

# Childhood Sexual Behaviours

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sexual  
abuse  
education 

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*The children depicted in this booklet are models.*

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## What is considered normal?

**W**e live in an age when childhood sexual abuse and victimisation is increasingly on our minds. It is important for parents and caregivers to understand what is normal sexual development and behaviour in children and teenagers. This is the key to understanding which behaviours might signal that a child is a victim of sexual abuse, or is acting in a sexually inappropriate manner towards others.

Sexual development and sexual play are natural and healthy aspects of growing up, from toddlers through childhood and into adolescence. For infants and toddlers, this usually involves exploring body sensations, cuddling and touch. Even in the earliest days, male babies and toddlers touch and rub their own genitals, and as infants boys experience erections.

By early school age (5-7 years old), children are interested in body parts and functions. Some sexual play may begin, and concepts of love and affection begin to develop, evolving into behaviours that continue developing into later childhood (8-9 years old).

Pre-adolescent children (ages 10-12) are more focused on social relationships and expectations, and begin to experience more defined sexual feelings. Children touch, fondle, and rub their own genitals throughout childhood, but they begin to more clearly masturbate during this time, developing clearer patterns into and beyond puberty (ages 12/13 and up).

By puberty and adolescence, body parts and sexual organs are developing, and puberty brings the onset of menstruation in girls and more routine masturbation for both boys and girls, but especially boys. As children move further into adolescence, romance, intimacy, and sexual issues are driven by and blend with physical feelings, emotions, and social expectations. Dating and more intense sexual relationships begin and deepen, moving from thinking about and discussing romances, to dating, kissing, sexual petting, and, in many cases, sexual relationships and intercourse.

It is important to distinguish between age-appropriate and age-inappropriate sexual behaviours. Many children engage in sexual behaviours and show sexual interests throughout their childhood, even though they have not yet reached puberty. However, normal sexual behaviours are usually not openly sexual, are more exploratory and playful in nature, do not show a preoccupation with sexual interactions, and are not hostile, aggressive, or hurtful to self or others.

*Sexual development and sexual play are natural and healthy in children.*

*It is important to distinguish between age appropriate and age inappropriate sexual behaviours.*

## Inappropriate sexual experience

As with other areas of growth, children's sexual behaviour develops over time, and many behaviours are normal for children at certain ages. On the other hand, there are sexual behaviours that we should be concerned about and that should not be ignored or seen as child's play.

These sexual behaviours are more serious and may be harmful to the child and others. When a child engages in sexual behaviours, it can be difficult to decide when the behaviour is natural and healthy, and when it may reflect a problem or disturbance.

Childhood and adolescent behaviours are of concern when they are extensive or suggest preoccupation, or involve others in ways that are not consensual. Sexual behaviours in children present a special concern when they appear as prominent features in a child's life, or when their sexual play or behaviours are not welcomed by other children involved in the play. This is the point when sexual behaviour can become harmful and aggressive.

For children aged below 11, all forms of sexual activity with adolescents and adults is inappropriate, especially for children aged 10 and younger.

There are sexual behaviours that should not be ignored

This includes:

- participating in any form of sexual activity with adolescents or adults;
- viewing pornography or other sexually explicit material;
- witnessing sexual behaviours between adults, adolescents, or other children;
- excessive sexual play with a same-age or older child who has more sophisticated sexual knowledge;
- any situation in which a child is inappropriately exposed to people engaged in sexual acts.

## Sexually reactive children

“Sexually reactive” children are usually pre-pubescent boys and girls who have been exposed to inappropriate sexual activities. A sexually reactive child may engage in a variety of age-inappropriate sexual behaviours. This may be as a result of his or her own exposure to sexual experiences. The child may begin to act out, or engage in, sexual behaviours or relationships that include excessive sexual play. They may make inappropriate sexual comments or gestures, or engage in mutual sexual activity with other children, or sexual touching and abuse of other children.

Sexually reactive children may react to their experience of sexual activities by:

- demonstrating precocious sexualised gestures, language, and knowledge;
- engaging in extensive mutual sexual play with same age or younger children;
- engaging in excessive masturbation or demonstrating a preoccupation with sexual activities and ideas;
- engaging in sexual behaviours in public, such as exhibitionism, rubbing, or masturbation;
- interest in or attempting sexual contact with older children, adolescents, adults, or animals;
- engaging in or attempting significant sexual encounters with same age or younger children, including masturbation, oral sex, digital penetration, and intercourse;
- sexually touching others, and especially younger children.

*It can be difficult to decide when a behaviour is natural and healthy.*



## Signs of concerning sexual behaviour

*Parents should be aware of the possibility of sexually concerning behaviours.*

Toni Cavanagh Johnson (1999), a psychologist specialising in childhood sexual development, identifies signs for concern in children up to the age of about 12. She states that children's sexual behaviours and interests should be similar to those of other same-age children.

Children may be showing signs of concerning sexual behaviour when they:

- are preoccupied with sexual play rather than engaging in a variety of other forms of play;
- engage in sexual play with much younger or much older children;
- have knowledge of sex inappropriate for their age;
- are unwilling to stop sexual play when told to by an adult;
- engage in sexual play that leads to complaints from or has a negative effect on other children;
- engage in sexual play causing physical or emotional discomfort to themselves or others;
- sexualise relationships, or see others as objects for sexual interactions;
- are aged 4 and older but fail to understand the rights and boundaries of other children in sexual play;
- experience fear, shame, or guilt in their sexual play;
- engage in adult-type sexual activities with other children;
- direct sexual behaviours toward older adolescents or adults;
- engage in sexual activities with animals;
- use sex to hurt others;
- use bribery, threats, or force to engage other children in sexual play.

There are many excellent books and other media that explain and discuss healthy sexual development in children and adolescents. Parents who are unsure about childhood behaviours should take the time to learn about childhood sexual development. This will help them understand their children and become aware of the possibility of sexual disturbance at an early stage.





## Problems in children aged 2–12

Understanding children's typical sexual development, knowledge, and behaviour is necessary to accurately identify sexual behaviour problems in children.

Research on sexual behaviour in children aged 2 to 12 documents that:

- a wide range of sexual behaviours for this age range are normal and non-problematic;
- increasing numbers of school age children are being identified with inappropriate or aggressive sexual behaviour. It is not clear if this increase reflects an increase in the actual number of cases or an increase in identification and reporting;
- several treatment interventions have been found to be effective in reducing problematic sexual behaviour in children, such as cognitive behavioural group treatment;
- sexual development and behaviour are influenced by social, familial, and cultural factors, as well as genetics and biology.

Typical sexual knowledge of children aged 2–6 years old:

- understand that boys and girls have different genitals;
- may know labels for sexual body parts, but use slang words such as weenie for penis;
- have limited understanding about pregnancy and childbirth.

Typical sexual knowledge of children aged 7 to 12 years old:

- may know the correct names for the genitals but use slang terms;
- have increased knowledge about masturbation, intercourse, and pregnancy; and
- may begin to understand the physical aspects of puberty by around age 10.



# Framework for categorising sexual behaviours

red

- Behaviour which is excessive, secretive, compulsive, coercive, degrading or threatening
- Significant age, developmental and/or power difference between the children involved
- Concerning because of the nature of the activities and the manner in which they occur

**Indicate a need for immediate intervention and action**

## Birth to 5 years

- *Simulation of explicit foreplay or sexual behaviour in play*
- *Persistent masturbation*
- *Persistent touching of the genitals of other children*
- *Persistent attempts to touch the genitals of adults*
- *Sexual behaviour between young children involving penetration with objects*
- *Forcing other children to engage in sexual play*

## 5 to 9 years

- *Persistent masturbation, particularly in front of others*
- *Sexual behaviour engaging significantly younger or less able children*
- *Sneaking into the rooms of less able younger children to touch or engage in sexual play*
- *Simulation of sexual acts that are sophisticated for their age, e.g. role play*
- *Persistent sexual themes in talk, art etc*

orange

- Outside 'normal' sexual behaviour in terms of frequency or inequality in age or developmental abilities
- Outside 'normal' in either type or persistence of activities
- Behaviour which is 'unusual' or different for a particular child or children

**Signal the need to take notice and gather information to assess the appropriate action**

## Birth to 5 years

- *Preoccupation with adult sexual type behaviour*
- *Pulling other children's pants down/skirts up against their will*
- *Explicit sexual conversation using sophisticated or adult language*
- *Preoccupation with touching another's genitals (often in preference to other activities)*
- *Chronic peeping*
- *Following others into toilets to look at them or touch them*

## 5 to 9 years

- *Questions about sexual activity that persist or are repeated frequently despite an answer being given*
- *Writing sexually threatening notes*
- *Engaging in mutual masturbation*
- *Use of adult language to discuss sex, e.g. "Do you think I look sexy?" "Look at my dolls – they're so sexy"*

green

- 'Normal' sexual development which is spontaneous, curious, light hearted, mutual and easily distracted
- Play or activities among equals in terms of age, size and ability levels
- Behaviour reflects information gathering, balanced with curiosity about other parts of life

**Provide opportunities to give the child or adolescent positive feedback and information**

## Birth to 5 years

- *Thumb sucking, body stroking and holding of genitals*
- *Wanting to touch other children's genitals*
- *Asking about or wanting to touch the breasts, bottoms or genitals of familiar adults, e.g. when in the bath*
- *Games – 'doctor/nurse', 'show me yours and I'll show you mine'*
- *Enjoyment of being nude*
- *Interest in body parts/functions*

## 5 to 9 years

- *Masturbation to self soothe*
- *Increased curiosity in adult sex, e.g. questions about babies, gender differences*
- *Increased curiosity about other children's genitals, e.g. playing games to see or touch genitals*
- *Telling stories or asking questions using swear words, 'toilet' words or private body parts*
- *Increased sense of privacy about bodies*



# rs (birth to eighteen)

## 9 to 12 years

- Persistent masturbation, particularly in front of others
- Sexual activity, e.g. oral sex or intercourse
- Arranging a face to face meeting with an online acquaintance
- Sending nude or sexually provocative images of self or others electronically
- Coercion of others, including same age, younger or less able children, into sexual activity
- Presence of STI

## 13 to 18 years

- Compulsive masturbation (especially chronic or public)
- Degradation/humiliation of self or others with sexual themes, e.g. threats, phone, email, touch
- Attempt/force others to expose genitals
- Preoccupation with sexually aggressive pornography
- Sexually explicit talk with younger children
- Sexual harassment, forced sexual contact
- Sexual contact with others of significant age/developmental difference
- Sending nude or sexually provocative images of self or others electronically
- Sexual contact with animals
- Genital injury to others/self

## 9 to 12 years

- Uncharacteristic behaviour, e.g. sudden provocative changes in dress, mixing with new or older friends
- Consistent bullying involving sexual aggression
- Pseudo maturity, including inappropriate knowledge and discussion of sexuality
- Giving out identifying details to online acquaintances
- Preoccupation with chatting online
- Persistent expression of fear of pregnancy/STIs

## 13 to 18 years

- Sexual preoccupation/anxiety which interferes with daily function
- Preoccupation with pornography
- Giving out identifying details to online acquaintances
- Preoccupation with chatting online
- Arranging a face to face meeting with an online acquaintance
- Sexually aggressive themes/obscenities
- Sexual graffiti (chronic/impacting on others)
- Violation of others' personal spaces
- Single occurrence of peeping, exposing, non-consenting sexual touch with known peers; pulling skirts up/pants down; mooning and obscene gestures
- Oral sex and/or intercourse (ability to consent to be considered)

## 9 to 12 years

- Use of sexual language
- Having girl/boyfriends
- Exhibitionism, e.g. flashing or mooning amongst same age peers
- Increased need for privacy
- Consensual kissing with known peers
- Use of internet to chat online

## 13 to 18 years

- Sexually explicit conversations with peers
- Obscenities and jokes within the cultural norm
- Flirting
- Interest in erotica
- Use of internet to chat online
- Solitary masturbation
- Interest and/or participation in a one-on-one relationship (with or without sexual activity)
- Sexual activity including hugging, kissing, holding hands, foreplay, mutual masturbation
- Consenting oral sex and/or intercourse with a partner of similar age and developmental ability (age and developmental ability to give consent must be considered)

## Common sexual behaviours

### Sexual behaviours commonly observed in girls and boys

| Ages 2–6  | Ages 7–12  |
|---|--|
| Do not have a strong sense of modesty, enjoys own nudity                          | Sexual play with children they know, such as playing 'doctor'    |
| Use 'toilet' words with peers   | Interested in sexual content in media (TV, movies, radio)        |
| May explore body differences between girls and boys                               | Touch own genitals at home, in private                           |
| Curious about private parts   | Look at nude pictures  |
| Touch their private parts, even in public   | Interested in the opposite sex or has close same-sex friendships |
| Exhibit sex play with peers and siblings; plays 'doctor' or 'mothers and fathers' | Shy about undressing   |
| Experience pleasure from touching their genitals (more likely in boys)            | Shy around unfamiliar men  |



## Infrequent sexual behaviours

Children with problematic sexual behaviour are those who demonstrate developmentally inappropriate or aggressive sexual behaviour. This includes frequent public masturbation, and intrusive or aggressive sexual behaviour towards others. It may include coercion or force. Although the term “sexual” is used, the child’s intentions and motivations for these behaviours may be unrelated to sexual gratification.

Some children who have been sexually abused have inappropriate sexual behaviours. However, it is important to note that many children who have been sexually abused do not show inappropriate or aggressive sexual behaviours.

Professionals and parents may have concerns about whether the behaviour is problematic and when an incident should be reported to Oranga Tamariki. Here are some reminders:

- do not overreact as most sexual behaviours in children are within the typical or expected range;

### Sexual behaviours infrequently reported in children ages 2–12

|  |  |
|--|--|
| Puts mouth on private parts                              | Ask to engage in sex acts  |
| Puts objects in rectum or vagina                         | Imitate intercourse  |
| Masturbates with objects                                 | Undress other people   |
| Touch others’ private parts even after being told not to | Ask to watch or is found watching sexually explicit television or material |
| Touch adults’ private parts                              | Make sexual sounds   |

- inappropriate or problematic sexual behavior in children is not a clear indicator that a child has been sexually abused, but it does raise the question;
- most children will stop the behaviour if they are told the rules, mildly restricted, well supervised, and praised for appropriate behaviour;
- if the sexual behaviour is problematic, consultation with Oranga Tamariki is recommended (0508 EDASSIST - 0508 332 774);
- it is important to remember that children with problematic sexual behaviour and who get appropriate help are likely to be able to change the problematic behaviour.

## Sexual play

Professionals in the field have identified a continuum of sexual behaviours that range from non-problematic sexual play to problematic sexual behaviour. Some of these are described below.

### Sexual play

- is exploratory and spontaneous;
- occurs intermittently and by mutual agreement;
- occurs with children of similar age, size, or developmental level, such as siblings, cousins, or peers;
- is not associated with high levels of fear, anger, or anxiety;
- decreases when told to stop by caregivers; and
- can be controlled by increased supervision.



## Help

Advice is available from Sexual Abuse Education  
[help@sexualabuse.org.nz](mailto:help@sexualabuse.org.nz)

## Problematic sexual behaviours

Finally, here are examples of some problematic sexual behaviours to illustrate the range of issues that may be seen. A behaviour is considered to be problematic if it:

- is a frequent, repeated behaviour, such as compulsive masturbation

*Example:* A six-year-old repeatedly masturbates at school, in other public places or at home.

- occurs between children who do not know each other well

*Example:* An eight-year-old girl shows her private parts to a new child during an afterschool programme.

- occurs with high frequency and interferes with normal childhood activities

*Example:* A seven-year-old girl has been removed from the soccer team because she continues to touch other children's private parts after being asked to stop.

- is between children of different ages, size, and developmental levels

*Example:* An eleven-year-old boy is "playing doctor" with a three-year-old girl.

- is aggressive, forced, or coerced

*Example:* A ten-year-old threatens his six-year-old cousin and makes him touch his penis.

- does not decrease after the child is told to stop a behaviour

*Example:* A nine-year-old child continues to engage other children in mutual touching after being told that the behaviour is not allowed and has consequences, such as being grounded.

- causes harm to the child or others.

*Example:* A child causes physical injury, such as genital bruising, redness, or abrasions on themselves or another child.

**Children with sexual behaviour problems are those who demonstrate developmentally inappropriate or aggressive sexual behaviour.**

## Talking with your child about sex

*You are a role model – As a parent/caregiver, you are your child's main source of accurate (or incorrect) information. How you act in regards to sexuality will be noticed by your child and will likely be copied.*

As a parent or caregiver, you can provide your children with vital information on sexuality and relationships that helps them to make more informed, mature decisions in the future. Here are some tips that can make it easier when speaking with older children.

**Plan Ahead** – Talk with with anyone else who is helping to raise your child about the kinds of messages you want to give your children, and clarify any issues before involving your child in the discussion.

**Use Opportunities** – When the opportunity arises to provide your children with information, use it! For example, if your child asks why a friend's mother is pregnant, use that opportunity to teach your child about pregnancy.

**Listen** – Answer your child's questions when they ask them; try not to put them off until a later time. If you don't have time, say something like, "That is a good question. Let's talk about that when we have more time," and make sure you do. Also, listen carefully to what is being asked, and don't forget to read between the lines!

**Pick a Good Time** – You want to be able to talk comfortably with your child, so choosing a good time and location for this is important. Involve your child in deciding when the conversation can occur, and make it a priority.

**Keep Boundaries** – Your child will benefit in all areas if you keep your role as parent clear, and not try to be their 'best friend.' You don't need to answer overly personal questions. Gently explain that the information they are asking about is private, and you'd prefer not to answer that question.

**Give Accurate Information** – If you are unsure of an answer to a question, don't make it up; do some research! The reputable internet sites and the library can be very valuable resources. Simply state, "That's a great question, but I'm not sure of the answer. Let's find it out."



## Give accurate information

**Be Respectful of Feelings** - Children can feel awkward and embarrassed talking to parents about topics such as sexuality. Remember that no question is stupid. By being supportive of your child, you are fostering a healthier, more open relationship.

**Keep It Casual** - By being relaxed and casual in your discussion, you will encourage your child to feel the same way. If used in the right context, a sense of humour can go a long way!

**Use Materials** - Getting your child a recommended book about puberty or sexuality can also be helpful. Even if your child is too uncomfortable to talk to you, they will likely look through information you give them. This will provide them with accurate information that they can look over in privacy. Taking some time to read through it before passing it on will ensure you have the same information, and can help open conversation, i.e. "What did you think about...?"

**Talk About More Than Just Sex** - Talk with your children about healthy relationships, feelings, peer pressure, body image and responsibility in relationships. This will help your child to identify with the emotional aspects of sexuality and relationships, and to make informed decisions.

**Be Ready to Have Your Jaw Drop** - It is possible that your child will ask or say something that takes you by surprise. For example, children and teens often receive misinformation from their peers and may ask you to clarify. While you may react with surprise, try to compose yourself and respond calmly.

**Keep It Positive** - By demonstrating an open, positive view of human sexuality, you are teaching your children to do the same.

**Find Out What They Already Know** - Your child likely already has some information regarding healthy sexuality. Find out what they know and then build on that existing knowledge base.

*It isn't easy to talk with your child about sex, perhaps because our parents didn't do so; however, it is very important to make our children feel more comfortable than we did.*

# Worried about Sexual Abuse

Contact us

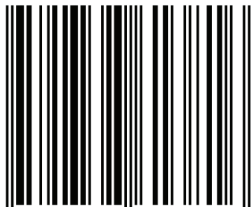
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