE EXPRESSION

Creative expression may be a cathartic way for a survivor to ground themselves to the present, recognize their emotions, and celebrate the progress they’ve made.

NAVIGATING RELATIONSHIPS

As survivors evaluate the health of their relationships, they can better identify the strengths of those relationships, as well as areas that may need some improvement.

NUTRITION

Food and mood are intertwined, a fact that is especially important to survivors due to the prevalence of depression, anxiety, and other mental health challenges.

Prevention Resources

REDUCE THE RISK OF CHILD SEXUAL ABUSE – OUR APPROACH (LANDING PAGE)

PROACTIVE PARENTING

These resources highlight what parents should know, do, or be that will provide a positive example, strengthen their relationships with their children, and identify risks specific to their kids and/or family situation.

BOND WITH YOUR CHILD

Every interaction between a parent and child is a chance to grow closer, and can help parents have important conversations, identify red flags, develop trust, and help their child form an identity that is tied to supportive, loving relationships.

MANAGE YOUR EMOTIONS

Parents who show their child how to experience feelings without letting the emotion control their response are modeling resilience. They are also reducing the likelihood that their child will engage in unhealthy behaviors as a way to cope with distressing emotions.

COMMUNICATE OPENLY

Parents who communicate effectively are more likely to have children who feel they can open up about challenging situations and ask questions about sex, their bodies, or anything else they want to discuss.

IDENTIFY RISKS

Parents can learn to identify risky situations that can be mitigated with family rules, increased communication, or monitoring of online activity.

BUILD YOUR SUPPORT NETWORK

Parents can build a support circle who can be extra sets of eyes and ears to look out for their child. Additionally, it's beneficial for every child to have healthy, positive relationships with trusted adults.

RAISING CAPABLE KIDS

As children's capability and confidence increase, their vulnerability to sexual abuse decreases.

COMMUNICATE BOUNDARIES

It's important for children to be able to establish and communicate boundaries, and to be empowered to express and reinforce those boundaries.

COPE WITH EMOTION

Children who can cope with big emotions are less likely to lean on unhealthy behaviors that can increase their vulnerability to sexual abuse.

BUILD CONFIDENCE

Building a child's self-confidence reducing feelings of isolation, withdrawal, and shame—all of which decrease a child's vulnerability to being sexually abused.

PRACTICE CONSENT

When children practice respecting the boundaries of another, reading body language to understand mutual interest, and honoring another person's "no," they will have the foundation for practicing consent in situations where the stakes are higher.

SEXUAL DEVELOPMENT AT ALL AGES

Understanding this information will help parents know what to expect as their children grow increasingly curious about the human body, where babies come from, and what they see online or hear their friends talking about.

DEVELOPMENTAL STAGES

These resources teach parents about stages of sexual development so they can anticipate what their child will go through and when.

SEX TALKS

These resources help parents with conversations about sexual intimacy and highlight the importance of having a series of ongoing chats—early and often—that provide age-appropriate information based on a child's maturity level.

CONCERNING BEHAVIOR

These resources help a parent understand if they should be concerned about a child's sexual behaviors.

ONLINE SAFETY

These resources discuss online concerns specific to sexuality and includes addressing topics like pornography, sexting, online grooming, and monitoring your child's online activity.

Responding to a Child Who Discloses They've Been Sexually Abused

SIGNS OF SEXUAL ABUSE AND HOW TO RESPOND

Parents learn the signs of sexual abuse and important first steps to take in their response.

HOW TO HELP A CHILD WHO HAS EXPERIENCED SEXUAL ABUSE

Parents learn the importance of responding, supporting, and prioritizing the child who has recently disclosed.

HOW TO REPORT SEXUAL ABUSE IN THE UNITED STATES

This resource explains the process of reporting sexual abuse in the US, and provides short answers to common questions and concerns of parents.