Whether you have spoken to your child about sex already or not, you may need to again. After sexual abuse or trauma, **kids of all ages can develop confusion, behaviors, and attitudes about sex that are harmful to them and others**.

**If you *have not* spoken to them about sex before**

Unless your child is under the age of five or six, you should consider talking to your child about their body. It’s likely much earlier than you hoped or planned to speak to your child about sex, but abused children often develop mental and physical health issues as a result of sexual trauma.

Age-appropriate discussions are advised, as sexually abused children can appear to be more mature (due to their survival instincts and self-protection behaviors) than they actually are. If the child does not want to discuss the “birds and the bees” with you, do not force the conversation. Instead, explain:

* Their body is theirs and they are in control of who touches them—sexually or not—such as a hug from you or a hug from a classmate.
* For teens, the need for a condom to avoid pregnancy and diseases, and where to get them.
* Their history does not change or hinder their ability to have a family.
* How to say no, and for teens who are possibly sexually active, that they can change their mind during intercourse.

**If you *have* spoken to them about sex before**

For older kids and teens, the boundaries they may have thought they understood about sex, touching, permission, and intimacy are warped after sexual abuse.

The youth in your care need to learn or re-learn appropriate boundaries in their relationship with you and others. A hug from you is different than a hug from a classmate, for instance. Demonstrate healthy behaviors and remind them they are in control of their bodies, and that self-control is important, too.

You or someone you trust—like a physician with your permission—should talk to your child about:

* Sexualized behaviors such as how to dress.
* Reproductive health and how their history does not impact or change their ability to have a family now or in the future.
* Excessive masturbation, touching of their genitals, or touching other’s bodies in inappropriate ways.
* Their worth and value as a person is not less than it was before their trauma.

Trust is the key to the child’s future willingness to listen to you and believe your viewpoint as their adult caregiver. A sexually abused child has an experience of a *violation of trust* most likely by an adult. Acquiring trust from any adult again may take time. Be patient, allow trust to grow, and pay attention to your own psychological well-being so you can remain a positive role model for the children entrusted to your care.

*For more, see hyper-sexualization and hypo-sexualization in abused youth.*