

Signs of Child Abuse

- 1 Unexplained injuries. Visible signs of physical abuse may include unexplained burns or bruises in the shape of objects. You may also hear unconvincing explanations of a child's injuries.
- 2 Changes in behavior. Abuse can lead to many changes in a child's behavior. Abused children often appear scared, anxious, depressed, withdrawn or more aggressive.
- 3 Returning to earlier behaviors. Abused children may display behaviors shown at earlier ages, such as thumb-sucking, bed-wetting, fear of the dark or strangers. For some children, even loss of acquired language or memory problems may be an issue.
- 4 Fear of going home. Abused children may express apprehension or anxiety about leaving school or about going places with the person who is abusing them.
- 5 Changes in eating. The stress, fear and anxiety caused by abuse can lead to changes in a child's eating behaviors, which may result in weight gain or weight loss.
- 6 Changes in sleeping. Abused children may have frequent nightmares or have difficulty falling asleep, and as a result may appear tired or fatigued.
- 7 Changes in school performance and attendance. Abused children may have difficulty concentrating in school or have excessive absences, sometimes due to adults trying to hide the children's injuries from authorities.
- 8 Lack of hygiene/personal care. Abused and neglected children may appear uncared for. They may present as consistently dirty and have severe body odor, or they may lack sufficient clothing for the weather.
- 9 Risk taking behaviors. Young people who are being abused may engage in high-risk activities such as using drugs or alcohol or carrying a weapon.
- 10 Inappropriate sexual behaviors. Children who have been sexually abused may exhibit overly sexualized behavior or use explicit sexual language.

Behavioral and Physical Signs of Possible Sexual Abuse

1. Symptoms of anxiety

These include unexplained sleep disturbances (sweats, terrors, nightmares); showing a new or unusual fear of certain people, places or locations; having unexplained periods of panic or alarm.

2. Abnormal sexual behaviors or symptoms

These behaviors and symptoms include excessive masturbation; leaving 'clues' that appear to intentionally invite discussion of sexual issues; complaining of pain while using the toilet, or exhibiting symptoms of a sexually transmitted disease such as an offensive odor; resistance to removal of clothing at appropriate times (bath, bed, toilet, diaper change); any symptom indicating evidence of physical traumas to the genital or anal area; engaging in persistent sexual play with friends, toys or pets; initiating sophisticated sexual behaviors, language, or knowledge; asking an unusual amount of questions about human sexuality.

3. Changes in personality or mood:

Changes include unusually aggressive behavior toward family members, friends, toys, and pets; indicating a sudden reluctance to be alone with a certain person; withdrawing from previously enjoyable activities, like school including changes in academic performance.

4. General behavioral changes

These can include beginning to wet the bed, experiencing a loss of appetite or other changes in eating habits, including trouble swallowing; developing frequent unexplained health problems; regression to behaviors too young for the stage of development previously achieved; engaging in self-mutilations, such as sticking themselves with pins or cutting themselves.

5. Changes in beliefs or discussions

These changes can include refusal to talk about a secret shared with an adult or an older child; discussions about a new, older friend; suddenly thinks of self or body as dirty, repulsive, or bad.

Physical signs of sexual abuse are rare. If you see the signs, bring your child to a doctor or call the police.

Myths about Child Sexual Abuse

Social acceptance of myths silences victims and encourages public denial about the true nature of this silent epidemic. Accurate information is key when confronting and preventing child abuse.

1. Myth: He looks normal and acts normal, so he can't be a child molester.

A common and dangerous public assumption is that a person who looks normal and acts normal simply cannot be a child molester. Sex offenders are knowledgeable about the importance of their public image, and can hide their private behaviors from their friends, neighbors, colleagues, and even their own family members.

Sex offenders use a number of strategies which allow them to gain access to children while hiding their true actions. Many perpetrators seek out volunteer or employment positions that place adults in close proximity to children. Some child molesters appear to be charming, socially responsible, caring, compassionate, morally sound, and sincere. Parents and other responsible adults trust these individuals. This leads to continued access to child victims.

2. Myth: Only Men Sexually Abuse Children.

While male perpetrators tend to be the majority of reported cases of abuse, women are also capable of child sexual assault. Reports of female perpetrators are on the rise, and female offenders have been reported in cases of abuse involving both male and female children.

3. Myth: Child molesters target any and all children nearby.

Just because a child is in the proximity of a sex offender, this does not mean that the child will automatically become a target or a victim. This may seem obvious, but some people believe that if a perpetrator didn't abuse a certain child to whom he had nearby, then the children who do make an outcry of abuse must be lying. Sex offenders carefully select and groom their targeted victims, employing an outline or plan to get a particular child alone. Not every child fits the mold of what a pedophile is looking for. There is a process of obtaining a child's friendship or trust, and in some cases, the parent's friendship or trust, as well. Once trust has been obtained, the child is more vulnerable, both emotionally and physically.

4. Myth: Abused children always tell! (My kids know they're supposed to tell!)

Children often fail to disclose their abuse. This is frequently used as purported evidence that a victim's story isn't plausible. Children who have been victims of sexual assault often have extreme difficulty in disclosing their victimization. In Texas, one in four girls and one in six boys will be a victim of sexual abuse before his or her 18th birthday, but it is estimated that only one

in ten will make an outcry of abuse. It is very common that if a child does make a disclosure, it will not be immediate. Children take time to process, understand what has occurred and realize that they should tell.

A number of factors affect a child's ability to tell his or her story. The age of the child can be a factor, along with a family relationship to the perpetrator, or continuous sexual abuse over a long period of time. Sex offenders will emotionally victimize a child to prevent the truth from being uncovered. A perpetrator can convince a child that the child is to blame him or herself for the bad act. A perpetrator may threaten physical harm to a family member, friend, parent, household pet, or the victim directly. A perpetrator can make a child feel that a disclosure would 'ruin' the family. Male children may be reluctant to make an outcry because of the social stigma attached to abuse by another male. Children experience fear, embarrassment, guilt, and shame. These feelings are enough to prevent a child from making an allegation of sexual abuse.

5. Myth: The Victim is Always a Girl.

Just as women can be sex offenders, boys may be victims of abuse. Unfortunately, child sexual abuse with male victims is underreported due to social and cultural attitudes: boys are taught to fight back and not let others see vulnerability. Boys are aware at an early age of the social stigma attached to sexual assault by another male, and fear appearing weak to others. All of these attitudes make male child victims less likely to tell of their abuse.

6. Myth: Child victims of sexual abuse will have physical signs of the abuse.

Frequently, an absence of physical evidence is often used as support that a perpetrator must be innocent of an alleged sexual assault. The truth is that abnormal genital findings are rare, even in cases where abuse has been factually proven by other forms of evidence. Many acts leave no physical trace. Injuries resulting from sexual abuse tend to heal very quickly, and many times, exams of child victims do not take place on the same day as the alleged act of abuse.

7. Myth: Stranger Danger

Eighty-five percent of all reported cases of child molestation involve a child and a known perpetrator. It is not the stranger in the park carrying out most cases of sexual abuse – it is the people you have in your home. The people most likely to abuse a child are the ones with the most opportunity, most access, and most trust. Abusers can be parents, step-parents, uncles, aunts, step-siblings, babysitters, tutors, and family friends.

8. Myth: Sexual victimization as a child will inevitably result in the child growing up to become a sex offender.

Early childhood sexual victimization does not automatically lead to sexually aggressive behaviors. This is a particularly important fact to understand because a misunderstanding can create a terrible stigma for a child who has been sexually abused. While past sexual victimization can *increase the likelihood* of sexually aggressive behavior, most children who were sexually victimized never perpetrate against others. Multiple factors contribute to the

development of sexually offensive behaviors. These include not only a history of sexual victimization, but also exposure to domestic violence or other violent behaviors. Research by Jane Gilgun, Judith Becker and John Hunter has indicated that if a child discloses an incident of abuse early and is believed and supported by other close people in their lives, they have a much higher likelihood to not become perpetrators as adults.

9. Myth: Child Sexual Abuse is a cultural or socioeconomic problem.

It is frequently believed that abuse is a problem plaguing only certain families or people with a certain level of family income and education. Sometimes people believe that incest only happens in lower class and/or rural families. Sexual abuse crosses all socio-economic, neighborhood, race and class barriers. It happens in large and small families; in cities and in rural areas; in wealthy and lower income neighborhoods; and in homes, schools, churches, and businesses.

See the Signs – Make the Call

Report Child Abuse: 1-800-292-9582