Introduction

There is growing concern among parents, educators, and child safety experts regarding children who exhibit problematic sexual behavior (PSB) and/or who sexually harm other children. In part, this concern arises from the significant number of incidents of child-on-child PSB known to authorities. For instance, in 2009 the U.S. Department of Justice reported that juveniles account for more than one-third of those known to police to have committed sexual offenses against other minors.²

More recently, Missouri officials have found child-on-child PSB to be more common than previously thought, following passage of a law in 2015 requiring all complaints of children with PSB to be reported and assessed by the state.³ Experts had anticipated about 600 cases of children with PSB per year, but within the first five months of the new law had received 2000.⁴ In England and Wales, a BBC investigation of police reports revealed that the number of reported sexual offences committed by those under-18 against other minors rose by 71% from 4,603 in 2013-14 to 7,866 in 2016-17.⁵

An Associated Press investigation of state education records and federal crime data in the U.S. has revealed 17,000 official cases of sexual assault by students in K-12 schools from the fall of 2011 to spring 2015.⁶ However, this figure does not fully capture the problem “because such attacks are greatly under-reported, some states don’t track them and those that do vary widely in how they classify and catalog sexual violence.”⁷ Further, the investigation found that sexual assaults occurring on school property are seven times more likely to be child-on-child than adult-on-child.⁸

Behind such numbers are troubling behaviors. Typically PSB involves older juveniles who use their age, physical strength/size, or positions of status or authority, to engage children who are younger or with cognitive impairments in sexual activity. However, PSB may also

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¹ The National Center on Sexual Exploitation defines children as persons who have not attained 18 years of age.
⁴ Ibid.
⁷ Ibid.
⁸ Ibid.
occur between children of similar age and young children (six and under). Child-on-child sexually problematic and/or harmful behavior includes a wide range activities such as peeping, exhibitionism, fondling, exposure to pornography, sexual harassment (including cyber-based/technology-assisted), oral, anal, and vaginal sex, and assault. It occurs in schools and playgrounds, daycare facilities, as well as in homes, churches, or other settings where children gather. It may also involve sexual behaviors between siblings and children in sibling-like relationships (e.g., step-siblings).

Importantly, there are distinctions between the kinds of normal, developmentally appropriate types of sexual play which may occur among children, and those which are problematic or harmful. Sexual play among children is characterized by curiosity about sexual body parts and behavior; it is unplanned, intermittent, involves children of similar ages, size, and developmental levels, and is agreed to by both children. It is not marked by fear, anger, strong anxiety, coercion, force, or aggression of any kind.

The research reviewed below centers on child-on-child sexual behaviors which are developmentally inappropriate. These include behaviors which cause emotional distress and physical harm, are initiated with strong feelings such as anger, or that involve manipulation, threats, abuse of power, or force of any kind.

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11 Ibid.
12 Ibid.
Research Summary

General

A meta-analysis of 59 different studies (from 1975 to 2008) comparing adolescent (12–18 years old) male sex offenders (n=3,855) to male non-sex offenders (n=13,393) found:

- Male youth who committed sex offences were more than 5 times as likely to have been sexually abused, 1.6 times more likely to have been physically abused, and significantly more likely to have experienced emotional abuse or neglect than non-sex offenders.

- Those adolescents who sexually harmed children were more often sexually abused than adolescents who sexually harmed their peers (i.e. children in similar age range).

- Adolescents who engaged in sexually harmful behavior tended to have more interpersonal problems (e.g., social skills deficits, poor social relations), especially social isolation, as well as significantly more learning problems or disabilities.

- Antisocial attitudes and beliefs about women or about sexual offending do not help explain why an adolescent specifically commits sexual rather than nonsexual offenses.

- Emotional problems such as anxiety and low self-esteem may play a role in male adolescents committing sexual offenses, more than other forms of psychopathology such as depression and neuroticism.

- Adolescents who had sexually offended were significantly more likely to have had early exposure to pornography, report higher rates of exposure to pornography, have significantly more atypical sexual fantasies, behaviors or interests (sex with animals, incest, pedophilia, etc.), and were more often diagnosed with a paraphilia than non-sex offenders. The researchers suggested that promising directions for further research included the roles of exposure to sexual violence, exposure to sex or pornography more generally, and atypical sexual interests.13

A prospective study compared 2,759 Australian child sexual abuse (CSA) victims (80% female/20% male) who experienced contact offenses between the years 1964–1995 with a comparison group of 2,677 people matched with CSA victims for gender and age. The average age victims were examined for abuse was 10 years old, and the average age at follow up was 36 years old. The follow up period from abuse to data collection ranged from 14-45 years. The study revealed:

- Sixty-three percent of the CSA cases included penetration (65% of females, 55% of males). Males were more likely than females to experience extra-familial abuse.

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(64% to 48%). Ninety-four percent were sexually abused by one offender; 62% on more than one occasion.

- The majority of CSA victims (76%) did not go on to offend, however CSA victims, whether male or female, were nearly 5 times more likely to be charged with any offense (e.g., theft, property damage, stalking, etc.) compared to the general population. Nearly one-quarter (24%) of CSA victims had a recorded offense, compared with only 6% of their control peers.

- With the exception of homicide and prostitution, CSA male victims were significantly more likely than their abused female counterparts to have been charged with all types of offenses. When more specifically considering sexual offending, significantly more (1 of 20 or 5%) male CSA victims were subsequently convicted of a sexual offense compared to the male control group (6 out of 1,000 or .06%).

- Boys who had been abused at the age 12 or older were 3.33 times more likely to sexually offend than those victimized under the age of 12. Nearly 1 in 10 (9%) boys who had been victimized at age 12 years or older were subsequently found to have been convicted of a sexual offense.

- Not only were CSA victims more likely to commit offenses, but they were also more likely to become victims of additional crimes. CSA cases were victims of crime more often than the non-abused cohort for all offenses except theft and bad public behavior. The study found that victims of CSA were five times more likely to be subsequent victims of sexual offenses, four times more likely to receive threats of violence, and three times more likely to experience violent offenses than the comparison group.

- In summary, while the majority of CSA victims do not go on to offend, CSA victims are at a disproportionately higher risk to commit or experience a range of offenses, particularly those of a sexual or violent nature. Males who experience serious sexual abuse as adolescents form “a high-risk group” for subsequent committal of sexual offenses requiring active intervention and follow up.  

A quantitative study which analyzed 700 case records of children and youth, ranging in age from 5 to 18 years old,* who exhibited sexually abusive behavior gathered from nine different UK service agencies from 1992-2000, found:

- 97% of the abusers were male. Fifty-four percent of all referrals were of youth aged 14 to 16. Fifty-one percent of the sample abused girls, 19% abused boys, and one-third (30%) abused both girls and boys. Most of the abusers knew their victims, and 25% of the young abusers were related to their victims.

38% of the abusers had learning disabilities (in cases where information was available). The researchers warned against thinking that learning disabled children have a

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greater propensity for sexual misconduct, but rather explained that they are watched more closely by teachers, parents, and other students, making it easier to notice and report their behavioral issues to professionals. It was also suggested that learning disabled children may be unaware or indifferent to the social taboos surrounding sexual behaviors.

- 66% of the sample experienced some form of previous trauma (physical abuse, emotional abuse, sexual abuse, neglect, parental rejection, family break-down, domestic violence, parental drug and alcohol abuse, etc.). It was possible to assess previous sexual victimization in 599 cases. Of these cases, 31% of children and youth with problematic sexual behavior were sexually victimized earlier in their childhood and professionals strongly suspected sexual victimization in another 19% of the cases.

- The primary sexually problematic behavior children exhibited (of cases where information was known)* was touching others’ genitals (84%), followed by penetration or attempted penetration (52%), non-contact sexual behaviors (50%), and sexual abuse involving physical violence (18%).

An exploratory study of 34 boys referred to an agency in Scotland working with children who display harmful sexual behavior analyzed the differences between those who abuse in the family, in the community, or both. The study collected information from case files in relation to four main areas: child characteristics, victim characteristics, characteristics of abusive behavior (location, sexual acts, motivating factors), and family characteristics. The boys were all separated into four main groups:

- Boys who sexually abused only a sibling (full or half; referred to as the “sibling group”; n=10)
- Boys who sexually abused a child from only within the community (referred to as “community group”; n=12)
- Boys who sexually abused both a sibling and child/children in the community (the “mixed group”; n=7)
- Boys whose sexual abuse was of non-sibling family members only (the “family group”; n=5)

Analysis Concluded:

- Among those that abused in both family and community settings (the mixed group n=7) all went from abusing in family settings to abusing in the community, but not the other way around.
- All seven boys of the mixed group reported having experienced significantly higher physical, sexual, and emotional abuse than boys in the other three groups. The mixed group also experienced higher levels of neglect and living with domestic abuse than the other groups.

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15 Simon Hackett, Helen Masson, Myles Balfe, and Josie Phillips, “Individual, Family and Abuse Characteristics of 700 British Child and Adolescent Sexual Abusers,” Child Abuse Review 22, (2013): 232-245. *Note: One percent of the cases involved mentally disabled individuals aged 18–28 year old; the total number of known cases with information concerning the type of problematic sexual behavior was not reported.
The age of onset of sexually abusive behavior ranged from 6 to 16 years across the 34 boys. For boys of the mixed group age of onset (8.7 years-old) was significantly lower than the sibling (13), community (13.1) and family (12.6) groups. The mean age of sibling victims, community, mixed, and family groups were 7.4, 8.1, 6.3, and 6.4 years.

The prevailing motivation for abuse among the sibling group (7 out of 10) was “jealous anger”, defined as “harbored resentful, rivalrous and angry feelings towards the victim or someone else.” This was not present in the other three groups.

All but one of the boys in the study had parents who were separated.

A full range of offenses (oral sex, rape, sodomy, digital penetration, exposure) was present in all four groups.

In this study, brother-sister incest initiated by the brother was the most common form of sibling sexual abuse pairing.

Researchers noted that boys in the mixed group represented a unique minority characterized by higher levels of experienced abuse and earlier onset of sexually abusing others. In light of the pattern of sexual abuse among boys in the mixed group, in which all boys in the group first abused a sibling, researchers suggest that those working with children who have sexually abused a child within the community consider conducting a child protective investigation to determine if younger siblings were previously abused. Further, researchers suggested that boys who abuse only a sibling may be responding to the particular dynamics of their sibling relationship (i.e. jealous anger), whereas boys who abuse across different settings may be responding more to their own traumatic experiences.16

Females with Harmful Sexual Behavior

From a sample of 700 young people referred to nine U.K. service providers for children with PSB in the 1990s, the subsample of females (24) was analyzed and compared to the remaining males (676). Females constituted 3% of the 700 total cases studied. The study reported:

In 22 cases of females where the data was available, the youngest age of referral was 8 years old, the oldest being 16 years old. The average age of referral for the girls was 12 years old, whereas the average referral age for males was 14 years old; ranging in ages 5-18. The researches explained that it is important to note that age of referral does not necessarily equate with the age of first onset of problematic sexual behavior.

- Of the 22 female cases where data was available, 36% (n=8) exhibited some kind of learning difficulty or disability, which is comparable to the 38% of the male sample.

- In 21 of 24 cases it was possible to detect previous sexual victimization of females with problematic sexual behavior. Among these cases, 33% showed solid evidence of sexual abuse, and in an additional 29% there were strong suspicions, but no documented proof. The remaining 38% showed no evidence or suspicion of sexual victimization.

- Compared to the male sample, females had higher rates of combined proven or suspected previous sexual abuse (62% to 50%).

- Compared to the females, males exhibited higher rates of problematic sexual behavior in every category: non-contact sexual behaviors (50% to 30%), penetration or attempted penetration (52% to 24%), and sexual violence or physical force (18% to 10%).

- The most common problematic sexual behavior exhibited among females (22 cases with sufficient data) was touching another’s genitals (77%); 84% of males reported the same problematic sexual behavior.

- There was data about the number of known victims for only 20 of the 24 female cases. Of these, 55% had only one known victim, 20% had two, 15% had three, and 10% had four victims. None had more than four. Ninety percent of the females, compared to 77% of the male sample, had three or less known victims. Overall, the females had considerably fewer victims than the males.

- The males and females in the samples exhibited differences in the sex and relationship to their victims. Thirty-six percent of the females abused males only compared to the 19% of males who abused male victims only, 23% of females abused females only whereas 52% of males acted on female only victims. The female subgroup had a higher rate of abusing both male and female victims compared to the male sample (41% to 29%).

- The female group also had slightly higher rates of abusing victims within the family than the male sample (29% to 25%). Fifty percent of the females compared to 53% of males abused others outside the family. The two groups had almost identical percentages when it came to abusing victims both within and outside of the family (21% and 22%).

- The study concluded that females constitute a very small proportion of the total population of children and youth with problematic sexual behavior. It also found that females with problematic sexual behavior were more likely to: 1) be referred at a younger age, 2) much less likely to have any criminal convictions at the point of referral, 3) have higher rates of sexual victimization in their histories, and 4) have fewer victims drawn from a more narrow age range” than the male group.
In-depth retrospective interviews with two of the sample females that had both experienced previous sexual victimization, showed that while it is hard to know why they expressed their distress in a sexually abusive way, “the chronicity of their own sexual victimization and the coexistence of multiple traumas alongside this victimization may be a factor.” Additionally, researchers reported that “poorer outcomes seem associated with poor body image and poor health; relationship failures; chaotic or unstable living conditions and drug and alcohol misuse.”

To explore the prevalence of sexually abusive behaviors among adolescent females, a study reviewed case data of 258 females referred for anti-social behaviors and mental health needs to an outpatient Forensic Adolescent Consultation and Treatment Service (FACTS) in the UK from 1997–2007. Referrals to the FACTS could be for a wide range of antisocial and high-risk behaviors (e.g., theft, criminal damage, threatening behavior, cruelty to animals, self-harm, substance abuse, etc.), as well as inappropriate or abusive sexual behaviors (e.g., prostitution, indecent exposure, inciting a child to engage in sexual behavior, etc.). Average age at the time of assessment was 14.7 years old. The study reported:

- Of the total sample of females, one in five (n=54/21%) had a history of inappropriate sexualized behaviors, and one in 10 (n=31/12%) exhibited sexually abusive behavior. Of those with sexually abuse behavior, only five were referred for assessment and services because of their sexually abusive behavior.

- Of the 31 identified as having sexually abusive behaviors, 22 (71%) raped or indecently assaulted a victim; 6 (19%) indecently exposed themselves; and another 6 (19%) incited a child to engage in sexual behavior. Ninety percent (n=28) of the abusers knew their victim beforehand and 84% (n=26) performed the sexually abusive behavior alone.

- Sexually abusive females were more likely to have a diagnosis of attachment disorder, ADHD, and autistic spectrum disorder/pervasive development disorder. Additionally, they were nearly 3.5 times more likely to have learning difficulties than their non-sexually abusive peers.

- Those with sexually abusive behaviors were also significantly more likely to have had a history of sexual abuse than their peers (87% to 55%); this highlights the fact that not all who have been victims of sexual abuse will go on to abuse others.

- Those with sexually abusive behaviors had significantly fewer non-sexual offending behaviors when compared to non-sexually abusive delinquent peers, suggesting that females with sexually abusive behaviors are a unique cluster of offending youth.


Sibling Sexual Abuse

To provide aggregate, national-level sibling sexual abuse data, researchers extracted information from the National Incident-Based Reporting System (NIBRS) collected during the period of 2000-2007. The NIBRS is a part of the Uniform Crime Reports program which collects case information reported to the FBI. The analysis revealed:

- 13,013 cases of sibling sexual abuse from 2000-2007. The majority of sibling sexual abuse initiators were male (92%); the relationship dyadic in 67% of cases being male-female sibling sexual abuse and 25% male-on-male abuse.

- 68% of those who committed the offenses were over the age of 12, the average age being 14 years old and in 95% of the cases the siblings were older than their victims (average age gap of 5.5 years).

- 82% of the victims were under the age of 13 at the time of their abuse, with a mean age of 8 years old.

- The majority of the victims were female (71%).

- Stepsiblings committed 27% of the incidents; 73% involved biologically related siblings.

- Most of the cases involved a single perpetrator and single victim (77%), but 13% of the sample involved multiple victims.

- Most incidents occurred in the victim’s home (94%).

- The types of sibling sexual abuse measured included forcible fondling (55%), rape (23%), anal rape (17%), and sexual assault with an object (5%).

- The majority of incidents resulted in no physical injury to the victim, but female victims were nearly one and a half times more likely to report injury than male victims.

- The study proposed that “the deleterious effects and consequences of sibling sexual abuse may be far more dramatic than many give credit.” Researchers expressed the importance of shifting “away from the desensitized and destructive ‘just playing doctor’ and ‘kids-will-be-kids’ mantras,” toward recognizing the importance of developing preventative methods to curb sibling sexual abuse.19

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In a study that analyzed 166 cases of males aged 13-17 who were referred to a residential sex offender program in the Midwestern United States from 1994-2005, the cases were divided into two groups: sibling perpetrator (biological, half, step, foster, or adopted; n=100) or non-sibling (n=66). According to the study:

- The average age at admission was 15 years old, while the average age of first known offense was 10 years old with an average of 6-7 years difference between victim and abuser.
- The majority of victims in both groups were female.
- Compared to non-sibling abusers, sibling abusers had higher rates of genital penetration (43% to 31%), anal penetration (43% to 25%), and oral-genital contact (52% to 47%).
- The non-sibling group had higher rates of fondling (65% to 62%), exhibitionism (19% to 11%) and digital penetration (15% to 12%) than those who sexually abused their siblings.
- Compared to those in the non-sibling group, sibling abusers had higher rates of previous sexual abuse (58% to 35%), physical abuse (49.5% to 44.6%), neglect (33% to 21%), domestic violence exposure (58% to 20%) and had higher rates of pornography exposure (58% to 24%).
- The study concluded that, “Exposure to domestic violence and a sexualized home environment (in this case, exposure to pornography and/or child sexual abuse) may render adolescents particularly at risk for sexual violence.” It also suggested that “exposure to pornography may negatively impact the sibling-victim in addition to the sibling-offender,” and “early exposure to pornography may impact a child’s view of what is normative and impair the ability to avoid, deter, or negotiate from dangerous situations . . . .”

A retrospective study conducted in Portugal analyzed 68 forensic medical examination (FME) reports from 2004 to 2011 of alleged sibling incest victims under 18 years old. Victims were 74% female and 26% male. The average age of victims for both genders was 8.7 years old. Sixty-seven of the 68 alleged abusers (99%) were male with an average age of 16 years-old (figure derived from information available in 54 out of 68 cases). “Siblings” included full biological siblings, as well as sibling-like relationships of half sibling, step-sibling, son of the host family, or son of the stepmother or stepfather.

The objective of the study was to “contribute to an earlier and ever-improving detection of sibling incest through the characterization of the alleged victim, abuser, sexual abuse, forensic medical examination, and judicial outcomes.”

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56% of abuse cases took place within the victim and/or abuser’s home.

24% of cases reported physical violence and verbal threats.

34% of sexual abuse practices consisted in vaginal, anal, and/or oral penetration, 24% of cases consisted of explicit fondling, and 12% of cases consisted of attempts of vaginal, anal, and/or oral penetration.

12% of cases suggested signs of internal injury including lacerations of the hymen, scars and/or anal fissures.

31% of abuse cases were first suspected by a family member(s), and 19% of cases were reported by a family member. In 32% of the cases the suspicion was raised due to disclosure of the abuse by the victim, and in two cases suspicion was raised due to the disclosure of the abuse by the abuser. Health care facilities represented the setting in which 22% of cases were first identified, and 9% of cases were first identified by child protective services.

91% of the forensic medical examination (FME reports) were performed more than 72 hours after the last contact of sexual abuse (this percentage includes the 59% of cases where time elapsed was unknown). Several factors legitimize a late detection of these cases including the victim’s young age, the close proximity between the victim and abuser (physical and emotional), the use of verbal threats and physical violence, and that the abuse is being committed at the victim’s and/or abuser’s home. According to the American Academy of Pediatrics, the search for biological evidence should be made within the last 72 hours of sexual abuse as to not compromise the quality of the conclusions (thus making prosecution more attainable).²¹

A study of sibling sexual abuse surveyed undergraduate and graduate college students (aged 15–59) enrolled at a public urban university in the mid-south U.S. Researchers evaluated 362 surveys (return rate 94.1%); of those, 87 met study criteria: being individuals who reported experiencing sibling sexual abuse, committing sibling sexual abuse, or both.

The study found a correlation between experiencing and committing sibling sexual abuse as a child and lower self-esteem.

The results suggested that the more experience one has with sibling sexual abuse as a child, the lower self-esteem one is likely to have as an adult. The researchers expressed that, “The normalization of sibling sexual abuse by the family structure and society creates a layer of shame and complication that can have devastating results for both the survivor and offender.”²²

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Trauma and Problematic Sexual Behavior

In a study of 472 male youth and young adults (aged 12-20/avg. 16 years) with criminal offenses from six residential facilities, researchers evaluated their self-reported childhood traumatic experiences. The analysis compared three groups: sexually victimized youth/young adults with sexual offenses (n=143), nonsexually victimized youth/young adults with sexual offenses (n=177), and nonsexually victimized youth/young adults with general criminal offenses (e.g., felony assault, felony theft, general delinquency, etc.) (n=152). Results revealed that:

- Sexually victimized youth/young adults with sex offenses reported significantly greater levels of abuse across all five types (i.e., emotional abuse, emotional neglect, physical abuse, physical neglect, sexual abuse) than the other two groups.

- In 20 out of 23 analyses sexually victimized youth/young adults had the “worst” results (highest mean scale scores), followed by nonsexually victimized youth/young adults with sexual offenses, and general offending youth.

- Youth and young adults who were either sexually victimized or nonsexually victimized persons with sexual offenses were more introverted, inhibited, doleful, and self-demeaning than general offenders who had not been sexually victimized.

- Youth and young adults who were sexually victimized themselves participated more in felony level assault and theft compared to youth/young adults with sexual or general criminal offenses who had not been sexually victimized.

- Those persons who were sexually victimized and who had committed sexual offenses showed greater developmental antecedents and behavioral challenges compared to nonsexually victimized youth/young adults with criminal offenses. Developmental antecedents for the sexually victimized group included trauma, family characteristics, early exposure to pornography, and personality disturbances; behavioral challenges included characteristics of sexual aggression, sexual arousal, pornography use, and other nonsexual criminal behavior.

The researchers inferred through these findings that youth and young adults who had been sexually victimized and also sexually offended may need different resources and treatment options (e.g., addressing trauma, history of sexual victimization, different resource allocation, different testing protocols, etc.) than those who have not been sexually victimized themselves. They suggested that “trauma is a strong and salient variable in understanding the differences between groups . . . .”

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Pornography

A 36-month longitudinal study published in 2011 surveyed 1,588 youth (ages 10-15 years old) about their exposure to X-rated material and linkages to sexually aggressive behavior. Participants were 49% male, 51% female, and an average of 12.6 years old. The survey consisted of questions about their exposure to X-rated material, the medium of exposure (online, magazine, etc.), and sexual behaviors the youth engaged in. Results reported:

- Exposure to pornography was relatively common with 23% of youth reporting intentional exposure to X-rated material. The researchers noted that prevalence rates were likely underestimates of actual behaviors.

- Youth who reported experiencing frequent online or text messaging sexual victimization were 32 times more likely to report engaging in sexually aggressive behavior compared to non-victimized peers.

- Youth who reported intentional exposure to violent X-rated material over time were nearly six times more likely than those who did not consume X-rated material to self-report sexually aggressive behavior. This association remained significant even after controlling for other factors that may contribute to sexually aggressive behavior (e.g., sexual aggression victimization, alcohol and drug use, witnessing family violence, and general aggressive behavior). The study hypothesized that “viewing pornography that portrays sexual aggression as rewarding may reinforce an individual’s own proclivity toward sexually aggressive behavior.”

- Boys and the girls who report consumption of violent X-rated material were equally likely to report sexually aggressive behavior. Girls and boys were more than five times more likely to exhibit sexually aggressive behavior if violent X-rated material consumption was reported. The researchers suggested that X-rated material may have a similar effect regardless of sex and that studies examining sexual violence perpetration among youth should ask both boys and girls questions about perpetration as well as victimization experiences.

A literature review of 57 studies investigating pornography use among adolescents, identified 21 studies which examined adolescents’ sexual attitudes and behaviors towards sex in relation to their pornography use. The review found that intentions to consume pornography have been primarily linked to a perceived normalizing attitude considering pornography and a significant impact to adolescents’ sexual attitudes and sexual behaviors. “Specifically, longitudinal and cross-sectional studies using Chinese, United States, Taiwanese and Dutch samples showed that early exposure to pornography predicted more permissive sexual attitudes, sexual harassment perpetration, a range of sexual behaviors in females and sexual preoccupation and later sexual experimentation in males.”

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**Pornography-Inspired Sexual Ideation, Desensitization, and Escalation:** A study of 4,026 high school seniors (47% boys; 53% girls) in Sweden found that the 97.8% of boys had at some time during their childhood viewed pornographic material. Among males, 29.6% consumed pornography some time each month, 28.6% sometime each week, and 10.5% more or less daily. Frequent users of pornography were defined as daily users. Nearly 70% of those who frequently used pornography reported that pornography made them want to try out what they had seen compared to 42% of boys in a reference group. Frequent users of pornography viewed all forms of pornography more often, especially advanced or more deviant forms of pornography including violence and sexual abuse of children and animals.

A UK survey of 994 adolescents (52% male; 47% female; 1% identified as other) found that 56% of boys and 40% of girls had been exposed to Internet pornography. Of those who had seen pornography 53% of boys agreed that pornography is realistic compared to 39% of girls. Additionally, 44% of males aged 11–16 who viewed pornography reported that online pornography gave them ideas about the type of sex they wanted to try. Researchers also observed a desensitizing effect, noting that rates of curiosity, shock, and confusion dropped with repeated viewing.

**Increased Likelihood of Selling and Buying Sex:** Male high schools seniors who were frequent users of pornography were significantly more likely to have sold (7.0% vs. 1.2%) and bought sex (7.7% vs. 1.5%) than other males of the same age.

**Increased Female Sexual Victimization:** A study of 14- to 19-year-olds found that females who watched pornographic videos were at significantly greater likelihood of being victims of sexual harassment or sexual assault.

**Sexual Uncertainty and Casual Sexual Exploration:** More frequent use of sexually explicit Internet material is shown to foster greater sexual uncertainty in the formation of sexual beliefs and values, as well as a shift away from sexual permissiveness with affection to attitudes supportive of uncommitted sexual exploration.

**Sending Sexually Explicit Images:** A survey of 4,564 adolescents aged 14–17 in five European countries found that viewing Internet pornography is significantly associated with an increased probability of having sent sexual images and messages (sexting) among boys. A separate survey of 617 college freshman found that 30% of

27 Ibid.
29 Svedin, ibid.
participants sent nude pictures at some time during high school; 45% had received nude pictures on their cell phones. The most important motivation for sexting was coercion such as blackmail or threats. About half of all sexting may be coercive.33

**Prevention Strategies**

In a qualitative study of children with harmful sexual behavior, 14 young people aged 16-21 years old participated in one-hour, semi-structured interviews. The participants were past clients of a government-funded treatment program for youth in Victoria, Australia. Six treatment-providing staff members were also interviewed. From the study:

- Analysis of the responses revealed three possible opportunities for harmful sexual behavior prevention:
  1) reform of sexuality education;
  2) redress of their own experiences of victimization perpetrated by adults (e.g., emotional abuse or neglect, intimate partner violence in the home, childhood sexual abuse); and
  3) addressing pornography exposure.

- 71% (n=10) of young people agreed that the sexuality education provided to them was not helpful. They expressed that the messages needed to be given before puberty and that the content should specifically address sexually abusive behaviors. Most received sex-ed around the age of 16, but multiple youth started their problematic sexual behavior at age 10 or 11. As one male participant put it, “… between the ages of 11 and 14, they’re usually the people who are committing the crime per se and it’s usually a sibling or someone very close to them. They do teach all that sort of stuff, but that’s when you’re like 15-16 and by that stage you’re already past [the harmful sexual behavior].”

- 92% (n=13) of youth reported experiences of some kind of abuse in their childhoods. Twenty-one percent (n=3) were sexually abused in childhood, another 21% experienced physical abuse. About 36% (n=5) of young people experienced neglect or some form of emotional abuse. One young person (7%) was sexually, physically, and emotionally abused.

- 35% (n=5) of the youth expressed that their harmful sexual behavior toward siblings was triggered by feelings of distress and anger at perceived parental favoritism of the sibling they sexually harmed. One participant spoke about his acting out as a way to attempt to understand what the person who had sexually abused him years earlier was thinking: “I didn’t know, firstly, why it happened to me, especially not the boy doing it to me. . . . So I thought that if I’d try it myself, what was he thinking when he’d done it to me [would become clear].”

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86% (n=12) of youth reported being exposed to pornography and 21% (n=3) described pornography as one of the factors that triggered their harmful sexual behavior. One young person told how he was introduced to pornography at age 11 at school and started to view it at home when his parents were gone. Eventually, he decided to try out what he was learning on his sister, “I didn’t really watch [pornography] when my sister was around, usually at that point my head was thinking let’s try what I’ve seen. Then, so as well as the pornography and that sense of power, they just pretty much added together and then caused [my harmful sexual behavior].”

Another boy expressed that watching pornography at his grandmother’s house and discussing it with his cousin lead him to later sexually abuse his cousin.

Workers also agreed that pornography was a factor in the harmful sexual behavior exhibited by these, and other, youth. One worker said: “So from a young age they’ve accessed pornography . . . and they’re exposed to this idea that sex and aggression is linked and they’re exposed to these ideas that you don’t necessarily need consent, and that ‘no’ might mean ‘try harder.’”

The study suggested that the issue of pornography is spiraling out of the ability of individuals and families to control and that there is “merit in government taking an active role in holding industry to account for the harms of pornography against children and young people.” Specifically, the researchers recommended government regulation of pornography and telecommunication industries, as well as an adjustment of sexually abusive treatment models to take pornography into account.34

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