## 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, mos 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.

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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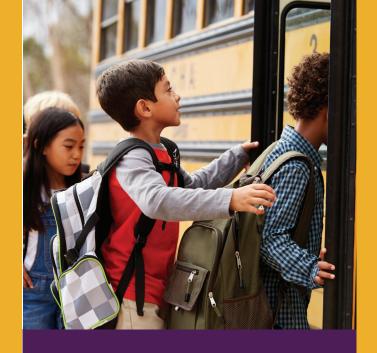
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This project was supported by the Massachusetts Office for Victim Assistance through a Victims of Crime Act of 1984 (VOCA) grant from the Office of Victims of Crime, Office of Justice Programs, US Department of Justice.



PROBLEMATIC SEXUAL BEHAVIOR PROGRAM



Healing Starts Here

<sup>\*</sup>adapted from ncsby.org, where you can learn more about problematic sexual behavior

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

## 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.