Grooming...It is Not Activities of Daily Living!
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Situation

Healthcare Professionals are less likely to identify “grooming behaviors” and potentially miss the signs with vulnerable patients.

There is a gap in nursing knowledge regarding behaviors exhibited by pedophiles.

Background

Grooming is a term that describes how a predator gains trust with children and their caregivers in order to gain access to sexually abuse a child. In collaboration with the Seattle Children’s Hospital Protection Program, Nursing Professional Development and Learning and Organizational Effectiveness embarked on a two year journey to identify methods to train all staff and providers so that they could protect patients from this highly under-reported behavior. The goal was to strengthen and increase protection from potential patient molestation by equipping staff with education and tools to recognize the signs of grooming and take appropriate measures to prevent these devastating incidents.

Problem

Anyone who perpetrates a sexual crime against a child is a child molester, whether they physically come in contact with the child or not. Behaviors of the child molester have a broad continuum, from directly touching victims to committing exhibitionist or voyeuristic crimes with children.

Offense Continuum

Children are more likely to be sexually exploited by someone they know than by a stranger. Men are much more likely than women to perpetrate sex crimes against children. Identifying “grooming behaviors” is the responsibility of all healthcare providers.

Grooming

Child sexual abuse usually begins with a sex offender gaining both the parents’ and the child’s trust and friendship. Once a relationship has been established, the offender will begin to test the child’s knowledge and ability to protect themselves. Sexual jokes, back rubs, “accidental” sexual touching, and hugging, often done in the presence of the parent, are utilized to “test the waters.”

As the relationship between the molester and the child grows so does the possibility of additional touching and interaction.

- Preparing the child for what is going to happen
- Gauging the child’s response and likelihood to tell
- Gauging the child’s vulnerability
- Getting the child used to intimate interactions (nudity, wrestling, rough play)
- Increasing the child’s comfort level with inappropriate behavior
- Opportunally
- Inserting themselves to “help” with caregiving
- Lies, gifts, guilt, secrets, encouraging parents to allow isolation, bribing the victim, money or services to family/victim (such as babysitting, driving)

Grooming the community:
- Volunteers at youth service organizations
- Charitable projects/organizations
- Counselors for vulnerable youth

Method

The Director of Nursing Professional Development; and the Children’s Protection Program, citing the American Academy of Pediatrics article, “Policy Statement – Protecting Children from Sexual Abuse from Health Care Providers” collaborated on an education plan and identified a need for training for all providers and nurses at Seattle Children’s Hospital. Learning and Organizational Effectiveness posted the module.

The goals were to:
- Strengthen and increase protection of patients from potential molestation
- Equip staff and providers to recognize signs of grooming and how to respond

Benchmarking:
- Five nationally known pediatric hospitals revealed no known training

Result:
- Development of an online training module provided basic tools to navigate the process of assessing and escalation concerns about potential patient sexual abuse
- Module posted on Learning Management System in 2016 for all RNs
- Post test required

Results

The online training module was completed in 2016 by 1543 RNs and 308 other healthcare providers. Currently the plan is to require this online module every other year.

2012 – Jerry Sandusky

Regarding Matt Sandusky, the adopted son of Jerry Sandusky: “Jerry Sandusky singled out the shy little boy, asking him about his family, playing with him in the pool...bringing him up to the front of the class” during Sandusky’s “Second Mile,” a children’s charitable organization. “The children slept in the Penn State dorms...they ate good food...attended nightly meetings...heady stuff for a poor child” from an abusive family situation.

Sandusky was convicted in 2012 of abusing 10 boys. To date, the Jerry Sandusky sex-abuse scandal has cost Penn State nearly a quarter billion dollars.

Case is under appeal

2015 – Earl Bradley

Earl Bradley, MD (Pediatrician in Delaware) was sentenced to 14 life sentences without parole plus 160 years for 14 counts of first degree rape for multiple counts of assault and sexual exploitation of a child.

- The Washington Post, June 1, 2015

2017 – Larry Nassar

A sports medicine MD, accused of sexually abusing gymnasts, was in court for the preliminary examination hearing to determine if he will stand trial on 15 first degree criminal sexual conduct charges. The alleged abuse occurred over 20 years. Most were minors at the time and “cloaked with innocence and trust of their youth.”

- The State News, June 22, 2017
- CBS news, January 10, 2017

Case is pending

Additional Information

Seattle Children’s Hospital Grand Rounds 4/9/15 video: “What Every Pediatrician Should Know About Pedophiles” by Carole Jenny, MD, MBA, FAAP, Seattle Children’s: https://www.youtube.com/watch?v=8LknfhQeZqI

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Recommendations

- Review Child Abuse and Neglect Policies at organization
- Understand the laws and statutes of the state
- Get help in the event that “something is not right”
  - Do not leave the child alone
  - Escalate: Raise concern to leadership
  - Contact organization protection program