

Hello, my name is Joe Falkner, and welcome to the Flexible Mind Therapy Podcast. Today, we will continue our discussion of exploitation and victimization in individuals with ASD. In our last podcast, we discussed the prevalence of sexual exploitation and victimization in the population as a whole, and the prevalence in individuals with disabilities, and finally in individuals with ASD. We also reviewed some of the risk factors that are both intrinsic and extrinsic to the individual with ASD. Today's podcast will focus on signs that an individual with ASD or other neurodevelopmental disorder has experienced sexual exploitation and victimization. We will also discuss digital risks and signs of exploitation and victimization.

During the course of these podcasts, you've probably heard me mention Dave Hingsburger, and his book *Just Say Know! Understanding and Reducing the Risk of Sexual Victimization of People with Developmental Disabilities* a number of times. Even though this was written in 1995, many of the ideas, thoughts, and suggestions still hold up very well today. As I've mentioned, he has a great deal to say in *Just Say Know!* about the risks of ableism and the prison of protection. This book also has an excellent model for discussing the signs and symptoms of victimization in individuals with developmental disabilities. This model works very well for individuals with ASD, both for those who are nonverbal and those who have excellent verbal skills.

So, let's start with the caution that Hingsburger (1995) gives us about this list of signs and symptoms. He reminds us that what we are looking for when we are observing behaviors on this list is a change from prior levels of functioning. The example that he provides is that someone who previously had no difficulty sleeping now has difficulty sleeping (such as night terrors, nightmares, or difficulty getting or remaining asleep). He also cautions that the behavioral signs themselves may not necessarily mean that the person has experienced abuse, but that they should serve as indications that further assessment or investigation is needed to determine the possible causes of the behaviors.

Hingsburger breaks the direct signs and symptoms of sexual abuse down into two major areas: Physical Evidence and Medical Signs. Physical evidence may include: difficulty in walking or sitting, torn or bloody underwear, bruises or bleeding in

the genital or anal area, and/or pain or itching in the genital area. Medical signs include: pregnancy, venereal disease, ulcers, and unexplained stomach aches.

Hingsburger (1995) breaks the behavioral signs of sexual exploitation and victimization down into four major areas: changes in behavior; changes in living skills; changes in emotional stability; and finally, changes in sexual expression. He further breaks each of these four areas down by whether the signs are: boundary-related, affected-related, or are examples of changes in socialization patterns. For a full discussion of each of these, I will refer you to Hingsburger's (1995) book. Here, I will review a list of signs in each of these areas.

1. Changes in behavior: which usually occur quickly and are an increase over prior behaviors.
  - a. Some boundary-related changes in behavior include: aggression when others enter into individual's personal boundaries; and noncompliance with activities that require personal space.
  - b. Some affect-related changes in behavior include: self-injury (possibly as a form a self-punishment); difficulty managing temper; and difficulty managing impulses (not thinking things through).
  - c. Some socialization changes in behavior include: phobic compliance (where an individual is not only overly compliant, but exhibits fear as a part of their willingness to please); and distractibility.
2. Changes in living skills: which usually occur quickly and are usually a decrease over prior skills.
  - a. Some boundary-related changes in living skills include: skill loss in identifying, maintaining, and respecting others' needs for privacy.
  - b. Some affect-related changes in living skills include: loss of living skills due to anxiety or stress causing an inability to focus or concentrate on the skill.
  - c. Some socialization changes in living skills include: loss of manners and social niceties.
3. Changes in emotional stability: which usually occurs slowly and is a decrease in emotional stability over prior levels.
  - a. Some boundary-related changes in emotional stability include: touch phobia (or an intense dislike of being touched); discomfort with eye contact; and difficulty sleeping (because they do not feel safe).

- b. Some affect-related changes in emotional stability include: loss of affect, depression, and suicide.
  - c. Some socialization changes in emotional stability include: avoidance of former close friends, family, or trusted staff. Hingsburger (1995) mentions the following possible explanations for this:
    - i. *They see the person they trust in contact with their abuser and they don't know how to judge loyalties.*
    - ii. *They are attempting to protect their friends from the abuser so they avoid them.*
    - iii. *They fear judgment and blame.*
    - iv. *They think that everyone knows and no one wants to help.*
    - v. *They fear their own resolve and think that if they spend time with someone they trust they may actually tell. They fear their abuser will make good on (their) threats.*
4. Changes in sexual expression: which usually occurs slowly and is an increase over prior levels.
- a. Some boundary-related changes in sexual expression include: exhibition of sophisticated sexual behavior; unusual sexual behaviors; talking about sexual issues in public places; and sexually assaultive behaviors.
  - b. Some affect-related changes in sexual expression include: fear reaction to sex education materials (in addition, the individual may exhibit an almost phobic reaction to the discussion of sex and sex education).
  - c. Some socialization changes in sexual expression include: making false accusations; and sexualizing non-sexual social cues.
- (Hingsburger, 1995)

It is again important to caution, according to Hingsburger (1995), that even if an individual exhibits a number of these behaviors that this doesn't mean that the individual has been abused, exploited, and/or victimized. You might ask yourself then, why review any list at all. By reviewing these things, we become sensitized to the possible changes in behavior, living skills, emotional stability, and sexual expression that may indicate that something has occurred for the individual. This sensitization also makes all of us vigilant and aware, two traits that make it difficult for perpetrators to exploit, victimize, and/or abuse others.

Now, it may be obvious from the list, that some of the signs may not be as useful for identifying exploitation or victimization for some individuals with ASD. A lack of eye contact, aggression when someone enters the individual's personal space, and self-injury, may all have other explanations related to an expression of the individual's ASD. Eye contact may be perceived as threatening or not provide the individual with ASD much meaningful information. Aggression toward others who enter the individual's personal space may be an expression of sensory difficulties. Self-injury may be a communication of underlying health issues. Still, as we mentioned earlier, we are looking for the change in behavior (an individual who formerly made eye contact with no difficulty who now avoids eye contact, or seems threatened when others try to make eye contact). This change in behavior then serves as a starting point for investigation and assessment to determine the underlying cause of the behavior change.

Edelson (2010) gives some additional signs of sexual abuse, exploitation or victimization in individuals with ASD that may be missed by others. Increases in self-stimulatory behavior, and/or in stereotypic and repetitive behaviors, may be an expression of the individual's attempt *"to cope with or make sense out of that abuse"* (Edelson, 2010). Individuals who have difficulty with communicating may become frustrated and act out as they try to communicate about the abuse, but others have difficulty understanding their communication attempts.

*"In addition to the difficulty in determining whether or not a child with autism has been sexually abused based solely on behavior, there is also the potential for behavioral signs of sexual abuse to be misattributed as signs of autism"* (Edelson, 2010). This may occur because of a process called *"diagnostic overshadowing"* where the behaviors that an individual exhibits are interpreted within solely within the context of their known diagnosis, in this case Autism. This may lead to interventions to address the symptom (the behavioral change) rather than the underlying cause (the abuse, exploitation, or victimization). It is important that we remember that a change in behavior does not necessarily signal that abuse has taken place. But, a change in behavior does signal that something has taken place, and it is important that we all remain vigilant and aware so that we can address the real causes of behaviors (including abuse, exploitation and victimization). This vigilance also, as I mentioned earlier,

makes the environment unsuitable for perpetrators who may attempt to victimize individuals with ASD (Hingsburger, 1995).

An environment that may harbor some risks for all individuals, but particularly individuals with ASD, that has expanded exponentially over the last several years is the digital environment. The Internet. Smartphones. Facebook. Video Games. Twitter. These are just some examples of different digital environments. And, digital platforms and environments are constantly growing. Virtual Reality and Wearable Technology are just a couple of examples of recent advances in digital platforms. And, as with all advances in technology, there are tremendous opportunities, and unique threats, that come with the advances.

The benefits of technology for individuals with ASD have been well-documented. Technology-aided instruction (Wong, et al., 2014), computer-based social skills instruction (Center, 2012), speech-generating devices (Tincani & Bondy, 2014), and online communities providing an alternative venue for social expression (Ringland, Wolf, Faucett, Dombrowski, & Hayes, 2016), are just a few examples of the positive uses and benefits of screen-based technology and digital environments.

But, as I just mentioned, with these tremendous opportunities do come some unique threats. One of those unique threats, internet addiction and other problematic screen uses, is beyond the scope of today's podcast. But, there are other forms of risks that do fit within the scope of today's podcast. One form of risk is exposure to pornography and other digital images and messages that portray unrealistic, and even unhealthy, relationships and sexual expression. Again, a debate around pornography is outside of the realm of this podcast. But, the sexual images and acts inherent in pornography can provide unrealistic portrayals of sexuality and relationships that may be confusing and detrimental for individuals with ASD who may not have received other sexual education (Jackson, 2017). Some individuals with ASD may assume *"that the actions in pornographic material provide a script of what to say or do on a date that could lead (at their most extreme) to being charged with a sexual offence"* (Attwood, 2012). And, pornographic images aren't the only digital sources of information that may provide unrealistic expectations: movies, tv shows, and soap operas

can also provide unrealistic models of dating, relationships, and sexuality.

The internet, texting, social media, and other digital sources also potentially expose the individual with ASD to different sources of exploitation and victimization. *“Many individuals with ASD struggle to maintain social relations and are frequent users of screen based technology, using the internet to seek out social connections”* (Lough, Flynn, & Riby, 2014). And, as reported in Lough, Flynn & Riby’s (2014) article from a survey of twenty-five thousand children and their parents across Europe, it was found that young people with an intellectual or physical disability face an elevated risk of online exploitation or victimization in comparison to their peers. How this maps to individuals with ASD isn’t completely clear, but these authors did present some possible risk factors for vulnerability:

1. Trust: high levels of trust towards strangers has been implicated as a risk factor to vulnerability. When we think about the internet, it many times entails interactions with people that we may not have a great deal of face-to-face interpersonal contact at other times. And yet, many times individuals will place a great deal of trust in these unknown, or little known, online partners. (*“Initiating relationships with strangers and celebrities is yet another behaviour that is more common among people with an ASD than among their peers in the general population”* (Normand & Sallafranque-St-Louis, 2015))
2. Social isolation: we have discussed this before, but individuals with ASD may struggle with face-to-face interactions with their peers. This isolation may encourage their turning to the internet, and other digital platforms, for social interactions. Although it may be easier, the loneliness and lack of perceived support that some individuals with ASD experience, may actually increase their vulnerability and promote “risk-taking” behavior to seek and obtain attention.
3. Disinhibition: loneliness, the desire for attention, difficulties with attentional control, difficulties with impulse control, and overall difficulties with executive functions may lead to the sharing of personal or private information that can be exploited by others. (Lough, Flynn, & Riby, 2014)

Normand and Sallafranque-St. Louis (2015) added some additional risk factors

for digital exploitation and victimization:

1. *“Young people who have been the target of intimidation (or bullying) offline are at a greater risk of being sexually solicited on the internet.”* It has been well documented that individuals with ASD experience heightened levels of bullying, so this risk factor would seem to fit for individuals with ASD.
2. *“...many people with intellectual or developmental disabilities tend to be very compliant and have a low level of self-determination.”* We discussed in the last podcast that individuals with ASD tend to be more compliant, and have been trained to defer to authorities.
3. *“A higher level of knowledge of sexuality is associated with lower vulnerability in people with intellectual disability.”* However, as we have previously discussed, many individuals with ASD have lower levels of sexual knowledge, and have received little to no training in sexuality.
4. Difficulties understanding consent and abuse. These difficulties may coincide with the types of unrealistic expectations that we discussed earlier related to portrayals of relationships and sexuality in media and pornography, but it also has its roots in the isolation, perceived lack of support, and lack of sexual knowledge that some individuals with ASD experience.
5. Difficulties with mental health: victims of online exploitation or victimization are prone to higher levels of depression and spend more time on the internet to alleviate their sadness.

Jed Baker’s book *No More Victims: Protecting Those with Autism from Cyber Bullying, Internet Predators & Scams* (2013) details a number of different types of internet victimization and includes helpful examples of each. This book also provides some ideas for school-level, class-level, and individual-level responses to each of these types of victimization.

The organization and website [stopitnow.org](http://stopitnow.org) has a number of tip sheets on signs of victimization and exploitation, ideas for talking with children and teens about victimization and exploitation, and setting up a family safety plan to attempt to help prevent exploitation and victimization. Some warning signs that they highlight that an individual may be the target of online sexual exploitation and victimization include (Library of Resources, 2017):

- a. *Isolating themselves*
  - i. *Spending increasing amounts of time on the internet.*
  - ii. *Becoming increasingly secretive – particularly around their use of the new technology.*
  - iii. *Shutting the door and hiding what they have on screen when someone enters the room.*
  - iv. *Not being able to talk openly about their activity online.*
  - v. *Becoming more possessive of their cell phone and concerned if someone else picks it up or wants to look at it.*
  - vi. *Agitated behavior when answering their phone and needing to take calls in private.*
- b. *Social Changes*
  - i. *Developing a pattern of leaving the family home for periods of time with no explanation about where they are going.*
  - ii. *Vague talk of a new friend but offering no further information.*
  - iii. *Spending increasing amounts of time talking secretly with the new friend online.*
  - iv. *Not wanting to be alone with a particular adult or young person.*
- c. *Emotional Changes*
  - i. *Sudden, unexplained personality changes and mood swings.*
  - ii. *Outbursts of anger and irritation.*
  - iii. *Self-harming activities.*

As with the signs noted by Hingsburger, it is important to caution that with these warning signs, we are looking for a change in prior behavior. Some individuals with ASD may isolate themselves, be vague in their discussions about others, and demonstrate either outbursts or self-harming behaviors. But, as with the signs noted by Hingsburger, the observations of these signs and changes should trigger the initiation of a process to investigate, assess, and ultimately determine the underlying factors and reasons for these signs and changes in behavior. We should not let the fear and stigma around sexual exploitation and victimization prevent us from looking into and reporting these incidents as needed.

Thank you for joining me today. In the next podcast, I will cover information about working with individuals with ASD in different environments (victim services, counseling, and law enforcement).

A transcript of this podcast, along with citations and a related bibliography, can be found on the [flexiblemindtherapy.com](http://flexiblemindtherapy.com) website.

Thank you for joining me today.

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