Mary L. Pulido, Ph.D.  
Executive Director, The New York Society for the Prevention of Cruelty to Children

Talking to Your Child About Sexual Abuse: When Do You Do It and What Do You Say?  
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A reporter recently interviewed me about this topic. She wanted to know at what age parents should have this conversation with their kids, and whether parents should use the anatomically correct language for body parts.

My advice is that parents discuss this issue with their children as soon as they believe they can grasp the concepts. While this can be an uncomfortable subject, particularly if they think their child is too young, children in pre-kindergarten have shown the capability to grasp these concepts if age-appropriate language is used. Parents need to use their discretion depending on the child's age, but the important thing is to have the conversation. Children of all ages are in danger of being targeted for abuse. It's more common as children reach the ages of 8 to 12, but younger children are easy prey for perpetrators, too.

So, how do you start? I recommend that the parent frame the discussion around "safety" rather than "abuse," as it's less scary for the child. Parents might start by discussing "private parts." These conversations can be integrated into the child's daily routine, such as bath time or when changing clothes. Make it an on-going topic of conversation. I recommend that the anatomically correct names for body parts should be used such as penis, vagina, buttocks and breasts. That is the ideal. Children should learn the names of their private parts at an early age. But if the parent isn't comfortable using those terms, they could use the term "private parts." The important thing is that the parent and child are referring to the correct places on the body. I don't recommend making up a name, for example, choo-choo for penis or cookie for vagina. It's confusing for the child and if they are ever abused, adults may not understand their disclosure. Parents may want to ask their pediatricians for guidance, as they can be a great resource.
Here's a brief script for parents: "I want to have a special talk with you about safety regarding your body. You have 'private parts' on your body. They are the parts that are covered by your swimsuit or underwear. Only certain adults are allowed to touch your private parts." Then, let the child know that there are two kinds of touches, safe and not safe touches. The NYSPCC uses the terms "safe/not safe" instead of "good/bad" as it makes it clearer for the child. For example, sometimes a good touch (e.g., vaccination in the doctor's office) can feel bad to the child's body, and a bad touch (e.g., inappropriate tickling/fondling) can feel good to the child's body. The terms "safe/not safe" eliminate this confusion. The parent should give examples of safe touches, such as a doctor or nurse during an exam with Mom or Dad in the room, Mom changing the baby's diaper or giving the toddler sister a bath. "These are safe touches and are OK." You may ask the child to give you an example of a safe touch so that you are sure they understand the concept.

Then you explain about not safe touches. "Sometimes there are people, and they could be people that you know and like, that may try to touch your private parts in ways that make you feel sad, mad, confused or uncomfortable. These are not safe touches." Give an example of someone putting their hand under a girl's shirt or down a boy's pants to touch their private parts. "The person may tell you that it's a game, or that you will like these touches." Again, ask the child to give you an example of a not safe touch.

Then, focus the conversation on the fact that they must tell you right away if this ever happens to them. "What's important is that you tell me or Dad (or whomever the child trusts) right away, so we can keep you safe." Work with the child to identify several key adults that they trust and could go to if something happens. Ask them, "So, who would you tell if this happened to you?" The NYSPCC recommends a list of three to four adults in case the parents are not available or in case the parents are preoccupied and not clearly interpreting the child's cues on the matter. What's important is that the child keeps telling until someone believes them and takes action.

The parent should also address the issue of secrecy or threat that some perpetrators use with children to keep them quiet about the abuse. "Even if the person who is touching you makes you promise not to tell, or tells you that they will be mad at you or they may hurt you, or someone you love, if you tell, that does not matter. What they are doing is bad and not your fault. You must not keep it a secret, you must tell me right away. Then, I promise that I will take the steps needed to keep you safe."

It is very important to reinforce with the child that it's never their fault if they were touched in an not safe way. It's always the adult's fault. And the parent's job is to protect them.

For more child safety tips visit www.nyspcc.org.