Solution-focused approaches to caring for children whose behaviour is sexually harmful

Judith Milner introduces the work of Barnardo’s The Junction with children whose sexualised behaviour threatens their foster placement stability. A safety building approach to working with children, their carers and teachers is described, using examples of work carried out with children taken into care after discovery that they have been both sexually abused and abusive in their birth families.

Judith Milner is a freelance solutions therapist who has worked as an external consultant to Barnardo’s The Junction for seven years

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Introduction

Children who have an adverse sexual history prior to care are the ones most in need of a reparative family life experience but the safety issues involved make the fostering task especially difficult (Sargent and O’Brien, 2004). Their sexually abusive behaviour poses a powerful threat to the foster family’s sexual safety. Just how is a foster carer supposed to respond when a 12-year-old boy steals her knickers from the wash basket, masturbates with the bedroom door open and creeps around the house in the dark? Or when a 13-year-old girl is found playing ‘bottom games’ with the carers’ young grandchildren? Or when a seven-year-old boy’s teacher reports that he is taking his penis out in class, following pupils into the toilet and touching their private parts. The research shows that foster carers’ responses to such behaviour include feeling frightened, humiliated, shocked, betrayed, guilty, incompetent and hopeless. Not only do few carers receive training in handling sexualised behaviours but very often their support workers also lack skills in this area (Pithouse et al, 2004).

When such children are referred to Barnardo’s The Junction, the social worker’s main concern is about how to manage the sexual risk posed to other children. However, foster children whose behaviour is sexualised are not only particularly testing and potentially dangerous, they are also emotionally needy and vulnerable children who respond to previous experiences of abuse with self-harming, aggression and sexual risk-taking (Hackett, 2004). Pollock and Farmer (2005) suggest that their broad spectrum of distress means that they require intervention on several fronts:

- work on the impact of the sexual behaviour per se;
- interventions aimed at addressing multiple separations and rejections (they are highly likely to have had more than one placement);
- educational interventions to counter learning delay;
- protection from sexual risks or their own risky behaviour.

Thus, therapeutic interventions are most effective when the sexualised behaviour is managed within the context of other challenging behaviours. This article looks at ways in which this hard-to-reach group of children can be helped to develop sexual safety for others and emotional and sexual safety for themselves.

The Junction

The Junction provides a specialised service for seven to 17-year-olds whose sexual behaviour is a problem. This includes children and young people who have acted out sexually, who have abused someone sexually or who have been convicted of an offence. It also

1 The Junction is a specialist service for children and young people with sexually concerning or harmful behaviour and their carers. As well as providing assessments and interventions, it also offers training for carers involved in safe care and management.
provides support and safe care for younger children, as well as protective behaviour training for schools. Central to the service is the provision of support and advice to parents and carers both individually and in groups. Experienced groups of parents and foster carers are a valuable resource to the service. Most referrals are from the local authorities providing regular funding (Barnsley, Doncaster and Rotherham), but there is also a small team of external consultants who work with referrals from other local authorities. The case examples below are from the practice of the author who is one of the external consultants to the service.

Initially, the service used a cognitive behaviour approach, such as that outlined by O’Callaghan and Print (1994), concentrating on distorted thinking patterns and attempting to break a presumed ‘cycle of abuse’. This perspective was employed because the early research indicated that sexual offending at an early age was an indicator of likely recidivism (see, for example, Morrison et al., 1994; Hanson, 2004). Doubts about the effectiveness of a cognitive behavioural approach (Polaschek, 2001; Hackett, 2004; Mair, 2004) and the experience of Junction workers led to a radical rethink, following which solution-focused and narrative approaches were adopted. These are collaborative approaches in which the skills and relationships of parents, foster carers and teachers who have day-to-day care of the child are identified and utilised.

The method
A solution-focused approach to safety building and responsibility-taking involves identifying children’s potential for controlling their own behaviour rather than depending solely on carers to manage risks, specifically a signs of safety approach (for a fuller account, see Myers, 2005; Myers and Milner, 2007). This approach looks at the times when the child could have exhibited sexualised behaviour but didn’t (exceptions to the problem), using the child’s strengths and resources to build on these so that safety is increased. Additionally, a narrative approach is used to enable children to externalise their sexually concerning (and other problem) behaviour (Freeman et al., 1997). A commonly found example of an externalisation of sexually harmful behaviour is the child deciding to name it the touching problem, although any name agreed makes it possible for them to talk about it more easily. Then they can begin to develop strategies for reducing and, ultimately, eliminating the behaviour as preferred ways of being are identified (for more details, see Myers et al., 2003). How the risks posed by children whose behaviour is sexually concerning are balanced with attention to their emotional needs is described below.

Creating a safe, consistent environment
Children who have been sexually abused and whose behaviour is sexually abusive have grown up in homes where moral, social and emotional boundaries have been breached and opportunities to develop socially, emotionally and intellectually have been denied. Thus, they tend to have at least some degree of learning delay, a low level of social skills and a high degree of secretive behaviour and untruthfulness. They need clear rules, routines and expectations; to be kept safe; to know that they are safe; and that others are safe from them (Hardwick, 2005). Faced with the need to protect other children in the family, and themselves, from allegations, foster carers usually institute a number of safety measures, such as baby alarms to tell if the child leaves the bedroom in the night, rules about leaving bedroom

2 For more details, see the Safe Care Pack for Parents and Carers produced by families who have successfully supported their children in overcoming sexually concerning behaviour problems – available from Barnardo’s The Junction, 10 Nightingale Close, Rotherham S60 2AB; 01709 377157.
doors open when playing upstairs and vigilance when the foster child is playing out with others. However, in the relatively unstructured infant classroom setting or the secondary school playground, the child has many more opportunities to act out sexualised behaviour. So, a first step is to bring the foster carers and teachers together to agree on a consistent approach to ensuring the safety of other children. Externally enforced safety rules minimise sexual risks, creating a safer environment in which children can then begin to develop and have confidence in their own safety plans.

After coming into care, children learn very quickly that what was considered ‘normal’ behaviour in their birth family is regarded as very wrong by other people and often they become afraid to talk about their mixed feelings of the sexual abuse (not all of which will have been experienced as abusive) and inability to handle their age-inappropriate but powerful sexual urges. At the very time when they need to be touched lovingly, their carers are most likely to hesitate to touch them at all in case sexual responses are triggered. It is essential to discuss this with carers and decide on how safe touches can be given, such as safe hugs (from the side, along the shoulders) and safe stroking (ruffling a child’s hair is an acceptable touch, as is stroking the child’s cheeks and neck with a fluffy make-up brush).

With older children, everyone in the family can be asked to show their appreciation of others by giving them ‘invisible badges’ (pats on the upper arm with the finger tips). A major concern expressed by foster carers is how quickly sexualised behaviour recurs when their foster child has contact with other abused and abusing siblings; for example, younger brothers or sisters jumping onto older siblings’ knees and cuddling up too closely. This can be quite simply dealt with by teaching the child how to do what one child described to me as The Santa Sit – place the younger child sideways on one knee so that there is no danger of private parts touching. Children can practise this with a doll before meeting up with siblings.

Foster carers should also be consulted about what they already know makes the child feel safe. Seven-year-old Nicholas’s foster carer knew that images of the sea made him feel safe after she found he had made himself a bed on the floor of his blue painted bedroom and surrounded himself with his teddies. He told her it was the sea bed and she responded sensitively by painting fish on the walls. I also gave him two invisible crocodiles, which I explained live on a strict diet of nasty things, to live in his bedroom. His disturbed nights and daytime temper tantrums reduced dramatically after his foster carer assured him that bad memories were like pudding and custard to the crocodiles. During therapy sessions, Nicholas drew lots of sea pictures so his teacher used this interest to reward his efforts at school work and his attempts to control his “touching” of other pupils by changing his star chart to a sea chart with fish stickers for socially and academically acceptable behaviour. This was an effective way of responding to Nicholas’s efforts as it linked to his routines in the foster home, increasing his feelings of safety.

Children with adverse sexual experiences are also more likely to have been neglected and to have suffered multiple separations than other foster children (Pollock and Farmer, 2005). They also experience separations on coming into care as sexualised sibling behaviour requires that they are placed separately, and their placements may break down under the challenges they pose to carers. These events make them feel bad about themselves and reluctant to talk about their difficulties. One way around this is to ensure that the good things about them are discussed and celebrated; for example, Nicholas’s foster carer covered one wall of his bedroom with good memory photos and pictures. After three years of foster care, 12-year-old Natalie had ceased trashing her bedroom but was still verbally
abusive to her foster carer and teachers, and a constant concern because of her stealing and ‘sex games’ with younger children. As she had failed to engage with previous attempts at therapy, her foster carer and I began each session by talking about what she had done well over the previous week. She would eavesdrop on us from the stairs and join us when it became clear that her bad behaviour was not the only focus of our conversation. Children can also be reminded of good things they have done in narrative letters (for a fuller account, see Milner, 2001, Chapter 5).

Dealing with aggressive behaviour

Hardwick (2005) noted that children with sexually concerning behaviour also have anger-related and traumatised behaviours (wetting, cutting, etc), so it is important to develop safety and control in these areas too. Anger management programmes often prescribe coping mechanisms to be followed as though anger is in some way a discrete, easily identifiable behaviour. Externalising anger by asking children what colour and shape their anger is, where it resides in their body and where it attacks when it comes out, reveals that each child’s anger is unique and needs its own solution. One child may have a red bomb-shaped anger that explodes into violence, whereas another may have a black anger that festers into self-harming. Identifying the characteristics of strong emotions helps children talk about them as though they are separate things that can be tackled rather than integral parts of their ‘badness’. This enables children to identify times when they have been able to calm themselves. These exceptions to the ‘upset’ story can then be developed by asking them how they did it, and whether they could do it again, so that a story of self-control emerges. Even after Natalie came in from the staircase, she still couldn’t bring herself to talk about her behaviour so I asked her foster mother questions as though she was Natalie. Natalie was given two cards on which were written RIGHT and WRONG so that she could indicate whether or not her foster mother was getting ‘her answers’ right or not. A WRONG card held up meant that Natasha had to explain herself, and she took pleasure in ‘correcting’ her foster mother. For example, the foster mother said that ‘she’ hadn’t been swearing at all the previous week. When asked how ‘she’ had done that, the foster mother said it was because she had been listening and doing what she was told. With much giggling, Natalie held up the WRONG card and explained that she had done ‘self-calming’ by using silly words instead of swear words.

Again, it was important to work closely with the school in helping Natalie develop more control over her emotions. Her learning mentor had provided her with an ‘emotions book’ so that she could write down her overwhelming feelings, but after hearing how Natalie was handling her anger in the foster home, the teacher decided that it would be more useful for her to have a ‘self-calming book’, detailing each tiny success so these could be discussed later. For example, instead of writing ‘those girls wound me up at playtime and I wanted to hit them’, Natalie would write ‘I nearly hit those girls who keep winding me up but I went to play with my friend in the disabled room instead.’

Where the emotions are so strong that the child cannot bring themselves to talk about them at all, a helping hand can be useful. The child draws around their hand and writes the names of people they trust on each digit. As children whose behaviour is sexualised tend to trust very few people whom they can talk to about not okay touching, it is helpful to suggest that they include a pet or an imaginary friend as well as carers and teachers. This helping hand acts as a reminder that there are people who will listen whenever the child has something that is difficult to say (for further details, see Barnardo’s, 2005). Alternatively, a secret thoughts box can be used. Here the child writes down an upsetting thought on a piece of paper and puts it in the box to be read later. A
good time to read the thoughts is Friday afternoon, after school and before the weekend starts. The foster carer reads out each thought and asks the child if they wish to talk about it – this includes their own and other foster children’s thoughts. Sometimes the child will say that the thought has gone (the simple process of writing it down and putting it in a box is sufficient for many children to gain control over their emotions). At other times, a serious disclosure may be forthcoming. It is also helpful for the foster carer to have posted notes about any good things she or he may have noticed as this ends the reading of thoughts on a positive note. The thoughts are then placed in a bag, sealed and put away safely. Like any excess items stored in the attic, it may be years before anyone needs to look at them again.

**Gaining control over sexually concerning behaviours**

Learning that strong emotions happen but are not necessarily uncontrollable helps children have confidence in their ability to develop strategies for handling their sexually concerning behaviour. With very young children, *I Can Do* cards (www.innovativeresources.org) are useful in identifying skills and resources. These consist of a pack of 24 friendly monster cards especially designed to reinforce learning about safety; for example, *I Can Say No, I Can Tell Others, I Can Ask for Help, I Can Keep Safe*. Talking about these friendly monsters also opens up the conversation for discussion about scary monsters. For instance, Nicholas was able to disclose fears about members of his birth family by developing a story of how Scary Vincent and the Other Bad Men (his choice of names) were chased off by all the animals in the zoo. Equally, *Mr Men* figures can be adapted to include good and bad characters about whom the child may want to talk as they begin to separate from the bad characters and become friendlier with the good ones.

With older children, cartooning can be used to make it easier for the child to develop a clear vision and sense of control over their future behaviour. Here a large sheet of paper is divided into six squares and the child is invited to draw the problem in the first square, how they would rather be in the second, a ‘mighty helper’ in the third, what a slipback might look like in the fourth, how it is handled in the fifth and how success will be celebrated in the sixth (Berg and Steiner, 2003). Thirteen-year-old Jade found it impossible to talk about the ‘bottom games’ she played with toddlers every time her foster mum’s eye was not on her but she found cartooning fun. Her problem square depicted a stick drawing of a sad child, whereas her solution square was more developed. She drew herself wearing jewellery and carrying a handbag, depicting when she was ‘more grown up and not doing “that stuff” anymore’, and her powerful helper was a beautiful angel called Cindy. After this, instead of showing shock and anger when she caught Jade out in sexualised behaviour, her foster carer began asking in a puzzled sort of way, ‘Where is Cindy? I thought she was supposed to be helping you?’ Very soon, Cindy was around so much that the foster carer was able to buy Jade her first ‘grown-up’ necklace.

Teenagers pose more of a problem for foster carers as they have more opportunities to exhibit sexualised behaviour away from the vigilant atmosphere of the foster home. Here, a more tangential approach is helpful and work is undertaken to increase the young person’s respectfulness, responsibility-taking and truthfulness. In order to avoid giving a moral lecture (which the young person is likely to evade), we use games to make discussion of respectful and responsible behaviours more understandable and acceptable. For example, the board game *Man’s World* involves discussion of sexual topics and moral dilemmas in a relaxed way (for more details, see Myers and Milner, 2007, Chapter 4). *Respect and Responsibility Bingo* (www.innovativeresources.org) is not only fun for the whole family to
play but also breaks down complex concepts into easily comprehensible items of behaviour which the players have to evidence before they can claim a square. Games also have the advantage that the foster family can continue playing them after the therapist has gone.

The way in which these techniques can be woven together to facilitate finding a solution to a serious slipback on the part of 13-year-old David is illustrated by the inclusion below of an extract from the notes shared with the family after session seven. David’s permanent placement was threatened after his prospective foster carer, Christine, found that he had taken her and her ten-year-old daughter’s knickers and stuffed them behind the bathroom washbasin during a weekend visit. As they were stained, it was obvious that David had masturbated over them. The session described below included David, the carers, Christine and Ron, and their two children, Lucy and Andrew. David was functioning academically at about seven-year level but, although steadily improving, his social skills were much more rudimentary.

On discovery, Christine had told David that she was shocked and upset and that he wouldn’t be coming to live with her if he continued to do such things. David’s face quivered and this was the first strong emotional response that David has shown. As David tends to lie about serious issues, we re-visited the earlier work on respect so that the knicker episode could be raised in the context of wider issues to do with respectfulness towards women.

Each child was asked what they had done recently that had gone well. This was elaborated (how did they do this?) and celebrated before they were asked what had not gone well. Lucy reported herself for staying out later than she had been told, Andrew for being ‘lippy’ (but not as bad as he used to be) and David for barging into people on a recent holiday in his haste to get where he was going. Christine also reminded him of the knicker episode and that knickers are private, wherever they are, as they cover private parts (reminding him of material discussed in a previous session).

Then I asked the children to draw a picture of a road with two forks – the right road to respect and the wrong road. As David has difficulty writing words, he coloured his two roads red (wrong road) and green (right road). They then were asked to give an example of respectful behaviour: Lucy said people knocking on her bedroom before entering; Andrew said giving borrowed things back, and giving them back in the condition received; and David said having manners and not barging. We then looked at how grown-ups do respect. Lucy said that mum shows respect by cooking for them, getting their clothes ready and stuff like that. Andrew said that dad shows respect by going to work and providing for them – everyday stuff and holidays. David couldn’t think of any way in which Christine and Ron show him respect so he was reminded about what they are doing to provide him with a home. I explained to the children that grown-ups show respect for children even when they are tired but that children are still learning and don’t always remember to do respect, that grown-ups have to remind them and that there are consequences for disrespectful behaviour.

They were then asked what happened when they had been disrespectful. Andrew said he got grounded or his X Box taken away, Lucy said told off or grounded and David couldn’t think of any consequences. I asked him if he knew what a sanction was and he worked out that it is what happens after disrespect (at his other foster home he got sent to his bedroom). Christine had tended to show disappointment when David was disrespectful as this works with Lucy and Andrew but this doesn’t work well with David. David agreed that a sanction for any disrespect on his part should be that he is not allowed on the computer and has to tidy up his clothes instead. The children were clear about
consequences for grown-ups who are not respectful – David made the link with his birth parents not being allowed to look after children after they had done things that were sexually disrespectful.

They each drew a Mr Man type figure of their disrespect. Andrew drew a Mr Lippy with a big mouth; Lucy drew a Mr Please Myself; and David drew a Mr Just Do It. We talked about how these Mr Men took them on the wrong road and what happened if they went down it – sanctions and lack of freedom. Then they drew a Mr Man figure to help them stay on the right road. Andrew drew a Mr Zip Gob; Lucy a Mr Watch; and David a Mr Think.

At the post-session discussion with Ron and Christine, we looked at how very hard it had been for Christine to handle the knicker episode as she was the person who had been the target. It was agreed that if David does anything else that is disrespectful to girls or women, Ron will have a brief but firm talk with him about how boys and men are expected to treat women in this family. Both Christine and Ron agreed to use the Mr Just Do It idea when talking with David about anything he is likely to lie about on the grounds that it might be easier for him to talk about disrespect in terms of winning and losing his battle with Mr Just Do It (and how Mr Think is helping). As all the children had enjoyed the right road/wrong road exercise, Ron and Christine thought that this would make conversations easier.

At the following session, David’s behaviour had improved all round. There were no problems with sexually concerning behaviour and David proudly reported that he had told no lies for a week. He had done this by using his thinking (his adaptation of Mr Think). Particularly striking was his intellectual and social progress. David was beginning to understand the concepts involved in respectfulness and truthfulness, could handle complexity and was much more open and chatty. His relationship with Ron had strengthened too; it was noticeable how they exchanged knowing smiles and were relaxed and comfortable with one another. It is important to make male carers’ roles explicit as they are especially liable to be sidelined as a result of fear of false allegations being made (Hardwick, 2005).

Putting it all together

The solution-focused therapist’s task is to help all family members find a way of talking about the sexually harmful behaviour, identify exceptions to it and build on these to develop safety. However, the children and their carer’s knowledge is the key element. Everyone’s strengths and resources are used to find a unique solution. Once these have been identified and a way found to talk about things that are difficult and shocking, the foster family becomes confident in their ability to develop an individual own safe care plan that meets everyone’s safety needs. Family rules mostly evolve naturally but, for foster children who have not experienced boundaries in their birth family, these rules have to be made explicit. At the beginning of foster care, or where the child has such a learning difficulty that compliance could be a problem, the safe care plan will depend largely on a set of externally enforced rules and sanctions (see specimen case example). Where the child has been able to develop control over their emotions and sexually concerning behaviours, the safe care plan will be unique to the foster family’s needs. For example, as well as sexual safety items, Christine and Ron’s plan included ‘ask first’, as all the children had a tendency to raid the fridge. Thus a safe care plan evolves through negotiation and explanation to fit each family’s needs and, as such, it will be one in which the foster carers have confidence. In devising the plan, foster carers discover that they do have skills which they can use to handle sexually concerning behaviour. These skills are vital in their consolidation of the work of ‘experts’ as foster carers are best placed to embed children’s new ways of
<table>
<thead>
<tr>
<th>Rule</th>
<th>Illustration</th>
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<tbody>
<tr>
<td>Bedroom and bathroom doors to be shut if you are getting dressed or washed</td>
<td><img src="image" alt="Door" /></td>
</tr>
<tr>
<td>If you are on the toilet, or in the bath remember to shut the door</td>
<td><img src="image" alt="Bath" /></td>
</tr>
<tr>
<td>PJ's/nightie and dressing gown to be worn when you come downstairs</td>
<td><img src="image" alt="Clothes" /></td>
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<tr>
<td>Only come downstairs with clothes on</td>
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<tr>
<td>If you want to talk to someone and they are in their bedroom, knock on the door first; don’t walk straight in</td>
<td><img src="image" alt="Door" /></td>
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<tr>
<td>Everyone should get dressed in their bedroom or bathroom</td>
<td><img src="image" alt="Bed" /></td>
</tr>
<tr>
<td>No play fighting</td>
<td><img src="image" alt="Play" /></td>
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<tr>
<td>We all have someone to talk to if we are not feeling safe</td>
<td><img src="image" alt="Help" /></td>
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<tr>
<td>Everyone to make a big effort to be honest with each other and mum and dad</td>
<td><img src="image" alt="Honest" /></td>
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<tr>
<td>Everyone to be in by their agreed ‘in times’</td>
<td><img src="image" alt="Clock" /></td>
</tr>
<tr>
<td>Everyone to support each other with our safe care plan</td>
<td><img src="image" alt="Help Each Other" /></td>
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<tr>
<td>Ask permission to borrow stuff from each other; be polite, calm and positive about each other</td>
<td><img src="image" alt="Help Each Other" /></td>
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being in the everyday experiences of foster family life.

References

Barnardo’s, Meeting with Respect: A pack of creative ideas and guidance for involving children and young people in meetings with parents, carers and professionals, Barkingside: Barnardo’s, The Junction, 2005


Hackett S, What Works for Children and Young People with Sexually Harmful Behaviours?, Barkingside: Barnardo’s, 2004


Hardwick L, ‘Fostering children with sexualised behaviour’, Adoption & Fostering 29:2, pp 33–43, 2005


Myers S with McLaughlin M and Warwick K, ‘The day the touching monster came: narrative and solution-focused approaches to working with children and young people with sexually inappropriate behaviour’, Journal of Educational Psychology 20, pp 76–89, 2003


Pollock S and Farmer E, ‘A hidden population: understanding the needs of sexually abused and abusing children in substitute care’, Adoption & Fostering 29:2, pp 18–32, 2005


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