

Sex Offenders Show Early Behavior Signs

by Marcia Morgan

We have been inundated the past two to three years with information on how to keep our children safe from the hands of predatory sex offenders. We have taught children to recognize “OK” and “NOT OK” touches and the safety rule, “NO-GO-TELL.” As adults, we have learned how to recognize the signs and symptoms of the abused child.

Although this traditional approach to preventing child sexual abuse is very important, not all children are becoming educated about abuse. Consequently, we are just shifting who will be the next victim. This will continue to happen until we get to the root of the problem—the offender. We need to stop the offender before he or she picks a victim and the cycle of abuse and hurt continues.

One way to accomplish this is to identify inappropriate sexual behavior in children that could eventually lead to more aggressive sexual touching and illegal sex offenses.

There is a great deal we do not understand about sex offenders. One thing we do know, however, is that most offenders started young and have often had many victims by the time they reached 18 years.

Children exhibit sexually inappropriate behaviors for two primary reasons: (1) they are testing boundaries or, (2) they are “sexually reactive,” meaning they are responding to a sexual abuse they have experienced themselves.

What does all this mean to you as a parent? Essentially, we need to be aware of our children’s behavior and not simply dismiss all sexually questionable or aggressive behaviors as “boys will be boys” or “it’s nothing, they’re just experimenting.” Children exploring and being curious about their friends’ bodies may be normal, but these actions may also be warning signs.

The following is a list of behaviors children may exhibit, and when parents’ warning flags should go up, necessitating a response. It is not meant to be comprehensive, but rather to illustrate the general behavior parameters.

Normal: Genital or reproduction conversations with peers or similar age siblings. Playing doctor. Occasional masturbation. Imitating seduction (e.g., kissing, flirting). Dirty words or jokes within cultural or peer group norm.

Adult reaction: Monitor

Yellow Flags: Preoccupation with sexual themes (especially sexual aggression). Attempting to expose other’s genitals (e.g., pulling skirts up or pants down). Sexually explicit conversations with peers. Sexual graffiti (especially when chronic or impacting individuals). Sexual innuendo, teasing, embarrassment of others. Precocious sexual knowledge. Single occurrences of peeping, exposing, obscenities, pornographic interest, frottage. Preoccupation with masturbation. Mutual masturbation, group masturbation. Stimulating foreplay with dolls or peers, including French kissing, petting.

Adult reaction: Monitor; label the behavior you saw (e.g., I saw you write those words on the wall); and react by stating how the behavior makes you feel (e.g., I feel uncomfortable when you....)

Red Flags: Sexually explicit conversations with significant age difference. Touching genitals of others. Degradation/humiliation of self or others with sexual themes. Forced exposure of other's genitals. Inducing fear/threats of force. Sexually explicit proposals or threat including written notes. Repeated or chronic peeping, exposing, obscenities, pornographic interest, frottage. Compulsive masturbation. Female masturbation including vaginal penetration. Simulating intercourse with dolls, peers, animals.

Adult reaction: Monitor; label and react; confront and prohibit; possibly refer and report.

No Question: Oral, vaginal, anal penetrations of dolls, children, animals. Forced touching of genitals. Simulating intercourse with peers with clothing off. Any genital injury or bleeding not explained by accidental cause.

There are several things for adults to consider when reacting to children's sexual behaviors. Usually, no report needs to be made if the behavior falls in the normal range or at the first response to a yellow flag behavior.

An adult should consider a report if there is a preoccupation with normal range behaviors, the child exhibits chronic Yellow Flag behaviors, all Red Flag behaviors that continue after prohibition, all Red Flag behaviors if there was force or a significant age difference between the victim and the offender, and clusters of Red Flag behaviors.

Always report behaviors in the No Question category.

As a parent, the critical thing to remember is the importance of involvement, concern and monitoring your child's life. You'll know better than anyone when there are changes in your child's moods and actions.

Don't be afraid to ask for help, or advice from local professionals in the counseling field or contact Dr. Gail Ryan; Sexual Perpetrator's Project; National Center for the Prevention and Treatment of Child Abuse and Neglect; Kempe Center-University of Colorado Health Sciences Center; 1205 Oneida Street; Denver, CO. 80220; (303) 321-3963.

Although most children are in the normal or even yellow flag range, early intervention for those who are heading on an unhealthful and potentially dangerous path could prevent grief in your own family and in the homes of innocent victims. You are not alone and there are people here in our own community who can help.

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