

CARSON AIM Model 2016 Assessment Consultation Therapy

Checklist for evaluating sexual behaviour – children & young people with special needs

This checklist can help staff in educational settings make decisions about the sexual behaviour of a specific child or young person with special needs. It is adapted from the AIM Project guidance document produced by Carol Carson.

1. Type Of sexual behaviour

Healthy	Complex to define due to nature of learning difficulty and gap between chronological and developmental age / stage
Problematic	Behaviours that are self-directed e.g. self-stimulation, compulsive masturbation, indiscriminate arousal. Behaviour includes non-penetrative contact with young people targeted
Abusive	High level of compulsivity, fetish behaviour, frequent use of internet to obtain sexual images. Use of force / violence to secure compliance. Previous patterns of sexually aggressive behaviours

2. Context of behaviour

Healthy	Mutual, both parties free to engage and disengage
Problematic	Behaviour infrequent or isolated incident. Behaviour self-directed. Behaviour restricted to a specific setting
Abusive	Behaviour is planned or secretive; there are elements of threat, force or coercion. Previous concerns or convictions for sexual behaviour

3. Young Person's response

Healthy	Happy, comfortable, perhaps curious; may be embarrassed if found by adults
Problematic	Embarrassment or shame related behaviour. Is able to understand and retain the reasons why others feel the behaviour is problematic or abusive. Experiences consequences as significant or has some degree of awareness of consequences. Appears highly anxious or confused as to sexual development and/or sexual boundaries
Abusive	Unclear as to the consequences of sexual behaviour, or the consequences appear to have little meaning for them. Reject concerns expressed

4. Response of others

Healthy	Happy, comfortable, perhaps curious; may be embarrassed if found by adults
Problematic	Uncomfortable or irritated, but not fearful or anxious. Feel able to tell someone
Abusive	Uncomfortable, fearful, anxious, avoidant of the young person

5. Relationship between the young people

Healthy	There should be no significant differences in age or development which should suggest there is a power imbalance
Problematic	One or two particular young people targeted. Young person predominantly associates with children three or more years younger
Abusive	Evidence of targeting on the basis of perceived vulnerability. Clear power differences in the relationship. Young person has poor social skills or deficit in intimacy skills

6. Persistence of the behaviour

Healthy	Healthy interest in sexual behaviour, but it is not the sole focus of interest in the young person's life
Problematic	Responds to complaints by stopping or changing behaviour. Intervention has some impact by behaviours may continue
Abusive	Evidence of a high level of sexual compulsivity. Behaviours have persisted despite significant negative consequences

7. Other behavioural problems

Healthy	No other behavioural problems, healthy peer relationships
Problematic	No significant history of behavioural problems, generally positive relationships with peers. Access to others is well supervised. OR, young person is isolated in the community or has a very restricted lifestyle. Access to others is poorly supervised
Abusive	Concurrent diagnosis of significant mental health problems. Pattern of problematic sexual behaviours emerging in early childhood and continuing into adolescence. Viewed negatively in community due to sexual behaviours. History of fire setting. Long standing history of severely problematic or challenging behaviours

8. Background information known

Healthy	No significant family history, Parents have a positive view of young person's developing sexuality. Positive attachments with parents and carers. Young person has at least one positive friendship. Young person has access to social and leisure pursuits. Young person has access to appropriate sex education
Problematic	Family anxious about young person's developing sexuality and have inappropriate concerns. Family experiencing high levels of stress. Siblings have experienced sexual abuse
Abusive	Young person has experience sexual, physical or emotional abuse or neglect. Violence in the household. Members of the family, including siblings, have a history of sexual offending. Poor or distorted sexual boundaries in the family. Patterns of discontinuity of care / poor attachments.