

### 3. RESPOND

#### What you can do to address the child's needs

All behaviour has a function. When adults understand why the behaviour may be occurring, they can respond by helping to meet the needs of the child or young person in effective ways.

Behaviour usually reflects a range of needs. Many strategies may be required to respond to children with concerning or harmful behaviours. It is also important to address the needs of the people who have an impact on the lives of children or young people e.g. family, carers, teachers and support workers.

Strategies for meeting the need could include:

- give accurate facts and information about sexuality
- teach social skills
- support healthy friendships and relationships
- teach about privacy and make home and other environments private and safe
- make clear rules and reinforce them with praise or consequences
- have consistency between homes, family, school, community
- supervise during times of risk
- monitor behaviour and review support strategies
- restrict access to previous victims or vulnerable others and explain why
- limit time spent with people who bully or who also show concerning sexual behaviours
- remove from situations where risk of harm, exploitation, abuse or neglect is suspected
- check for infections or injuries and get medical attention if needed
- provide information and support to family, carers and staff
- get family counselling or therapy
- referral to other services

**Sexuality and relationships education** encourages open and clear communication to provide a foundation for the development of healthy sexual behaviours and attitudes.

Topics for education may include:

- body parts
- being private
- personal safety
- puberty
- managing periods
- types of touch
- relationships
- safe sex
- reproductive health
- contraception
- sexual abuse issues
- sexual health checks
- sexual functioning
- self esteem and feelings
- decision making

#### Taking action

Most sexual behaviours are normal and healthy and will be in the green category. Green light behaviours present opportunities to communicate with children and young people about healthy sexuality.

Orange or red light behaviours are less common. They indicate the need to pay attention, monitor, supervise, provide sexuality and personal safety education and may also require therapy, protection from harm or a legal response. All green, orange and red light behaviours require some form of action and support.

#### How serious is the behaviour?

When sexual behaviour raises concern or involves harm to others, the behaviour is serious.

If the answer to any of the following is yes, adults have a duty of care to take action.

The behaviour:

- is against the law
- is against organisational policy
- is of concern to others
- provides a potential risk to the child
- provides a potential risk to others
- interferes with the child's relationships
- is life threatening

#### Sexual behaviour and the law

There are many different laws relating to aspects of sexuality and sexual behaviour.

- Sexual activity must be voluntary and mutually agreed by those involved.
- The age of consent to sexual intercourse varies from 16 to 17 depending on where you live.
- A person must be able to consent to sexual activity. Age, intellectual and psychological ability to understand and give full permission is taken into account. This includes being intoxicated by drugs or alcohol.
- Incest or sexual activity between close family members is against the law. Close family members could include default, step, foster and biological relatives.
- Taking, sharing, selling, storing or posting sexual images of a person under the age of 18 is against the law.
- Children from 10 years old can be charged for sexually abusing others. Their ability to understand their actions is taken into account when working out if they can be liable.

### WHAT DO YOU THINK? green, orange or red?

Use the traffic lights framework to identify these scenarios

- Harry, aged 8, masturbates for most of the day at school. When masturbating he will often expose his penis to the rest of the class.
- Teekai, aged 13, spends a lot of time alone in his bedroom with the door shut. When his mum knocks on the door he tells her to go away. Lately he is putting his sheets and pyjamas into the washing basket to be washed every morning.
- Gayle, aged 12, often tries to sit on the lap of her mum's male friends. When she does, she will talk about their bodies and say that it is OK for them to kiss her. Sometimes she likes to dance for them and says she is being a pop star.
- Alex, aged 15, spends lots of time chatting to friends on the internet. Recently, Alex made a new friend, 'Sexy Boy', online. The more they chat, the more Alex feels attracted to 'Sexy Boy' and thinks about making a time to meet him in person. Alex talks to a friend about it.
- Marley and Ashmita, both aged 4, are playing in the cubby house and have both taken their underpants off. They are looking at and touching each other's genitals.
- Harper, aged 7, tells her teacher that she has seen Lucas, aged 13, touching her best friend Cindi's vagina.
- Tilly, aged 16, is overheard telling her close friends about having intercourse and oral sex with her boyfriend. He is a 17 year old at the same school. She tells them that she enjoys it.

Suggested answers: 1 = red 2 = red 3 = orange 4 = orange 5 = green 6 = red 7 = green

### WHERE TO GET HELP

Talking about concerns helps prevent harm or abuse.

**Parentline: 1300 30 1300**

[www.parentline.com.au](http://www.parentline.com.au)

**Lifeline: 13 11 14**

[www.lifeline.org.au](http://www.lifeline.org.au)

**Relationships Australia: 1300 364 277**

[www.relationships.org.au](http://www.relationships.org.au)

**1800Respect Online: 1800 737 732**

[www.1800respect.org.au](http://www.1800respect.org.au)

**Child Safety Services (Qld): 1800 177 135**

[www.communities.qld.gov.au/childsafety/protecting-children](http://www.communities.qld.gov.au/childsafety/protecting-children)

Contact Child Protection or Police Services in your state or territory if a child or adult requires protection from harm.

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## SEXUAL BEHAVIOURS IN CHILDREN & YOUNG PEOPLE

A guide to **IDENTIFY, UNDERSTAND** and **RESPOND** to sexual behaviours

### 1. IDENTIFY

#### What is the behaviour? green, orange or red?

Sexual development is influenced by many factors. The environment in which children grow, develop and interact has a significant influence on their knowledge, attitudes and behaviours. When using the traffic lights framework to establish whether the sexual behaviour of children or young people is normal, concerning or harmful, it is necessary to consider the current social, cultural and familial context.

The chart on the next page lists specific examples of green, orange and red light behaviours at various ages. These are examples only and must be considered in context. Take into account the age and ability level of the child, young person and others involved as well as the location, frequency and nature of the behaviour.

Use the traffic lights framework to identify the characteristics of the behaviour and the way it occurs and then follow steps 2 and 3 to understand and respond. All green, orange and red behaviours require some level of information, support and protective response.

**Knowing how to identify and respond to sexual behaviours in children and young people helps adults to support the development of healthy sexuality and protect young people from harm or abuse.**

Sexuality is integral to a person's identity and develops throughout life. It is natural for children and young people to express their sexuality through their behaviour. Healthy sexual behaviour may be expressed in a variety of ways through play and relationships and relates to the stage of development.

Sexual behaviours are not just about sex. They include any talk, touch, questions, conversations and interests which relate to sexuality and relationships.

When children or young people display sexual behaviour which increases their vulnerability or causes harm to another, adults have a responsibility to take action to provide support and protection.

Children and young people who have a disability, have been abused or have experienced other disruptions to their development or socialisation, may be at increased risk of exposure to, or of developing, unsafe or harmful sexual behaviours. Adults who care for these young people have a duty of care to provide relevant information and support.



**red** sexual behaviours that are problematic or harmful, forceful, secretive, compulsive, coercive or degrading signal the need to provide immediate protection and follow up support

**orange** sexual behaviours that are outside normal behaviour in terms of persistence, frequency or inequality in age, power or ability signal the need to monitor and provide extra support

**green** sexual behaviours that are normal, age appropriate, spontaneous, curious, mutual, light hearted and easily diverted experimentation provide opportunities to talk, explain and support



**Report harm or abuse** - If you are aware of, or reasonably suspect, a child has been or is being sexually abused, or is at risk of sexual abuse, or is at risk of sexually abusing others, you should contact child protection services or the police.



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## 2. UNDERSTAND

### What the behaviour is telling you

Children show their needs and wants through their behaviours. Understanding the reason behind a child's sexual behaviour is important. When children or young people do not have the language, experience or ability to seek help, adults must look carefully at the behaviour to interpret it.

When sexual behaviours are identified as concerning or harmful, it is essential to think about why the child or young person is exhibiting the behaviour. Reviewing the behaviour and the way it happens will help you understand what is going on for the child and indicate what is needed.

### Q1. What are the issues or concerns regarding the child or young person and their behaviour?

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### Q2. What might these concerns indicate?

- lack of accurate sexuality information
- boredom or loneliness
- curiosity
- sexual excitement
- lack of social skills
- medical needs
- conflict in relationships
- confusion about sexuality, relationships and sexual activities
- lack of rules and consequences
- lack of information about the risks of the behaviour
- overexposure to explicit sexual activity and materials
- lack of adult supervision and support
- experience of physical, emotional or sexual abuse or neglect
- lack of consistency across environments
- anxiety about adult or family relationships

Understanding the child or young person and the issues that may be contributing to the behaviour guides the planning of effective responses.

Expressing sexuality through sexual behaviour is natural, healthy and a basic aspect of being human. Sexual behaviour which makes children or young people vulnerable or causes harm to another requires adult intervention to provide support and protection.

All children and young people have the right to be safe.

### RED

Sexual behaviours which indicate or cause harm because they are:

- excessive, compulsive, coercive, forceful, degrading or threatening
- secretive, manipulative or involve bribery or trickery
- not appropriate for the age and stage of development
- between children with a significant difference in age, developmental ability or power

These behaviours signal the need to provide immediate protection and follow up support.

0 to 4 years

- compulsive masturbation which may be self injurious, of a persistent nature or duration
- persistent explicit sexual themes in talk, art or play
- disclosure of sexual abuse
- simulation of sexual touch or sexual activity
- persistently touching the genitals/private parts of others
- forcing other children to engage in sexual activity
- sexual behaviour between young children involving penetration with objects, masturbation of others, oral sex
- presence of a sexually transmitted infection

5 to 9 years

- compulsive masturbation e.g. self injuring, self harming, seeking an audience
- disclosure of sexual abuse
- persistent bullying involving sexual aggression e.g. pulling/lifting/removing other children's clothing, sexually threatening notes, drawing, text messages
- sexual behaviour with significantly younger or less able children
- accessing the rooms of sleeping children to touch or engage in sexual activity
- simulation of, or participation in, sexual activities e.g. oral sex, sexual intercourse
- presence of a sexually transmitted infection
- persistent sexual activity with animals
- using mobile phones and internet which includes giving out identifying details or sexual images

10 to 13 years

- compulsive masturbation e.g. self harming, seeking an audience
- engaging vulnerable others in a process to gain sexual activity by using grooming techniques e.g. gifts, lies, flattery
- force or coercion of others into sexual activity
- oral sex and/or intercourse with a person of different age, developmental ability and/or peer grouping
- presence of sexually transmitted infection or pregnancy
- deliberately sending and/or publishing sexual images of self or another person
- arranging a face to face meeting with an online acquaintance
- sexual contact with animals
- sexual activity in exchange for money or goods
- possessing, accessing or sending child exploitation materials e.g. photos of children naked or in sexual activities

14 to 17 years

- compulsive masturbation e.g. self harming, in public, seeking an audience
- preoccupation with sexually aggressive and/or illegal pornography
- sexual contact with others of significant age and/or developmental difference
- engaging others in a process to gain sexual activity by using grooming techniques e.g. gifts, manipulation, lies
- deliberately sending and/or publishing sexual images of another person without their consent
- arranging a meeting with an online acquaintance without the knowledge of a peer or known adult
- sexual contact with animals
- sexual activity in exchange for money, goods, accommodation, drugs or alcohol
- forcing or manipulating others into sexual activity
- possessing, accessing or sending child exploitation materials

### ORANGE

Sexual behaviours which cause concern because of:

- persistence, intensity, frequency or duration of behaviours
- the type of activity or knowledge for the age and stage of development
- inequality in age, size, power or developmental ability
- risk to the health and safety of the child or others
- unusual changes in a child's behaviour

These behaviours signal the need to monitor and provide extra support.

0 to 4 years

- masturbation in preference to other activities
- preoccupation with sexual behaviours
- persistently watching others in sexual activity, toileting or when nude
- explicit sexual talk, art or play
- following others into private spaces e.g. toilets, bathrooms to look at them or touch them
- pulling other children's pants down or skirts up against their will
- touching the genitals/private parts of other children in preference to other activities
- attempting to touch or touching adults on the breasts, bottom, or genitals in ways that are persistent and/or invasive
- touching the genitals/private parts of animals after redirection

5 to 9 years

- masturbation in preference to other activities, in public, with others and/or causing self injury
- explicit talk, art or play of sexual nature
- persistent questions about sexuality despite being answered
- persistent nudity and/or exposing private parts in public places
- persistently watching or following others to look at or touch them
- pulling other children's pants down or skirts up against their will
- persistently mimicking sexual flirting behaviour too advanced for age, with other children or adults
- touching genitals/private parts of animals after redirection
- use of mobile phone and internet with known and unknown people which may include giving out identifying details

10 to 13 years

- masturbation in preference to other activities, in public and/or causing self injury
- persistent explicit talk, art or play which is sexual or sexually intimidating
- accessing age restricted materials e.g. movies, games, internet with sexually explicit content
- persistent expression of fear of sexually transmitted infection or pregnancy
- marked changes to behaviour e.g. older or adult flirting behaviours, seeking relationships with older children or adults in preference to peers
- engaging in sexual activities with an unknown peer e.g. deep kissing, mutual masturbation
- oral sex and/or intercourse with a known partner of similar age and developmental ability
- using mobile phones and internet with unknown people which may include giving out identifying details

14 to 17 years

- sexual preoccupation which interferes with daily function
- intentional spying on others while they are engaged in sexual activity or nudity
- explicit communications, art or actions which are obscene or sexually intimidating
- repeated exposure of private parts in a public place with peers e.g. flashing
- unsafe sexual behaviour, including unprotected sex, sexual activity while intoxicated, multiple partners and/or frequent change of partner
- presence of sexually transmitted infection or unplanned pregnancy
- oral sex and/or intercourse with known partner of more than two years age difference or with significant difference in development
- arranging a meeting with an online acquaintance accompanied by a peer or known adult
- using mobile phones and internet to send or receive sexual images of another person with their consent

### GREEN

Sexual behaviours which are part of normal and healthy development and are:

- spontaneous, curious, light hearted, easily diverted, enjoyable, mutual and consensual
- appropriate to the child's age and development
- activities or play among equals in terms of age, size and ability levels
- about understanding and gathering information, balanced with curiosity about other parts of life

These behaviours provide opportunities to talk, explain and support.

0 to 4 years

- comfort in being nude
- body touching and holding own genitals
- unselfconscious masturbation
- interest in body parts and functions
- wanting to touch familiar children's genitals during play, toilet or bath times
- participation in make believe games involving looking at and/or touching the bodies of familiar children e.g. "show me yours and I'll show you mine", playing 'family'
- asking about or wanting to touch the breasts, bottoms or genitals of familiar adults e.g. when in the bath

5 to 9 years

- increased sense of privacy about bodies
- body touching and holding own genitals
- masturbation, usually with awareness of privacy
- curiosity about other children's genitals involving looking at and/or touching the bodies of familiar children e.g. "show me yours and I'll show you mine", playing 'family'
- curiosity about sexuality e.g. questions about babies, gender, relationships, sexual activity
- telling stories or asking questions, using swear words, 'toilet' words or names for private parts
- use of mobile phones and internet in relationships with known peers

10 to 13 years

- growing need for privacy
- masturbation in private
- curiosity and seeking information about sexuality
- use of sexual language
- interest and/or participation in girlfriend or boyfriend relationships
- hugging, kissing, touching with known peers
- exhibitionism amongst same age peers within the context of play e.g. occasional flashing or mooning
- use of mobile phones and internet in relationships with known peers

14 to 17 years

- need for privacy
- masturbation in private
- accessing information about sexuality
- viewing materials for sexual arousal e.g. music videos, magazines, movies
- sexually explicit mutual conversations and/or use of humour and obscenities with peers
- interest and/or participation in a one on one relationship with someone of the same or other sex
- sexual activity with a partner of similar age and developmental ability (ability to consent must be considered)
- use of mobile phones and internet in relationships with peers