

2018 Advanced TF-CBT Conference

You've got this! Addressing youth problematic sexual behaviors in the TF-CBT model

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Presentation Objectives

Participants will..

- Be able to differentiate typical and problematic sexual behaviors in youth;
- Learn the commonalities and differences between the evidence-based PSB-CBT and TF-CBT models;
- Learn how to incorporate research supported treatment components from PSB-CBT into TF-CBT to reduce or eliminate problematic sexual behaviors in children and adolescents.



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Problematic Sexual Behavior



Problematic Sexual Behavior (PSB)

- Typically involves genitals
 - Could involve other body parts, such as mouth, hands, etc.
- Potentially harmful to self and/or others
 - Physical and/or emotional
- Developmentally inappropriate
- Could be illegal per State and/or Federal statutes



Problematic Sexual Behavior (PSB)

- Not a diagnosis
 - Clinically concerning behaviors
 - Disruptive behaviors
 - Trauma symptoms
 - Single focus of concern
- Does not necessarily infer origin or goal of behavior (e.g., sexual gratification)
 - Adolescents more likely to engage in sexual behavior for sexual gratification/pleasure
- Continuum of normal sexual development to sexual behavior problems



Characteristics of Children with PSB

- Relationship issues
 - Parenting/caregiver stress
 - Parent perception of youth
 - Peer relationship problems
- Younger children with PSB...
 - More likely to be female
 - More likely to present with co-morbid problems

Does this sound familiar?



Guidelines for Determining if Sexual Behaviors are a Problem

Frequency	Developmental Considerations	Harm
High Frequency	Occurs between Youth of Significantly Divergent Ages/Developmental Abilities	Intrusive Behaviors
Excludes Normal Childhood Activities	Behaviors are Longer in Duration than Developmentally Expected	Includes Force, Intimidation, and/or Coercion
Unresponsive (i.e., does not decrease) to Typical Parenting Strategies	Behavior Interferes with Social Development	Elicits Fear & Anxiety in Other Children



Bonner, 1995; Davies, Glaser, & Kossoff, 2000;
Friedrich, 1997; Johnson, 2004; Larsson & Svedin, 2001



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Treatment for Children and Adolescents with Problematic Sexual Behavior



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Meta Analysis: Effective Practice Elements

- St. Armand, A., Bard, D., & Silovsky, J.F. (2008)
- Purpose to identify “what practice elements lead to greater reductions in PSB” in children
- Examined studies in which PSB were either primary or secondary target for treatment for children
 - 11 studies identified
 - 18 treatments evaluated



Meta Analysis: Effective Practice Elements

- What worked?
 - Parenting/Behavior Parent Training (BPT) was the strongest prediction of reductions in PSB
 - BPT occurred with rules about sexual behavior/boundaries, abuse prevention, and sex education
- What did NOT work?
 - Practice elements that evolved from adolescent and adult sex offender treatments were not significant predictors
- **PSB specific CBT and TF-CBT treatments effective in reductions in PSB**



PSB-CBT and TF-CBT Treatment Models



Overlap of Problematic Sexual Behavior-Cognitive Behavioral Therapy (PSB-CBT) and Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)

- Children with PSB present with history of a wide range of traumas, and not just sexual trauma (e.g., Silovsky & Niec, 2002)
- Behavior problems occur within trauma-focused treatment that must be managed (e.g., Cohen, Berliner, Mannarino, 2010)
- Many children, particularly preschool age children, present for treatment with trauma, PSB, and general behavior problems symptoms (e.g., Silovsky, Niec, Bard, and Hecht, 2007)



Clinical Decision Making: What Should I Do First?

- Considerations for PSB
 - Safety issues
 - Responsive to parental interventions
 - Aggressive, coercive, force
 - Impact on others
 - Boundary issues
 - Interfering with functioning
- Considerations for Posttraumatic Stress Disorder (PTSD)
 - Re-experiencing symptoms
 - Interfering with functioning
 - Trauma history/background
 - Deblinger, E., Mannarino, A. P., Cohen, J. A., Runyon, M. K., & Steer, R. A. (2011)



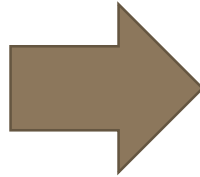
Considerations within treatment

- Be mindful of family's personal values around sexual behavior
- Is the behavior reportable?
- Child discomforts?
- Caregiver discomforts?
- Other engagement factors?
 - Caregivers' own trauma history
 - Impact on siblings
 - Level of disbelief
 - Caregivers' emotional response
- Therapist discomforts?
 - Behavior parent training
 - Sex education
 - Directly talking about PSB
 - Belief in myths about children with PSB



TF-CBT with integration of PSB-CBT

Psychoeducation
Parenting Skills
Relaxation
Affective Modulation
Cognitive Coping
Trauma Narrative/Cognitive Processing
In Vivo Desensitization
Conjoint Parent-Child Sessions
Enhancing Future Safety and Development



Psychoeducation and Enhancing Current Safety
Parenting Skills and Enhancing Current Safety
Relaxation
Affective Modulation
Cognitive Coping
Trauma Narrative/Cognitive Processing
In Vivo Desensitization
Conjoint Parent-Child Sessions
Enhancing Future Safety and Development



Psychoeducation and Enhancing Current Safety

- Psychoeducation for trauma to include education about trauma and trauma symptoms while continuing gradual exposure

AND

- Psychoeducation for PSB and Enhancing Current Safety, to include:
 - With caregivers
 - What are “normal”, concerning, and problematic sexual behaviors?
 - How did PSB develop?
 - Prevention, parenting, supervision, and safety
 - With child and caregivers
 - Private parts and rules
 - Boundaries
 - Sex education



PSB-CBT Rules about Sexual Behavior

- **Preschool Private Part Rules:**
 - No touching other people's private parts.
 - No other people touching your private parts.
 - No showing private parts to other people.
 - No looking at other people's private parts.
 - No touching your own private parts when other are there or
 - Touching your own private parts when you are alone is okay.
- **School-Age Sexual Behavior Rules**
 - It is not okay to look at other people's private parts.
 - It is not okay to show other people your private parts.
 - It is not okay to touch other people's private parts.
 - It is okay to touch your private parts as long as you are in private and do not take too much time.
 - It is not okay to use sexual language.
 - It is not okay to make other people feel uncomfortable with your sexual behavior.



When Adults Are Allowed to Look/Touch Private Parts

- **Exceptions to SBR for a adults with children**
 - Hygiene (i.e., toileting, bathing)
 - Health / Medical
 - Dressing
- Clarify between “exceptions” and trauma/abuse



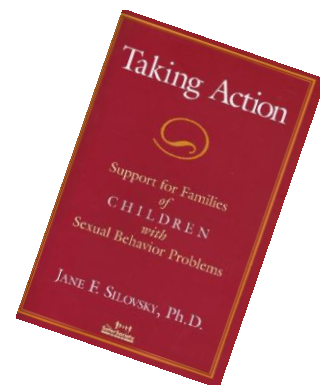
Boundaries for Children

- Teach and reinforce physical boundaries
 - Hula Space
 - Arm's length
 - Greetings, special handshake
 - Assertiveness
 - Delineating physical space
 - "Mother May I"
- Problem-solve how to manage tight/crowded spaces



Psychoeducation and Parenting Skills

- Get calm
- Stop the behavior if in progress and get kids safe
- Calmly provide:
 - Relevant rules and expectations;
 - Accurate education about names and functions of all body parts;
 - Information about social rules of behavior and privacy;
 - Respecting theirs' and others bodies;
 - Developmentally appropriate sexual education;
 - Consequences as needed;
 - Increased visual supervision;
 - Strategies to prevent future PSB
 - Recommendations for Supervision and Parenting (handout)
 - Determine if professional help is needed
 - Reporting requirements



Supervision of Children with PSB

- Appropriate supervisors
- Visual vs. non-visual supervision
- Increasing social supports system
- Challenges
 - Sleep/nighttime
 - Bathing
 - Multiple children, solo caregiver
 - Out-of-home situations
- Creative supervision
 - Use of available space
 - Room dividers
 - Electronic monitors
 - Scheduling



Parenting Skills and Enhancing Current Safety

- Parenting skills implementation as typical to include:
 - Positive reinforcement
 - Behavior charts
 - Appropriate rules and consequences

AND

- Parenting skills for PSB to include:
 - Increase supervision
 - Family rules around boundaries
 - Modesty/privacy



Parenting Skills and Enhancing Current Safety

- Close SUPERVISION
- Child not placed in charge of other children
- Bathe and sleep alone
- No exposure to sexual material
- Maintain adults' privacy
- Appropriate modesty
- Communicate clear rules about privacy
- Include all members of the family



Parenting Skills and Enhancing Current Safety

- Supervision, **Supervision, Supervision**
- Family rules
- Redirection and distraction
 - Activities that use up energy
 - Activities that take attention away
 - Activities to avoid
- Cue and reminders
- Reinforcing following the rules



Parenting Skills: General Behavior Management Skills

- Strengths based approach
 - Therapist model praise of child and praises caregivers
 - Develop and express positives about the child
 - “You are loved and wanted”
 - “I enjoy being with you”
 - “I like it when....”
- Positive interactions
 - What did you like to do as a kid?
 - What do you like doing now?
- Reflective/Active listening
- Behavior Charts
- Commands and consequences
 - When to use



Relaxation

- Relaxation as a tool for managing trauma-related symptoms and other difficult situations
- Utilized in decision making
- Maintaining sexual behavior rules
- Skills
 - Deep breathing
 - Progressive muscle relaxation
 - Others?



Affective Modulation

- Address feelings identification for the purposes of skill utilization.
 - Following sexual behavior rules
 - Increasing awareness and coping with trauma reminders while decreasing tendency to avoid.
- Children that have broken sexual behavior rules generally break these rules when experiencing heightened levels of emotion
 - Curiosity
 - Anger
 - Excitement
 - Boredom
 - Confusion



Application to PSB / SBR ~ School-Age Only ~

- Identifying and rating feelings about activity (before & after)
 - Activity – When, Where, Who, What
 - Before breaking SBR
 - During / while breaking SBR
 - After breaking SBR
 - Add how adults found out





Cognitive Coping

- TF-CBT typically utilizes cognitive triangle for teaching relationship between thoughts, feelings, and behaviors.
 - No processing of trauma related cognitive distortions during this component
- PSB-CBT uses a set of steps for children to work through
- Utilized across both treatment models to:
 - Help in decision making
 - Increase awareness of consequences
 - Emotion management
- Pre-cursors for important pieces of treatment:
 - Trauma narrative/cognitive processing
 - Acknowledging PSB, impact on others, apology



Impulse-Control: Turtle Steps

- Stop and go in your shell
- Calm down/relax
- Think of something helpful to do
- Come out of your shell and do it





Impulse-Control: STOP Steps

- Stop and say how you are feeling
- Relax / calm down
- Think
 - What will happen if I do my first reaction?
 - Will I hurt someone or something?
 - Will I be breaking a rule?
- Options
 - At least 3
 - Put each option through the “Think” step
- Pick your best option and do it



Supporting Children to Use Self-Control

- Remember brain development!
- Developmentally appropriate expectations for use
- Practice makes perfect
 - Neutral time
 - Role-play and in-vivo
 - Using the worksheets
 - Support from other adults/caregivers
 - Adding to family skills



Application to PSB / SBR ~ School-Age Only ~

- Supportive environment for sharing
 - Confidentiality, honesty, respect
- Use feeling thermometers
 - Blank for about activity
 - “Before-During-After” to assist
- Acknowledging SBR
- Using the worksheet - all ages
- Sharing responses and answering questions



Trauma Narration/Cognitive Processing

- Proceed as normal with some additional things to think about:
 - Developmental impact on Trauma Narration and Cognitive Processing component
 - Inclusion of problematic sexual behavior
 - Guided reconsideration for thoughts of shame related to problematic sexual behavior
 - Sexual vs. non-sexual trauma



Acknowledging PSB and Impact on Others



- For some youth, including the PSB component that addresses
 - Acknowledging the PSB in a manner that decreases shame
 - Explore and better understand impact on others
 - Discuss PSB and ability to prevent in the future with caregivers
 - Address PSB with siblings or other family members and receive support from caregivers
- Factors that impact decisions on the need for this component
 - Age and cognitive functioning of the youth
 - Interpersonal nature of the PSB
 - Impact on others (other children, caregivers, family members, other people)
 - Progress with the trauma narrative
 - Level of shame about trauma, shame about PSB, sense of guilt and responsibility
 - Perceptions of caregivers
 - Progress of family members impacted by PSB



In Vivo Desensitization

- Continue what you are doing for feared situation(s) to gain mastery over trauma reminders
- For PSB, gradual exposure to real-life situations with support while gradually decreasing supervision (Allen, 2017)



Conjoint Parent/Child Sessions

- Use conjoint sessions throughout treatment to:
 - Increase communication
 - Enhance relationship
 - Share psychoeducational knowledge
 - Practice skills
 - Acknowledge impact of trauma and PSB
 - Share progress
 - Heal!



Enhancing Future Safety and Development

Caregiver

- Communicating values and beliefs to children
- Monitoring exposure
- Promoting parent-child communication

Child-Caregiver

- Who, when, and where to talk about sex ed
- Information
 - Names and functions of private parts
 - Conception
 - Puberty



Respectful Approach to Caregivers

- Acknowledging few receive information or training on sexual development
- Area often ignored in parenting books
- Can be difficult to directly talk about
- Integrated education helps connect with what already know



Respectful Approach to Caregivers

- Cultural factors and family beliefs/rituals
 - Who does the teaching
 - When is the teaching done
 - How is teaching done
- Personal history
- Parental knowledge and lack thereof
- Be mindful of materials used
 - Revisions/edits to "Where Did I Come From?" book



Barriers to Communication

- “If they know, they will act out sexually”
- “This is uncomfortable to talk about”
- “They are going to share this information with others , e.g. peers, siblings”
- “They don’t need to know this until they are an adult”



Sex Education for Families

- Appropriate people, times, and places for child to discuss sex education
 - Reasons peers and media are not appropriate informants
 - Reinforcing caregivers’ values
- Medical names and functions of sex parts
- Appropriate interactions with others
 - Friendships, intimacy, trust, romance



Sex Education for Children

- Older children
 - Puberty
 - Physiological changes to body
 - Sexual behavior (e.g., masturbation)
 - Body image
 - Hygiene
 - Relationships
 - Sexually transmitted infections
 - Sexual health, safer sex practices
- Younger children
 - Applying Turtle/STOP Steps to sex ed



Enhancing Future Safety for Caregivers

- Not just “stranger danger”
- SBRs
- Safety plan
- Appropriate dating/healthy relationships
- STOP IT NOW! as resource



Enhancing Future Safety Skills for Children

- Knowing the rules, sexual and otherwise
- Peer pressure
- Healthy Relationships (mostly for adolescents)
- No-Go-Tell strategy
 - Troubleshooting
 - Telling adults



“Children are like sponges,” writes Johnson (2009), “They absorb the behavior, values, attitudes, and feelings of those around them. The youth who have learned these behaviors, attitudes, and feelings can learn new, more beneficial behaviors. It’s crucial to remember that these worrisome sexual behaviors are just developing. No deeply rooted patterns have been set. And children change rapidly as they grow up. They are malleable and can absorb healthy attitudes, behaviors, and feelings about sex and sexuality.



Providing a sexually healthy and safe environment is essential for the future development. With treatment and community-based supervision and monitoring, recidivism can be reduced, victims can heal, and parents/caregivers can be empowered to help continue this shift toward health and wholeness, working on the front lines with their children and families.”

Toni Cavanaugh Johnson, Ph.D. (2009)



Questions?



Professional Resources



National Center on the Sexual Behavior of Youth: *Better lives through better choices*

- The mission of NCSBY is to promote better lives, through better choices by youth, caregivers, and professionals for healthier responses to and prevention of problematic sexual behavior of youth. NCSBY provides national training and technical assistance to improve the accessibility and strategic use of accurate information about the nature, incidence, prevalence, prevention, treatment, and management of youth with problematic sexual behavior.
- Resources include
 - Educational material
 - Fact Sheets
 - Web Links
 - News and Events
 - Bibliography



www.NCSBY.org



The National Child Traumatic Stress Network

- Mission: to raise the standard of care and improve access to services for children, their families, and communities throughout the United States.
- Funded by SAMHSA
- Publications and other information for parents and caregivers as well as professionals on trauma
- Fact sheets on children with PSB collaboratively developed with NCSBY

www.nctsn.org



California Clearinghouse of Evidence- Based Treatment for Child Welfare

www.cebc4cw.org/

- Provides child welfare professionals with easy access to vital information about selected child welfare related programs.



Indian Country Child Trauma Center (ICCTC)

The mission of the ICCTC is to improve treatment and services for Native children and adolescents in Indian Country who have experienced traumatic events. Originally, a member of the National Child Traumatic Stress Network funded by SAMHSA

- Honoring Children, Respectful Ways
- A treatment program for American Indian/Alaska Native children with PSB
- Adapted with Lorena Burris, Ph.D.
- NCSBY's fact sheets modified for parents

www.icctc.org



Association for the Treatment of Sexual Abusers

- ATSA was founded to foster research, facilitate information exchange, further professional education and provide for the advancement of professional standards and practices in the field of sex offender evaluation and treatment.
- Taskforce Report on Children with Sexual Behavior Problems – Downloadable at:

<http://www.atsa.com/pubRpt.html>



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