

Did you know?

*lessons from the research**

- Many children with problematic sexual behavior (PSB) have not been sexually abused.
- With appropriate treatment and careful supervision, most children with PSB can live safely with other children.
- Outpatient treatment can be successful for most children with PSB.
- Most children with PSB do not continue these behaviors into adolescence and adulthood.
- Low recidivism rate (2%) found in 10-year follow-up study of youth who completed the group program from the same PSB-CBT model.

**adapted from ncsby.org, where you can learn more about problematic sexual behavior*

We offer trainings on Understanding and Responding to Children's Sexual Behaviors for professionals and community organizations.

For more information about CAC services for problematic sexual behavior or to make a referral, please contact:

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www.suffolkcac.org



CHILDREN'S ADVOCACY CENTER
of suffolk county

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PROBLEMATIC SEXUAL BEHAVIOR PROGRAM



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Healing Starts Here

While sexual exploration and play are a natural part of childhood sexual development, some children's sexual behavior indicates more than harmless curiosity and requires specialized intervention.

When sexual behaviors pose a risk to the safety or well-being of the child and other children, it is imperative for families and communities to step in and intervene through proper identification, support, treatment, and intervention.



Problematic Sexual Behavior – Cognitive Behavioral Therapy (PSB-CBT)

The CAC now utilizes the University of Oklahoma's evidence-based treatment model for Problematic Sexual Behavior (PSB-CBT). This model aims to eliminate problematic sexual behaviors and improve prosocial behavior and adjustment in children, while reducing stress and enhancing skills in parents and other caregivers.

About the program:

- Offered to school-age children (ages 7-12, approximately) and tailored to fit their needs
- Offered at no cost to families
- Transportation assistance available at no cost to families

- Includes individual sessions for child and caregiver as well as joint caregiver-child sessions
- Requires active involvement of parents or other caregivers
- Short-term outpatient community based program
- Services provided by licensed mental health clinicians
- Accepting referrals from a variety of community partners, e.g., child protective services, schools, community providers, and families themselves

Visit the CAC at: www.suffolkcac.org

The Model

Ages 7-12 years

Approximately sixteen 60-90 minute weekly sessions, for child and caregiver to address:

- Supervision and safety
- Parenting strategies
- Rules about sexual behavior and boundaries
- Affective and cognitive coping skills
- Self-control strategies
- Social skills
- Abuse prevention
- Sexual education
- Empathy and impact of behavior on others

Graduation from the program is based on child and caregiver's progress in improved behavior and skills.