



# Child Sexual Abuse Prevention Handbook

# WELCOME!

The Dakota Medical Foundation Child Sexual Abuse Prevention initiative teaches a set of preventative strategies to help protect children from sexual abuse.

It's conservatively estimated that one of every 10 children will be sexually abused, a health crisis hidden in part by the fact that fewer than one in five victims tell a parent or other adult it has happened. This childhood trauma is a root cause of much suffering, addiction, depression, and suicide and heightens the risk for lifelong health ailments, ranging from obesity to asthma.

As you learn, think about how this information can be used in your family, workplace, and other places in the community.

## USEFUL RESOURCES

Beyond this course, here are some other resources you'll find helpful:

- At any time, go back and review what you've learned at [LearnTheSigns.org](https://www.learnthesigns.org).
- The DMF Facebook page provides regular updates, tips, and learning opportunities.
- For youth organizations, this program offers help to diminish risk and protect children in programs. There is an Organizational Audit available to find points of vulnerability, and a Child Sexual Abuse Prevention Planning Guide to shape strong preventative policies, vigilant monitoring protocols, and proactive cultures that work against sexual abuse. We also offer individualized help to navigate these processes.

Child Sexual Abuse Prevention is jointly led with Red River Children's Advocacy Center, Cass County and Clay County social service agencies, Prevent Child Abuse ND, and the Sanford Center for Biobehavioral Research. This program was developed locally and was authored and driven by top leaders of these organizations. These organizations also comprise the Child Sexual Abuse Prevention Steering Committee. Volunteer trainers come from these agencies and many others.

This program is constantly seeking new partners and trainers and training sites to help end child sexual abuse in Cass and Clay counties. Contact [Info@DakMed.org](mailto:Info@DakMed.org) if you are interested.



# BEWARE OF GROOMING

## The Single Most Common Behavior Pattern of Child Sexual Abusers

90 percent of abusers are known to the child and typically the parents as well. They manipulate the relationship and use the grooming process in order to isolate, sexually abuse, and manipulate the child to keep their secret. Knowing this pattern helps you protect.

### 1 GAINING ACCESS

Some abusers seek jobs or volunteer positions or will just hang out somewhere they're surrounded by children. They may pose as a child online to lure a child via the internet. Others become friends with a family to get close to their children. They might date a single parent who could use some extra help or who needs a babysitter to cover extra shifts at work. Sometimes they watch for children whose parents aren't able to be around as much. Family abusers have more access because they're in ready-made relationships with children. Similarly, teachers, coaches, religious authorities, camp counselors, and others have the power to provide or withhold things the child wants and needs.

### 2 TARGETING A CHILD

Any child can become a victim. Some factors that contribute to vulnerability include: gullibility, high stress, limited relationships, few social connections or, low self-esteem. If you don't personally identify these vulnerabilities in your family, DO NOT assume your child isn't at risk. Proximity to a child can be the single reason one child is targeted.

### 3 DEVELOPING TRUST

The abuser works to form a relationship with the child and sometimes the parents. This helps them gain cooperation and manipulate the child. They begin by making the child feel as if they're important and in a very special relationship with them. They use the developing relationship to create situations where they're alone together. This isolation reinforces a special connection. Babysitting, tutoring, coaching, and special trips all create this isolation.

### 4 INTRODUCING TOUCH OR NUDITY

Perpetrators start desensitizing a child to being touched by them. They may tickle, wrestle, or take a child swimming. They might hug while a child is on their lap. They may involve nudity in online communications. Seemingly "innocent" touch gets them used to physical contact and weakens a child's natural defenses. This stage is used as a test to see whether a child will resist or tell a trusted adult about the "innocent" touch. The abuser progressively sexualizes the relationship.

### 5 PROMOTING SECRECY

Abusers depend on silence and secrecy. Promoting secrecy often starts before the sexual abuse, with the abuser calling themselves a "secret friend," "trusted friend," or the child's "best secret keeper" as a way to bond the "friendship." It also helps distance children from parents or other caregivers. Once the abuser has escalated to inappropriate sexualized touching, secrecy is used to cruelly maintain the child's continued participation and ensure they don't disclose. Abusers prey on fear and confusion.



## WARNING SIGNS OF GROOMING

For schools, youth organizations,  
churches, camps, and other  
kid settings



Abusers can hold any job or volunteer role and often appear as dedicated, respected people in the community. People often believe abusers will stand out or are misfits. In reality, they charm and groom colleagues to maintain secrecy and “fly below the radar.” Popularity and likability are often confused with trustworthiness.

Behaviors can provide early warning signs of boundary and judgment problems. Some may be direct policy violations at an organization. Any that become a **recurring pattern of behavior** should be reported to a supervisor for further monitoring.

- Overly interested or focused on one child
- Frequently tries to gain time alone with a child
- Provides special gifts, favors, or privileges to a child
- Works harder to develop relationships with children than with adults
- Repeatedly holds a single child after school or group activities for extra help
- Offers or gives free babysitting or rides home
- Offers to take the child alone to special places
- Fixates or stares at a child to the point of making the child uncomfortable
- Frequently teases provocatively or flirts with children
- Touches, wrestles, or tickles
- Inappropriate personal conversations with children (knows about the youth’s personal life far beyond what’s necessary professionally)
- Texts, calls, or exchanges photos with children socially (not for educational or informational reasons)

Too often, once abuse is known, adults around the situation say they suspected something but didn’t say anything because they weren’t completely sure.

**PREVENTION REQUIRES REPORTING TO A SUPERVISOR AT THE INITIAL SIGNS OF GROOMING.**

# Normal Sexual DEVELOPMENT BY AGE

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## BIRTH-2 YEARS

- Learn about love and trust through caregivers
- May begin to learn differences between male and female bodies
- May self-touch genitals to sooth and calm themselves
- May have spontaneous reactions that appear sexual but are not (e.g. erection or lubrication)
- Learn and explore bodies through touch, including genitals

## 2-5 YEARS

- Able to learn correct anatomical terminology for genitals (e.g. vagina, penis)
- May like to be naked but can understand privacy
- Are curious about the opposite sex and how others look under their clothes
- May play house or doctor with similarly aged peers
- May stimulate/touch self and can understand rules about when this is okay

## 5-8 YEARS

- May have basic understanding and curiosity of puberty and human reproduction
- Self-touch may start to diminish
- May engage in consensual genital exploration with similarly aged peers
- May attempt to see other people undressing
- May become modest in front of the opposite sex

## 8-10 YEARS

- Bodies may start changing, puberty may begin
- May start asking questions about sex and sexuality, looking for more accurate information
- May discuss sex information with friends
- May start to be embarrassed, uncomfortable, and private with their bodies
- May be more curious about developing male and female bodies

## 10-13 YEARS

- Puberty will continue and children may have growing curiosity about sexuality
- Erections and masturbation occur in private
- May have a growing need for privacy
- Hug, kiss, and touch with known same-aged peers
- May start comparing themselves to others and wonder if they are normal

## 13-17 YEARS

- May start accessing information about sexuality
- May view videos, magazines, or movies or listen to music for sexual arousal
- May have interest in dating or start to fantasize about romantic or sexual situations
- May start to feel pressure to engage in sexual activities
- May start to engage in kissing, touching, oral sex, and intercourse

# How to Encourage

# HEALTHY SEXUAL DEVELOPMENT

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## BIRTH-2 YEARS

- Teach correct anatomical names for body parts, such as penis and vagina
- Explain the basic differences between male and female anatomy
- Help children understand how to interact respectfully with peers the same age
- Provide simple answers to questions about the body and bodily functions
- Use opportunities such as baths or dressing to talk about boundaries and genitals being private

## 2-5 YEARS

- Provide basic information about reproduction (e.g. babies grow in the uterus of a woman)
- Encourage a basic understanding of privacy and when things are appropriate and inappropriate. Explain that if a grown up or child touches in an inappropriate way, the child must tell an adult.
- Explain the difference between wanted and unwanted touch (e.g. a hug that's welcome and positive versus one that's unwelcome and uncomfortable)
- Teach about boundaries, their bodies belonging to them, and that they can say "n" to unwanted touch. Model this by not forcing children to hug or kiss someone they don't want to.
- Model privacy by going to the bathroom and showering in private.

## 5-8 YEARS

- Encourage understanding of genders. Children who identify as transgender may experience confusion and need more adult support.
- Explain the basics of human reproduction, including the role of vaginal sex.
- Talk about physical changes that will occur during puberty.
- Explain that there are different sexual orientations such as heterosexual, homosexual, and bisexual.
- Respect children's need for privacy, and respect their choices for unwanted touches. Model this by not forcing them to hug or kiss someone they don't want to.

## 8-10 YEARS

- Continue to provide information about changes to their bodies during puberty
- Talk about the social and emotional aspects of puberty (e.g. mood swings and comparing bodies with other peers). Help children know these new emotions and needs are normal.
- Help children understand difference between sexuality and body image in real life vs. what's shown on TV, magazines, etc.
- Support them in understanding their rights and responsibilities in friendships and relationships. Talk about and model healthy relationships.
- Identify appropriate sources for information about sex and sexuality.

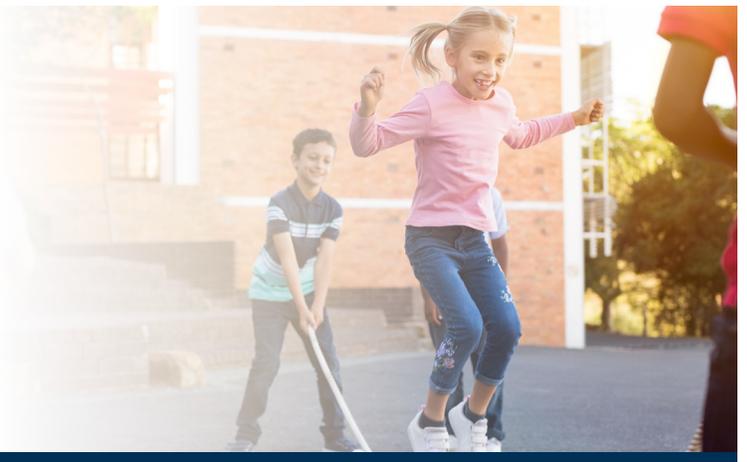
## 10-13 YEARS

- Provide accurate information about sex and sexuality.
- Identify appropriate sources for information on sex, sexuality, and sexual health
- Continue to talk about body boundaries and unwanted touch throughout teen years
- Talk about healthy relationships including the effect of peer pressure on relationships.

## 13-17 YEARS

- Continue open communication about sex and sexuality.
- Provide information on sexual health.
- Offer to answer questions or talk about concerns about sex or sexuality.
- Identify appropriate sources for information about sex, sexuality, and sexual health.
- Continue telling about healthy relationships, including consensual sex.

## How to Differentiate SEXUAL BEHAVIORS



Expressing sexuality through sexual behavior is natural, healthy, and human. Children may lack the language or understanding to ask for help, and much can be learned from their behaviors, including signs that adult intervention with support and protection is needed. Use this reference to better interpret a child's sexual behavior. When sexual behaviors seem concerning or harmful, consider why the child is showing the behavior and how to intervene with helpful support.

### HEALTHY

*Sexual behaviors that are part of routine, healthy development are:*

- Curious, playful, easily diverted, mutual, and consensual.
- Appropriate for the child's age.
- Part of play or activity with others the same age, size, and abilities.
- Used to understand and gain information, balanced with curiosities about other parts of life.

*These behaviors are great opportunities to talk, explain, and support.*

### CONCERNING

*Sexual behaviors that may be cause for concern are:*

- Consistent with knowledge and activities for the age and stage of development but concerning in persistence, intensity, or frequency.
- Between children unequal in age, size, power, or developmental ability.
- Risky to the health and safety of the child or others.

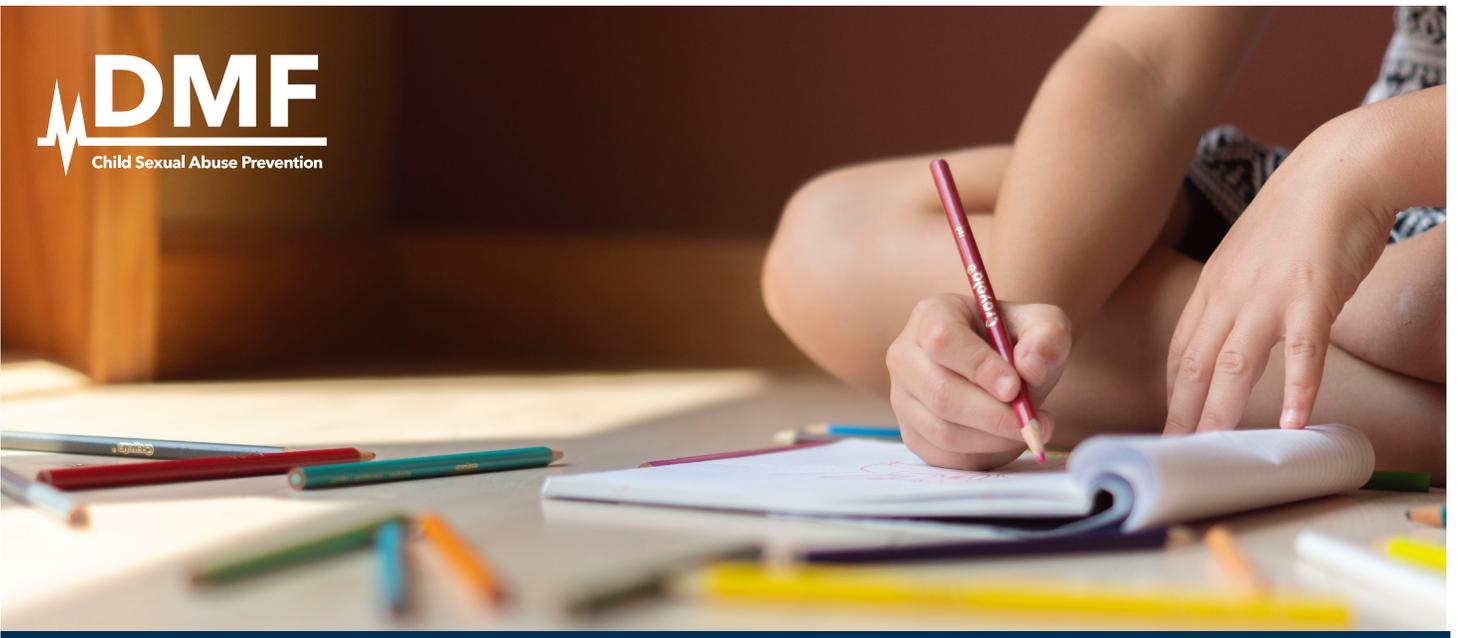
*These behaviors signal a need to watch, provide extra body safety, and privacy education.*

### HARMFUL

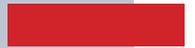
*Sexual behaviors that indicate harm or cause harm are:*

- Excessive, compulsive, coercive, forceful, degrading, or threatening.
- Secretive, manipulative, or involve bribery or trickery.
- Not appropriate for the age or stage of development.
- Between children with a significant difference in age, developmental ability, or power.

*These behaviors signal a need to step in with immediate protection and treatment.*



## SEXUAL BEHAVIOR IS A CONTINUUM



### Typical

### Problematic

Exploratory



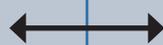
Planned

Agreed upon



Coerced

Near same age



Disparate ages

Periodic



Preoccupying



# 10 Steps TO PROTECT



Record your action steps, and check them off when complete.

## Help Children Build Resistance ✓

1. **Teach many ways for children to show love and affection**, and let them choose so they have practice controlling who enters their personal safety zone.

2. **Use proper anatomical terms for private parts** so that children have the words to tell about unsafe or uncomfortable touches.

3. **Establish specific rules about private part safety** so children begin to build boundaries.

4. **Teach that secrets about private parts are never allowed** so this kind of secrecy is resisted and encourages disclosure.

5. **Teach about physical privacy and respecting privacy** so children have protective boundaries and behaviors.

6. **Caution that adults don't need dressing, bathing, and bathroom help** so children override inclinations to obey authority in these inappropriate situations.

## Help Children Report



7. **Identify five trusted adults** so children readily know whom to tell when they are hurt, scared, or confused.

8. **Teach children to keep telling trusted adults when something feels wrong** so that one person who misses a cue isn't the last to hear a call for help.

## Inhibit Opportunity



9. **Always keep close supervision** to safeguard your child in situations alone one-on-one with an adult or older child. Use supervision in your child's relationships.

10. **Ask about supervision practices in youth programs** you're considering for your child so you know that protections are in place for your child and all others.

*Even when protected through these measures, it's possible you won't prevent what an abuser is working mightily to keep secret. And it's possible that your actions won't elicit a disclosure. Keep your eyes open. Follow up with direct questions when a concern persists. Showing that you care brings the best chance of hearing what's going on in your child's life. Just as seat belts are life-savers, we buckle up knowing they don't come with a 100% guarantee. These steps help you know you've done your best.*

# PRIVATE PARTS

## Are Those Body Parts Covered by Swimsuits

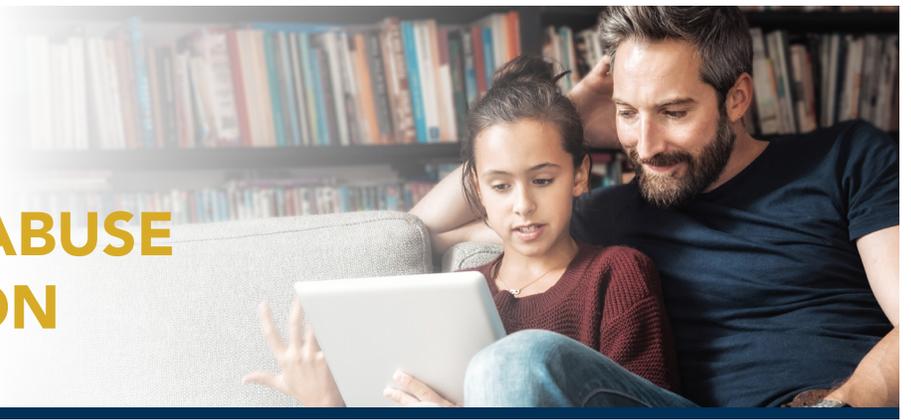
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# How to Prevent **ONLINE SEXUAL ABUSE AND EXPLOITATION**



Children can be traumatically harmed by sexual images they see and exploited sexually by sharing nude images or videos with someone they interact with online. This abuse and exploitation can bring fear and feelings of sadness, depression, guilt, anger, helplessness, or emptiness. It can leave a child unable to feel joy or trust and lower self-esteem. These are serious consequences to a serious crime that parents and other protectors need to be vigilant against.

## **PREVENT ONLINE SEXUAL ABUSE AND EXPLOITATION WHEN YOU:**

- Talk to children about protecting themselves and respecting others online.
- Monitor who and how your child is interacting with people on cell phones, social media sites, and gaming rooms.
- For all platforms, teach children that the way people present themselves online may not be at all who they are or what they're like in person. Some pretend to be children when really they are adults.
- Activate the safety settings in computer and tablet operating systems, search engines, and game consoles so you can use protections available to you (knowing it doesn't guarantee 100% safety).

Time, attention, and conversation are your best protection tools. Ask children to show you how they use devices. Ask them to let you play, too, or watch over their shoulder. Children may not tell you everything but ask anyway. Safety conversations go far to grow trust and communication.

## **TIPS ABOUT GAMING SAFETY**

1. Take an interest in the games your child plays and wants to buy. Ratings and content are found on the Entertainment Software Rating Board website [ESRB.org](https://www.esrb.org).
2. Tell your child to never give personal information while gaming and never meet anyone outside of the game. Discuss how much they let people know about themselves when gaming. Ask about what kinds of people they game with.
3. Check whether games have features to report inappropriate behavior or moderators.
4. Discuss with your child how to respond if someone bothers them while gaming. Ask whether they feel safe gaming online and why they answer the way they do.

## **TIPS FOR ONLINE SAFETY**

1. Establish ground rules about types of sites kids can visit and apps they can download.
2. Research whether devices will allow unknown people to communicate with your child. Research whether children can make unchecked purchases.
3. Teens can be flattered by interest from an older man or woman. Help them understand that the older person's motives may be exploitive and the reason why not to befriend them or meet offline.

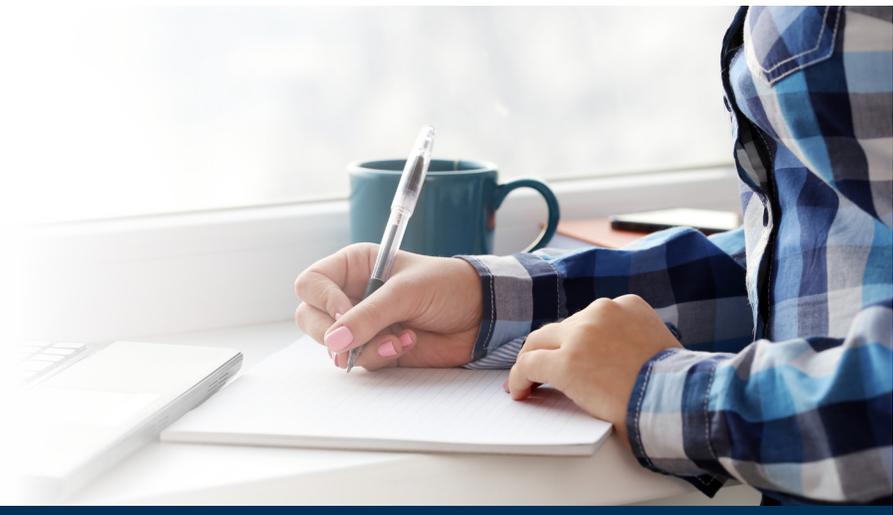
## SMARTPHONES

1. Know the risks. Smartphones can make your child susceptible to cyber grooming. An abuser can use the phone to have private conversations, with any frequency and at any hour through calls or texts. Abusers can load apps with credit to buy fast food, coffee drinks, and other treats as part of their coercion. Abusers can send and receive inappropriate photographs, as well as threatening messages to prevent disclosure. A GPS-enabled smartphone can reveal your child's location through online posts and uploaded photos.
2. Establish clear guidelines and expectations, yet be open so your child will come to you with problems. For example, tell them they need your approval before downloading apps so you understand their functions and content.
3. Set up password protection to keep everyone but you and your child from accessing personal information stored on the phone.
4. Establish a firm rule that phones are NEVER to be used to take pictures of private parts or naked bodies – theirs or someone else's. Help them understand the images can lead to blackmailing and harassment.
5. Activate safety settings and routinely install operating system updates. New versions often contain security fixes.
6. Understand location services and teach children about the benefits and dangers. GPS provides helpful maps, but you may want to disable location tags and other locations features.
7. Review account settings often.
8. Teach children to come to give immediately if someone shares sexual messages or images or asks them for sexually explicit pictures. Regularly discuss sexting and safety with teens.
9. Explain how quickly images can spread online. Once a photo is sent, it's out of your control.

## RESPONDING TO ONLINE SEXUAL ABUSE

- The most important concern is for the well-being of your child: let them know they aren't to blame and you'll love and support them.
- Report it! Any time a person exposes your child to pornography or receives explicit images sent by a child contact law enforcement by calling 911. Law enforcement will investigate your report and initiate a team response to caring resources.





# Sample SAFETY PLAN

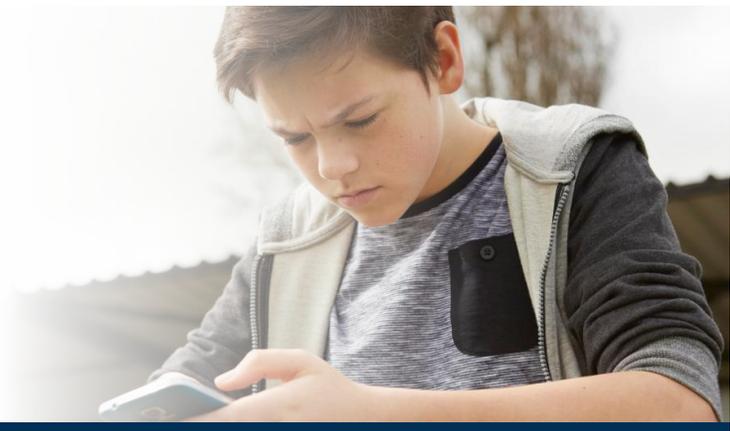
As a family, write your rules into a safety plan that you and your family can understand.

- |   |
|---|
| 1. <i>We show affection in many ways, doing only what feels comfortable.</i>  |
| 2. <i>We use the proper names for our private parts.</i>  |
| 3. <i>We tell a trusted adult if anyone touches or talks to us in a way that makes us feel hurt, sad, scared, uncomfortable, or confused.</i> |
| 4. <i>We practice privacy and respect other's privacy.</i>  |
| 5. <i>We don't keep secrets, especially about body parts.</i>   |
| 6. <i>Our private parts are the parts that are covered by a swimsuit and shouldn't be touched or shown to others.</i>                         |
| 7. <i>We can always talk about OK and not - OK touches.</i>   |
| 8. <i>We ask questions or tell others if we are confused or uncomfortable.</i>  |
| 9. <i>We don't look, touch, or play games with other's body parts, and no one is allowed to do those things to ours.</i>                      |
| 10. <i>Our bodies are our own. We have boundaries, and no means no.</i>   |









# MY SAFE ADULTS

*I can call or text my safe adults if I am sad, hurt, or scared. If one of them can't help, I call the next safe adult.*

**1** Name \_\_\_\_\_  
Phone # \_\_\_\_\_

**4** Name \_\_\_\_\_  
Phone # \_\_\_\_\_

**2** Name \_\_\_\_\_  
Phone # \_\_\_\_\_

**5** Name \_\_\_\_\_  
Phone # \_\_\_\_\_

**3** Name \_\_\_\_\_  
Phone # \_\_\_\_\_

**911: THE NUMBER FOR ALL EMERGENCIES**







## When Not Present

# SUPERVISE RELATIONSHIPS

You can't be present at all times and must have trust for some adults. At the same time, you can stay involved and curious; supervising relationships.

- Ask about what your child and the babysitter or other person did in the time you were away.
- Make unannounced visits, ask questions, and assert your interest in the relationship. Show up at t-ball practice or violin lessons, and know the people involved.
- Notice changes in the relationship or its patterns.
- Talk often about the relationship; ask questions about interactions.
- Look for changes. Has your child become isolated from you or their friends, opting for time with this person instead? Reel in your trust occasionally, and ask whether a relationship consumes too much time or has evolved into dependency. Is an adult closing them off or exerting increasing manipulation? Abusers seek stronger and stronger hold. Healthy people let others be close or sometimes pull away from time together. Speak directly about any concerns you have.
- Especially monitor situations when adults or older adolescents have power over a child's success - in sports, mentoring programs, jobs, clubs, or other extracurriculars.

You can also look at how the adult is behaving:

- Is the person consistently seeking one-on-one time with a child, focused on this friendship above adult friendships?
- Is the person over-eager to babysit or to gain time exclusively alone?
- Be wary of adults who touch children unnecessarily, send text messages for communication, give gifts not bestowed upon all children in a group, or other grooming behaviors.

### STAY INVOLVED AND CURIOUS

Notice ANY increasing isolation, dependency, and anxiety related to a relationship or in general.



## Questions to Ask a Youth Organization BEFORE YOUR CHILD PARTICIPATES



Next time you're considering a youth program, child care, afterschool activity, or summer camp, ask questions about safe child policies. Helpful questions include:

- 1. **How are your employees and volunteers screened?** Listen for verification that all adolescents and adults are at least interviewed. For some positions, written applications, interviews, reference checks, and even criminal background checks should be part of employment/volunteer-screening processes.
- 2. **Do you limit isolated one-to-one interactions between adults and my child and between older adolescents and my child?** Ideally, at least two adults will be present with youth at all times. There should be routine monitoring if one-on-one time is part of the mission of the organization. Look for "no closed door" policies.
- 3. **Tell me about your supervision policies. Are children supervised at all times?** Learn about the ratio of adults to children. Look for assurances that children are continuously supervised during activities, when changing clothes, on field trips, or on bathroom breaks.
- 4. **Do you have a code of conduct or ethics, and how is this code enforced?** Ideally, employees and volunteers will sign a document that they will adhere to policies and a code of conduct, demonstrating their understanding and agreement.
- 5. **Tell me how you report incidents involving my child within your organization? When and how would I be contacted?** See that it's clear how misconduct or incidents observed by fellow staff or volunteers would be reported and whether the organization immediately involves parents.
- 6. **Are your staff trained to know the signs of sexual abuse grooming behaviors?** Do they know how to prevent and report suspected or known abuse? When such training is present, you have added assurance that this organization is serious about protecting youth. Job or volunteer application processes, policies and proactive training are strong filters that deter abusers from becoming part of an organization or acting on urges.

DMF has a thorough training program for organizations to build strong prevention into their organizations. Please encourage organizations you know to take this training. Contact [Info@DakMed.org](mailto:Info@DakMed.org) to schedule one today.

**YOU PROTECT YOUR CHILD AND OTHERS WHEN YOU ENCOURAGE SAFE CHILD POLICIES.**

# Questions to Ask Before Letting Your Child **LEAVE YOUR SUPERVISION**



Not every adult can be counted on to use effective supervision. Your “screening” can ensure better supervision in many situations, including visits to the homes of others.

Invitations can arise in an instant, and call for quick decision making. To help you prepare, these questions help evaluate safety:

- What age range of children will be present?
- Will an adult supervisor be there at all times?
- How many adults will be present?
- Are there enough adult supervisors so kids aren’t separated or isolated from supervision?
- Will children be allowed to leave the premises alone?
- Who’s in charge?

Use these questions to decide whether it’s safe to turn over supervision to another. Then state your decision confidently. Do not be timid. Be firm and unapologetic.

You’ll gain respect from others who share your prevention mindset, modeling how they can similarly ensure protective supervision of their children.



## Hearing a Disclosure

# RESPOND WITH CARE

### **Give comfort and affirm they've done the right thing.**

- You were brave to tell me.
- I believe you.
- I'm going to help you.

### **Don't start fact-finding.**

Give children space to talk in their own words. Answers to questions below are helpful for safety and reporting but not essential. Don't press for more than a child is ready to disclose.

- Tell me what happened.
- When?
- Is (name) a grown up or a kid?
- When is the next time you'll see them?
- Where did it happen?
- Did you tell anybody else? If so, whom?



## How to Handle a **DISCLOSURE**

*For schools, youth organizations, churches, camps, and other child settings*

- Find a place that's private to talk with the child.
- Sit in a way that's natural and helps conversation. Don't sit behind a desk.
- Don't touch the child without permission. Children who've been abused may associate it with physical or emotional pain.
- Stay calm and listen in a caring way.
- Recognize and respect a variety of feelings. Each child is different. Don't assume the child is angry or hurt or scared. They may not be.
- Use the child's language. Avoid words he or she might not understand or find embarrassing.
- Encourage the child to tell what happened, but don't press for details. Don't try to investigate or determine whether it was abuse.
- Honor the child's method of disclosure. Saying abuse has happened to someone they know may be a disguised disclosure of their own experience or truly be another child. Kids often tell other kids before adults. Allow the child to tell about the situation as they feel comfortable.
- Respect and honor the child's relationships, even with an abuser.
- Avoid asking "why" questions. Children often feel they've done something wrong or have to defend themselves when asked why.
- Reassure the child. If they blame themselves, affirm he or she is not to blame.
- Support the child. Even if you've turned over responsibility to child protective services, the child will continue to look to you for support since you know about the situation. The child will see you as a safe person.
- Let the child know what you will do now. Uncertainty brings anxiety. But, do not make promises you may not be able to keep, like "I'll see that you never have to be near this person again."
- Reassure that you will not share this with other children but will tell another "helping person."

**Remember, when a child discloses, they're likely to feel:**

**Guilty**- Children often blame themselves for the abuse and often feel guilt for telling.

**Ashamed**- Children often are ashamed about the abuse itself.

**Confused**- Children often have conflicted feelings about the perpetrator.

**Scared**- Children often fear repercussions of telling. They may be scared of the perpetrator, frightened they will get in trouble or not be believed. They may even worry that their family will break up.



## **TO DISCUSS CONCERNS** or Report Child Sexual Abuse

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### **To discuss concerns or report child sexual abuse**

If you live in Cass County, North Dakota: **Social Services (701) 241-5675**

If you live in Clay County, Minnesota: **Social Services (218) 299-5200**

**After hours, call FirstLink: 211**

Other counties: **Contact your County Social Services**

**In an emergency, when a child's safety is an immediate concern: 911**

When a child has medical concerns due to possible sexual abuse,  
**go immediately to the nearest emergency room or medical facility.**

**IF YOU SEE OR SUSPECT SOMETHING, SEEK HELP.**





## THE POWER OF Open-Ended Questions

A way to explore the nature of children's relationships is through open-ended questions. These are questions that cannot be answered with a simple yes or no. They invite deeper conversations that disclose details.

"Tell me more about ..."

"Can you help me understand ..."

"What did you mean when ..."

"I've noticed that ..."

1. Tell me more about: Tell me more about Sarah's house. Tell me more about why you are feeling scared. Tell me more about what you are playing.
2. Can you help me understand what you meant when you said...
3. What did you mean when you said you felt scared? ... you said that you don't like your babysitter?
4. I've noticed that you've been spending a lot of time in your room ... don't want to go with your uncle anymore ... seem frightened around our neighbor

Use these questions to explore relationships or situations where you aren't present.





## Possible Physical and Emotional **SIGNS OF ABUSE**

### **Some possible physical signs of sexual abuse are:**

- Complaining of vaginal or anal pain with no known injury or infection.
- The presence of vaginal or anal bleeding with no known injury, infection or menstrual period.
- Discharge or sexually transmitted infection.
- Unexplained physical marks including bruises or abrasions in genital areas.

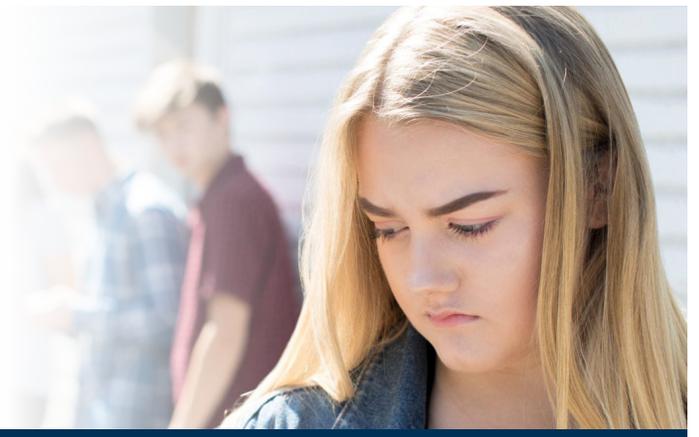
If you see any of these signs, bring your child to a medical provider for evaluation as soon as possible. Some of these may be symptoms of another medical issue not related to abuse. Most children who experience sexual abuse do not display physical signs.

### **Emotional and behavioral changes are unexplained or unexpected changes or reactions that seem out of character for your child:**

- You notice your child being more anxious, scared, angry, or irritable.
- They avoid certain people, places, or activities or isolate themselves from others.
- They react the opposite way and want to spend a lot of time with a particular person.
- They show an increased clinginess.
- They do not like to sleep alone at night.
- They use terms for their private parts or talk about sexual things beyond their developmental level.
- They engage in non-age-appropriate sexual play with themselves, others, or toys.
- There are changes in sleep patterns or sleep disturbances.
- They display regressive behaviors, such as loss of bladder or bowel control ("accidents"), thumb-sucking, or changes in verbal communication.

**Remember that none of these behaviors necessarily mean that a child has been sexually abused. However, it may signal the need to talk to a medical professional.**

# Mental Health RESOURCES FOR TRAUMA



With proven and effective treatment and support, children and adults can recover from traumatic experiences. Survivors can and do lead full and healthy lives.

## CHILD AND ADOLESCENT TRAUMA THERAPY

*Your clinician will determine the therapy right for your child and family situation. Some trauma-specific and evidence-based treatments:*

- Child parent psychotherapy (ages 0-6)
- Parent-child interaction therapy (ages 2-8)
- Trauma-focused cognitive behavioral therapy (ages 3-18)
- Alternatives for families cognitive behavioral therapy (ages 5-18)
- Problem sexual behaviors cognitive behavioral therapy (ages 6-12)
- Child and family traumatic stress intervention (ages 7-18)
- Seeking safety (ages 12-18)

## LOCAL AGENCIES

- PATH Trauma and Stress Clinic ..... (701) 551-6301
- Rape and Abuse Crisis Center .....(701) 293-7273
- Red River Children’s Advocacy Center .....(701) 234-4580
- Sanford Children’s Behavioral Health.....(701) 234-4141
- Solutions Behavioral Healthcare ..... (701) 412-2973
- The Village Family Service Center ..... (701) 451-4900



# Mental Health RESOURCES FOR TRAUMA



## ADULT TRAUMA THERAPY

Your clinician will determine the therapy right for your situation. Some trauma-specific and evidence-based treatments:

- Cognitive processing therapy
- Prolonged exposure therapy for PTSD for adults
- Eye movement desensitization reprocessing therapy
- Narrative exposure therapy
- Seeking safety

## LOCAL AGENCIES

- PATH Trauma and Stress Clinic ..... (701) 551-6301
- Rape and Abuse Crisis Center .....(701) 293-7273
- Solutions Behavioral Healthcare ..... (701) 412-2973
- The Village Family Service Center ..... (701) 451-4900

Info@DakMed.org  
(701) 271-0263  
Dakota Medical Foundation  
4141 28th Ave. S, Fargo, ND 58104

**LearnTheSigns.org**



The Treatment Collaborative for Traumatized Youth is a learning collaborative for mental health professionals. This network of clinicians uses and advances evidence-based mental health treatments for those who've experienced traumatic life events. More information: TCTY-ND.ORG

# WHAT CAN YOU DO?



## In your home or workplace:

- Take action to make children’s lives safer with the 10 Steps to Protect.
- Listen intently for test messages – clues a child gives when they need help.
- Call child protection experts for caring advice and answers.
- Follow DMF on Facebook to gain new ideas and information.
- Speak about the “unspeakable” with others, awakening them to the truths that you now know.
- Expect supervision and safe protection of children by all others.



## In your community:

- Give a testimonial or deliver a training at your church, business, or a youth organization.
- Help spread awareness about this health crisis and what can be done about it with at least three other people.
- Speak up when you see boundary violations in the community.



## In your youth organization or business:

- Help adopt stronger prevention policies and consistent monitoring for safety.
- Shape a culture that’s aware and prepared to report boundary violations.
- Get other agencies on board.
- Train each and every employee, as well as all parents of children you serve.