

Autism and Teenagers

A teenager with autism goes through all of the regular difficulties associated with adolescence. Autistic teenagers experience the bodily changes, growing interest in relationships, and frustrations of regular adolescence, but this is all compounded by an inability to relate to others on an emotional and social level.

What is autism?

Autism impairs the brain's development of both verbal and nonverbal communication skills. For example, they often are unable to maintain eye contact, appearing as if they aren't listening during a conversation.

They also have difficulty picking up on verbal cues, like tone of voice, sarcasm, or jokes, and often take statements literally, causing them confusion with idioms like “get a grip” or “kick the bucket.”

A teenager with autism also might not pick up on nonverbal cues in a conversation, such as smiles, frowns, or gestures.

Autism is often diagnosed at a very young age, and develops differently for each child. While some individuals eventually learn the social and communication skills necessary to attend regular classes, others are homeschooled or placed in special education settings.

Autistic symptoms sometimes change with age and therapy, as parents attempt to get their children to engage correctly in social situations.

In *Growing Up on the Spectrum: A Guide to Life, Love, and Learning for Teens and Young Adults with Autism and Asperger's*, authors Lynn K. Koegel and Claire LaZebnik write about their personal experiences interacting with autistic teenagers.

Koegel worked with LaZebnik's autistic son, Andrew, at an early age. Now, Andrew is 17

years old, and is dealing with the social pressures of teenage life, while still working to develop the communication techniques necessary to maintain relationships.

Koegel and LaZebnik write that the teenage years become a balancing act of providing support for the autistic teen, while also encouraging independence. Through proper care during childhood, and work with therapists, Andrew tackled many of his autistic symptoms, and now attends a public school with other teens.

Koegel and LaZebnik designate sections of the book to allow Andrew to give personal insights about growing up with autism. Here, Andrew describes the self-management techniques he uses to reduce the symptoms of autism he displays during social settings:

Andrew's self-management guide

Andrew states that he uses self-management to successfully recognize and reduce certain behaviors, which include talking out loud, finger twisting, biting his nails, and repeating the same word over and over in sentences without noticing.

Andrew makes a list of these behaviors, and records how often they occur.

Each time he catches himself displaying one of these symptoms, he puts a check mark on his list of symptoms. When he recognizes he's doing it, he begins to unconsciously reduce this behavior.

He also rewards himself when he successfully reduces these behaviors, such as buying a new videogame or seeing a movie.

Andrew says reducing these repetitive behaviors makes him feel happier, and makes him feel like he fits in more with the other teenagers.

Social concerns of autistic adolescents

Life as an autistic teen differs in almost every case.

By the time they are teenagers, some individuals with autism might attend regular classes with non-autistic students, while others are still enrolled in special education classes and support services.

Even though teenagers with autism have problems communicating their thoughts and emotions, they still desire friendships with others. Unfortunately, many of their peers are hesitant to interact with them, because of the social and behavioral issues associated with autism.

In “Loneliness and Social Support in Adolescent Boys with Autism Spectrum Disorders,” published in *The Journal of Autism and Developmental Disorders*, researchers examine how social deficits contribute to loneliness in adolescents with autism.

In this article, researcher Mathias Lasgaard examines 39 teens with autism and compares them to 199 non-autistic teens in a control group. Lasgaard provided the teens with a self-report loneliness scale that asked questions such as, “How often do you feel like part of a group of friends?” and “How often do you feel you lack companionship?”

Lasgaard found autism strongly predicted loneliness, with a full 21% of the 39 teens describing themselves as “always or often lonely.” A further 38% of the autistic teenagers reported they were “sometimes lonely.”

This, compared to 4% of the control group who reported always being lonely, suggests that even though autistic teens lack the communication skills to socialize with peers, they still crave social interaction..

Consider a 14-year-old high school boy with high-functioning autism. The boy attends regular classes with other students, and is able to participate in class.

But the boy's autism still makes him an outcast to the other students. He often prefers to stay alone during free time, because the other boys don't understand how the autism affects his ability to communicate with them. They don't understand why he appears distant when they speak with him, and they make fun of him when he doesn't

understand jokes or sarcasm.

Because he hates the ridicule he faces, the boy avoids social situations altogether, but still wishes he had the companionship of a friend.

Lasgaard says that with social skills training, some autistic teens are able to manage some of their autistic symptoms, successfully interacting with their peers.

In “Social Skills Training for Adolescents with Asperger's Syndrome and High-functioning Autism,” published in *The Journal of Autism and Development Disorders*, researchers examined the effectiveness of skills training exercises in a group of boys with Asperger's and autism. (Asperger's is a form of high-functioning autism associated with social deficits, but not the severe language barriers of other forms of autism.)

In the study, researchers Jeanie Tse and others state that as individuals with autism approach their teenage years, their interest in social interactions increases, but their autism prevents them from forming relationships with others.

Tse sampled 46 autistic teenagers ages 13 to 18 and focused on increasing their abilities to communicate and interact in social situations through role-play exercises.

The group met weekly for 12 weeks, and each meeting started with an examination of the events and problems the autistic teenagers faced that week. The teens identified the social difficulties they faced, and Tse introduced new social skills the teens could practice.

For example, one role-play exercise focused on maintaining eye contact with others during conversation, while another focused on listening to others, and showing interest in their partners' daily activities.

As the teenagers gained confidence, they met together outside of therapy, holding semiformal dinners at restaurants where they practiced social and etiquette skills.

Parents and the teens themselves reported improvements in the teens' social functioning, as well as decreased isolation.

Because adolescence is generally the time when autistic teens become aware of their disorder, participating in activities like eating at restaurants, swimming at the pool, and volunteering makes them feel good about themselves, increasing their self-esteem.

Anxiety and autism

Anxiety (see [Anxiety](#)) is often a serious concern for many teenagers, and the risk for autistic teenagers is even higher.

In an examination of possible treatments for anxiety in autistic teens, researchers Susan M. White and others state that anxiety is prevalent in between 40% to 45% of autistic teenagers.

The study, “Development of a Cognitive-Behavioral Intervention Program to Treat Anxiety and Social Deficits in Teens with High-Functioning Autism,” published in *The Clinical Child and Family Psychology Review*, states that the social disabilities of autism do not disappear during adolescence, and that growing self-awareness often contributes to the development of anxiety.

White says that anxiety in autistic teenagers often interferes with initial development of social skills.

In order to both tackle anxiety and increase social skills, White developed an intervention treatment program based on cognitive behavioral therapy (see [Cognitive Behavioral Therapy](#)) called Multimodal Anxiety and Social Skills Intervention (MASSI).

MASSI treats anxiety and autism as separate disorders that influence each other. Treated with MASSI, teenagers tackle their anxiety issues first, then work with therapists to develop improved social skills.

During MASSI, teenagers engage in individual, group, and family therapy. During individual therapy, the therapist discusses the concerns of the autistic teen, and explains how anxiety interferes with the teen's ability to develop social skills.

A teenager who associates negative experiences with social interaction would resist increasing social skills, for example. If this teen was bullied in his or her past, and associates social interactions with that experience, he or she might become extremely fearful at the prospect of any interaction.

Working with the teen through this problem, the therapist would suggest the development of anxiety management techniques, and might suggest exposure therapy (see [Overcoming Panic Attacks](#)) to increase the teen's comfort level when interacting socially.

After tackling anxiety, therapists turn to the development of social skills through role-play exercises and group therapy. In a group setting, autistic teenagers are encouraged to practice the social skills they learned in individual therapy.

Participants in group therapy work to initiate and maintain conversations, and join groups of people in the middle of conversations. Therapists provide a positive environment that encourages the teenagers to look at social situations in a more positive light.

The teenagers also provide feedback to their parents during the therapy, summarizing what they've learned during each session. This helps to reinforce the social skills the teen learned during therapy, and also gives the teen a sense of independence, telling his or her parents what they've learned.

Helping autistic teenagers

Therapy and intervention techniques are effective ways for autistic teenagers to improve social skills and integrate into society. To meet this demand, more therapists and psychologists specializing in autism and teenage psychology are needed.

If you're interested in helping autistic teenagers, request information from [schools offering degree programs in psychology](#).

Autism in the Classroom

Some people think autistic students typically attend separate schools and classes, but the reality is that students with disabilities make up a significant portion of the public school student population.

According to the National Longitudinal Transition Study 2 (NLTS2), a report from the U.S. Department of Education about special needs students, most autistic students spend at least a portion of their time in a public academic setting.

“Secondary School Experiences of Students with Autism,” a specific section of the NLTS2 report, examined 11,000 students with disabilities, including 1,000 students with autism, who received education in public schools.

Facts from the report show:

- 92% of autistic teens attend at least one regular academic class with other students
- 86% of autistic teens also attend at least one special education class
- Students with autism are less likely to respond orally when asked questions in class (48%) compared to non-autistic teens (66%)
- 49% of autistic teens receive alternative tests
- 25% of autistic teens have tests read to them
- 38% of autistic teens are given shorter or different homework assignments
- 41% of autistic teens receive slower-paced instruction
- 80% of autistic teens receive assistance to enhance their participation in class
- 57% of autistic teens receive instructional support from teacher aids or assistants
- 32% of autistic teens receive more feedback of their work from teachers

Overall, the report shows that with additional help, autistic teenagers are able to participate in general education settings with their peers.

Growing Up Together: Teens With Autism

ISM SOCIETY

ie Lives of All Affected by Autism

Source: Autism Society

When you're a teenager you find your unique identity and figure out your relationship to the world and to others. When you meet someone who doesn't fit the mold of what's considered "normal," you might be tempted to avoid them, gossip with your friends about them or judge them without any valid or real reason.

If a person does not seem like your other classmates or fit your expectations of "normal" behavior, consider if they might have autism or another disability. There are a growing number of people who have been diagnosed with an autism spectrum disorder, including Asperger's Syndrome. More than ever before, students with all types of disabilities are attending your school and are in your class. With your acceptance and help, a student with autism can do well at school and fit in with classmates. With some understanding, a little assistance and inclusion in social activities, teens with autism may become great friends.

What Is Autism?

Autism (also referred to as autism spectrum disorder or ASD) is a neurological disorder that affects the way a person's brain and body works. As it is a spectrum disorder, no two people will have the same symptoms and characteristics. In other words, just like other teenagers, not all people with ASD are the same. It is also important to know that autism is not a disease and is not contagious.

A person with ASD may have difficulty communicating with other people, making friends or following directions. Sometimes a person with ASD may have trouble understanding what is going on if they are overwhelmed by lights, noises, movements and smells. Certain things may make them upset, and they

may not know how to calm down or tell you what's bothering them. Some people with ASD may not understand "common sense" things you take for granted. However, with help from teachers, classmates, families and friends, teens with ASD can find it easier to attend school in spite of these challenges.

What Causes Autism?

No one knows exactly why some people have autism. There may be many different causes. Scientists are still trying to find out what those causes are and how to best help people with ASD. Approximately 1,500,000 people in the United States have an autism spectrum disorder—that's 1 out of every 150 people. ASD can affect anyone, regardless of race, religion, economic status or where they live; however, it is more common in boys than in girls.

How Are Teens with ASD Unique?

Many teens with ASD have similar dreams and goals as you and I. There may be only subtle differences in some individuals, while other people diagnosed with ASD might be very different from you. Some classmates may have difficulties with certain activities due to their disability, but may have strengths in other areas. For example, a teen with ASD may be a computer or science whiz, but may have difficulty in social situations or playing on a sports team. Some teens with ASD may:

- Misunderstand rules or get anxious when rules are not followed exactly.
- Follow certain routines, such as always sitting in the same place in the cafeteria or always taking the same route to class.
- Have an intense desire to pursue an interest and become very focused on a particular thing, such as a video game, mythology or sports facts.
- Have a hard time coping with everyday challenges, such as schedule changes.
- Not be able to make eye contact, or may stare or make eye contact that is too intense when talking to you.
- React strongly or become overwhelmed by things like noisy cafeterias and gymnasiums, fire alarms, crowded hallways or bright fluorescent lights.
- Not recognize or protect themselves from bullying or teasing at school, in public or on the Internet.
- Be very concrete, literal thinkers and may not understand sarcasm, slang or jokes.
- May stand too close when talking and may not be able to take the "hint" that the conversation is done.
- May make comments that seem rude without understanding their social impact (for example, "you have bad breath").
- Appear to not care or be unaware of other people's feelings.
- Want to make friends, but might not want to talk about things other than his/her special interests. You should realize they are trying to connect and might be at a loss for other topics to talk about.
- Not be able to interpret facial expressions, such as when the teacher gives a meaningful look to

signal that it is time to be quiet.

Why Do Teens with ASD Act This Way?

Teens with ASD may act in some unusual ways; however, they are typically not choosing to misbehave or act peculiar. They may be having a hard time controlling their behavior because they have difficulty understanding expectations or dealing with the world around them. They also may not be aware of their behavior or that it is perceived as unusual.

How Do Teens with ASD Communicate?

Teens with ASD may have a problem with receptive communication. This means that they may not always understand everything that is being said to them, may need some extra time to process what is being said or may become confused when someone says too much at once. To communicate more effectively with a person with ASD, make an effort to:

- Speak slowly and use simple words.
- Allow extra time for the person with ASD to process and develop an answer.
- Speak in direct and positive language that tells the person what to do (“stand still” instead of “don’t move”).
- Try not to use sarcasm, slang or implied meanings (such as “get over it,” “let’s hang out,” “put a sock in it” or “take a chill pill”).

Teens with ASD may also have expressive communication challenges, which means they are unable to “express” what they are thinking or feeling. Some may not talk at all, but may communicate using gestures and other behaviors. Others may use a communication board to spell out words or a small computer that speaks for them. Expressive communication is how someone “talks” to others and relays a message or thought. Although they may understand what is being said, they may have difficulty figuring out how to respond. Never assume just because someone doesn’t talk that they don’t understand or aren’t smart. A teen with ASD may:

- Not be able to speak and might use another form of communication, such as sign language or an electronic device.
- Use formal and very precise language, which makes them sound different than your other friends.
- Repeat a phrase he or she has heard from a movie, video or previous conversation, sometimes without knowing what it means. The phrase may have no relevance or may contain a response that seems inappropriate.
- Have difficulty staying on topic during a conversation.
- Have difficulty starting a conversation.
- Say something that sounds rude. It is probably not meant that way, but teens with ASD can be brutally honest.

- Forget to use greetings and closings, such as “hello” and “goodbye.”
- Have difficulty understanding when to begin and end conversations, and when it is their turn to talk.

How Can I Be a Friend?

When you become a friend to a person with ASD, you can both learn a lot from each other. Here are some ideas to help you be a better friend:

- Accept your friend’s differences.
- Protect your friend from things that bother him or her (for example, loud noises or fluorescent lighting).
- Join your friend in activities that interest him or her.
- Speak in a manner that is age-appropriate. Don’t use “baby talk.”
- Be patient and understand that your friend doesn’t mean to bother you or others.
- Protect your friend when others try to bully or make him or her do something that is not appropriate.
- Give your friend extra time to answer your question or complete an activity.
- Invite your friend to join you in group activities, such as going to the movies, hanging out with other friends, or attending sporting or school events.
- Help other teens learn about and accept autism.

Some individuals may have extreme and problematic behaviors that include screaming, hitting themselves or others, or destroying property. Realize that these behaviors may be their only way of communicating pain, confusion or their desire for attention. When these behaviors occur, you should call on an adult to assist. You can help by helping others to understand why the behavior occurred and hopefully avoid the situation in the future.

Finally, realize that your friend with ASD may have information or skills that you can learn from as well. Some of these individuals have exceptional talents in math, music, art or other areas. If you take the time to be a friend with someone with ASD, you might find you can learn a lot and enjoy spending time together. These are wonderful people to get to know. Remember, a student with ASD is really just another teenager who wants to be respected as an individual, have friends and have fun.

Resources For more information about ASD, look for these and other books written by or for teens in your local library:

Bristow, C. (2008). *My strange and terrible malady*. Shawnee Mission, Kan.: Autism Asperger Publishing Co.

Burrows, E.L., & Wagner, S.J. (2004). *Understanding Asperger’s syndrome: Fast facts—a guide for teachers and educators to address the needs of the student*. Arlington, Texas.: Future Horizons.

Attwood, M. (2004). *The curious incident of the dog in the night-time*. New York: Vintage Contemporaries.

Jackson, L. (2002). *Freaks, geeks and Asperger syndrome: A user guide to adolescence*. London & New York: Jessica Kingsley Publishers.

Keating-Velasco, J.L. (2007). *A is for autism, F is for friend: A kid's book on making friends with a child who has autism*. Shawnee Mission, Kan.: Autism Asperger Publishing Co.

Keating-Velasco, J.L. (2008). *In his shoes: A short journey through autism*. Shawnee Mission, Kan.: Autism Asperger Publishing Co.

Ledgin, N. (2002). *Asperger's and self-esteem: Insight and hope through famous role models*. Arlington, Texas: Future Horizons.

Shore, S.M., Rastelli, L.G., & Grandin, T. (2006). *Understanding autism for dummies*. Hoboken, N.J.: Wiley Publishing, Inc.

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<http://www.education.com/reference/article/growing-up-together-teens-autism/>

Autism and the Teenage Years

It is difficult for autistic children at any age, but the teenage years can be especially challenging. Autism is a disorder that manifests itself with the individual having trouble communicating and managing a variety of social situations. Coupled with this, there are the repetitive behaviors and difficulty with emotional control. The teen years are perhaps the most social time of our lives. It is a time where teenagers are learning about themselves, and are moving rapidly toward adulthood. This is an incredibly social time where what you say and how you act are very important in the eyes of your peers. This is also precisely the time where autistic teens face some of the most stressful situations of their young lives.

Like any teenager, they need help in dealing with their increasing sexuality. Some people find that as they reach their teenage years their behaviors improve. However, for others their behavior can worsen as a direct result of the tension and confusion associated with this difficult time

It can be at this age that most teenagers become aware how different they are from their peers. They may notice that they don't have many or any friends and that they aren't dating or planning for a career. For some, these feeling of not fitting in can motivate them to learn more social skills to better fit in, for others it means they retreat into themselves even more.

There are different levels of autism. Many people believe that the depiction of an autistic man by Dustin Hoffman in the movie "Rain Man" pretty much sums up all people with autism. There are cases of autism that are along the lines of Hoffman's character in the film, but there are just as many, if not more, cases of high-functioning autistic people. High functioning autistic people can be difficult to detect at times. In many cases, unless you know them personally, you may not be able to tell that they have autism.

So what is life like for an autistic teen? This is a difficult question to answer. Again, it

depends heavily on the severity of autism present in the teenager. High-functioning autistic teens attend regular and honors classes, are involved in school activities, and despite some social difficulties, are often difficult to distinguish from other kids their age. On the other hand, severely autistic teens have a much more difficult time. Many require special schooling and individual care. The vast majority of severely autistic teens are unable to take care of themselves and rely on others to meet their basic needs.

Since autism causes a problem in communication, most autistic teens do not learn how to behave according to sociological norms through experience. They need to be taught the proper way to behave. The inability to fit into proper social situations can be traumatic and lead to a tendency to disengage from a certain situation, whether it is related to play, school, or work, and simply leave the situation. This can make it difficult to raise an autistic teen, especially if they display severe symptoms.

There are tons of resources on the web and in libraries that can provide you with more information on autism and the teenage years. If you have an autistic teen living at home, you know what a challenge it is to deal with the tremendous problems in communication. Oftentimes, it may seem like your own child does not want to be close to you, but you need to realize that it is the result of their autism rather than a reflection on you as a parent.

Clearly, having autism as a teenager can be extremely difficult. If your child is either low or high functioning, there are a variety of resources available through your local school system. Schools are mandated to provide services for autistic and other developmentally challenged individuals. It is a good idea to discuss the routines and procedures you have in place with officials from school so that the transition between home and school goes as smoothly as possible to provide your teenage with as much help and support as possible during this time.

As an essential guide to autism, my ebook provides more details on managing autism and many treatment options. To find out more, please visit [The Essential Guide to Autism](#).

Rachel Evans also writes a Free Autism Newsletter. Join For Free Here: please visit [Free Autism Newsletter](#). To find out more about [autism education](#) and for information on [high functioning autism](#)

What Is Date Rape?

Listen



When people think of **rape**, they might picture a stranger jumping out of a shadowy place and attacking someone. But in reality about half of all people who are raped know the person who attacked them. This is known as date rape — forced sex that can happen on a date but also somewhere like a party with someone the victim may know, like, or even be interested in.

Girls and women are more likely to be raped, but it can also happen to guys. It's not just men who rape. In rare cases, women rape, too.



Being good friends, talking to someone, dating, or hooking up usually *don't* lead to violence or rape. But it can happen, so it's best to be prepared.

Here are three key things to know about rape:

1. **The person who gets raped is not to blame.** Rape is always the rapist's fault. People never "ask for it" because of the clothes they wear or the way they act. If sex is forced against someone's will, it's rape. That's true even when two people are dating or married — even if they've had sex before. You never "owe" someone sex, even if you're a couple.
2. **Rape is not always violent.** If you say "no," but the person doesn't respect your wishes and talks you into something that you don't want, it's rape.
3. **Rape is not about sex or passion.** Forced sex is an act of violence and aggression. It has nothing to do with love. **Healthy relationships** are about respect.

Someone who really cares about you will respect your wishes and not force or pressure you to do anything sexual without your agreement.

Alcohol and Drugs

Alcohol and drugs can play a role in date rapes. Drinking can loosen inhibitions, reduce common sense, and — for some people — allow aggressive tendencies to surface.

Drugs can take away your ability to be in control or get help.

You may have heard about "date rape" drugs like:

- **rohypnol**, called roofies, lunch money, or mind erasers
- **GHB** (gamma hydroxybutyric acid), called cherry meth, energy drink, gook
- **ketamine**, called bump, special K, and super acid

These drugs can be mixed in to drinks and are almost impossible to detect, especially in dark-colored drinks such as cola or dark beer, or in a dark room. These drugs make people feel weak and confused and can cause them to pass out and forget everything that happened while they were on the drug.

These drugs are powerful and dangerous, and mixing them with alcohol is especially dangerous. People can end up dead if they're given a date rape drug when they've been drinking.

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Protect Yourself

The best defense against date rape is to try to prevent it. Here are some things you can do:



- **Avoid secluded places when you're in the early stages of dating or just getting to know someone.** Going someplace where you can't get help can be risky if you don't know the person you're with. That includes your room or the other person's. Wait until you trust your partner before going anywhere private or out of the way. Always be sure to have your cellphone fully charged so you can call for help.
- **Don't spend time alone with someone who makes you feel uncomfortable.** Always trust your instincts. If a situation doesn't feel right, get out.
- **Stay sober and aware.** If you're with someone you don't know very well, stay aware of what's going on around you. Never drink something that has already been poured or opened, even if it's just a cola or an iced tea. Date rape drugs are more easily disguised in dark-colored drinks.
- **Be aware of your date's ability to agree to sex.** You may be guilty of rape if the other person has been drinking, doing drugs, or is not in a condition to respond or react.
- **Be clear about what kind of relationship you want with the person.** If you are not ready for hooking up, sex, or touching, or you're not sure, let the other person know.
- **Don't let peer pressure push you into something you don't want to do.** "Everybody's doing it" is a myth. Most teens are not having sex, even if they are talking about it.
- **Go out with a group of friends and watch out for each other.** Don't be afraid to ask for help if you feel threatened.
- **Take self-defense courses.** These can build confidence and teach valuable physical techniques you can use to get away from an attacker.

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Getting Help

If you are pressured into any type of sex or have been raped, or you wake up and are not sure what happened to you, here are some things that you can do:

Immediately After a Rape

- **If you're hurt, go straight to the emergency room.** Most medical centers and hospital emergency departments have doctors and counselors trained to take care of someone who has been raped.
- **Call, text, or find someone you feel safe with.** Tell them what happened or what you are concerned about.
- **If you want to report the rape, go to the hospital right away.** To keep as much of the physical evidence as you can, don't change clothes, don't wash, and, if possible, don't use the bathroom before you go in.
- **If you aren't sure what to do, call a rape crisis center.** Search online for local numbers or call the national sexual assault hotline at (800) 656-HOPE. Rape crisis calls are anonymous and confidential. The counselor can explain the law in your area and give you advice on what to do. Hospitals and police stations also know how to help you if you are not sure what to do next.
- **Write down as much as you can remember about what happened,** and take pictures if that helps you remember.

Up to 72 Hours After a Rape

- **If you want to report the rape, go to the hospital as soon as you can.** If possible, don't change clothes, don't wash, and don't use the bathroom. But if you've already done these things, don't let that stop you from getting help. Take as much evidence with you as you can — like underwear or other clothing that hasn't been washed yet. Doctors can gather DNA evidence several days after a rape. The hospital also will check you for STDs (sexually transmitted diseases), give girls a pregnancy test, and give you medicine if you need it.
- **If you aren't sure what to do, call a rape crisis center.** Search online for local numbers or call the national sexual assault hotline at (800) 656-HOPE. Rape

crisis calls are anonymous and confidential. The counselor can explain the law in your area and give you advice on what to do.

More Than 72 Hours After a Rape

- **If you want to report the rape, call the police or a rape crisis center.** A rape crisis center is a good place to start if you were raped a while ago. They can give you advice on the best approach to take (for instance, if you should go to the hospital or contact the police first).
- **If you just want to talk or need counseling, call a rape support line.** Search online for local numbers or call the national sexual assault hotline at (800) 656-HOPE. Rape crisis calls are anonymous and confidential. They will put you in touch with someone in your area who can help. Some rape crisis centers offer short-term counseling help.

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Reporting a Rape

The sooner a rape is reported, the better. Quick reporting increases the chances that rapists will be caught and can prevent them from hurting someone else.

If you're not sure about reporting a rape because you know the person, you can talk to a counselor at your local rape crisis center to find out what to do. You can report a rape months or, in some states, even years after it happens. Different states have different rules. To find out more about rape laws in your area, go to the [Rape, Abuse and Incest National Network \(RAINN\)](http://www.rainn.org) website (www.rainn.org).

Rape isn't just physically damaging — it can be emotionally traumatic as well. It may be hard to think or talk about something as personal as being raped by someone you know. A trained rape crisis counselor or other mental health professional can give you the right care and support to begin the healing process. Working things through can help prevent

lingering problems later on.

Reviewed by: [Michelle New, PhD](#)

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Felony Counts for 2 in Suicide of Bullied 12-Year-Old

MIAMI — For the Polk County sheriff's office, which has been investigating the cyberbullying suicide of a 12-year-old Florida girl, the Facebook comment was impossible to disregard.

In Internet shorthand it began “Yes, ik” — I know — “I bullied Rebecca and she killed herself.” The writer concluded that she didn't care, using an obscenity to make the point and a heart as a perverse flourish. Five weeks ago, Rebecca Ann Sedwick, a seventh grader in Lakeland in central Florida, jumped to her death from an abandoned cement factory silo after enduring a year, on and off, of face-to-face and online bullying.

The Facebook post, Sheriff Grady Judd of Polk County said, was so offensive that he decided to move forward with the arrest immediately rather than continue to gather evidence. With a probable cause affidavit in hand, he sent his deputies Monday night to arrest two girls, calling them the “primary harassers.” The first, a 14-year-old, is the one who posted the comment Saturday, he said. The second is her friend, and Rebecca's former best friend, a 12-year-old.

Photo



Rebecca Sedwick committed suicide last month after being repeatedly bullied in person and online.

Both were charged with aggravated stalking, a third-degree felony and will be processed through the juvenile court system. Neither had an arrest record. The older girl was taken into custody in the juvenile wing of the Polk County Jail. The younger girl, who the police said expressed remorse, was released to her parents under house arrest.

Originally, Sheriff Judd said he had hoped to wait until he received data from two far-flung cellphone application companies, Kik Messenger and [ask.fm](#), before moving

forward.

“We learned this over the weekend, and we decided that, look, we can’t leave her out there,” Sheriff Judd said, referring to the older girl. “Who else is she going to torment? Who else is she going to harass? Who is the next person she verbally abuses and attacks?”

He said the older girl told the police that her account had been hacked, and that she had not posted the comment.

“She forced this arrest today,” Sheriff Judd said.

Rebecca was bullied from December 2012 to February 2013, according to the probable cause affidavit. But her mother, Tricia Norman, has said the bullying began long before then and continued until Rebecca killed herself.

The older of the two girls acknowledged to the police that she had bullied Rebecca. She said she had sent Rebecca a Facebook message saying that “nobody” liked her, the affidavit said. The girl also texted Rebecca that she wanted to “fight” her, the police said. But the bullying did not end there; Rebecca was told to “kill herself” and “drink bleach and die” among other things, the police added.

The bullying contributed to Rebecca’s suicide, the sheriff said.

Brimming with outrage and incredulity, the sheriff said in a news conference on Tuesday that he was stunned by the older girl’s Saturday Facebook posting. But he reserved his harshest words for the girl’s parents for failing to monitor her behavior, after she had been questioned by the police, and for allowing her to keep her cellphone.

“I’m aggravated that the parents are not doing what parents should do: after she is questioned and involved in this, why does she even have a device?” Sheriff Judd said. “Parents, who instead of taking that device and smashing it into a thousand pieces in front of that child, say her account was hacked.”

The police said the dispute with Rebecca began over a boy. The older girl was upset that Rebecca had once dated her boyfriend, they said.

“She began to harass and ultimately torment Rebecca,” said the sheriff, describing the 14-year-old as a girl with a long history of bullying behavior.

The police said the older girl began to turn Rebecca’s friends against her, including her former best friend, the 12-year-old who was charged. She told anyone who tried to befriend Rebecca that they also would be bullied, the affidavit said.

The bullying leapt into the virtual world, Sheriff Judd said, and Rebecca began receiving sordid messages instructing her to “go kill yourself.” The police said Rebecca’s mother was reluctant to take her cellphone away because she did not want to alienate her daughter and wanted her to be able to communicate with her friends. Ms. Norman tried, she has said, to monitor Rebecca’s cellphone activity.

In December, the bullying grew so intense that Rebecca began cutting herself and was sent to a hospital by her mother to receive psychiatric care. Ultimately, her mother pulled her out of Crystal Lake Middle School. She home schooled her for a while and then enrolled her in a new school in August.

But the bullying did not stop.

“As a child, I can remember sticks and stones can break your bones but words will never hurt you,” the sheriff said. “Today, words stick because they are printed and they are there forever.”

Some of the messages were sent using a variety of social media smartphone messaging and photo-sharing applications, including [ask.fm](#) and Kik Messenger, that parents have a difficult time keeping track of.

“Watch what your children do online,” Sheriff Judd said. “Pay attention. Quit being their best friend and be their best parent. That’s important.”

The Damaging Effects of Social Isolation

No teen is an island

By Debbie Roome

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Teen culture is social by nature; young people tend to move around in groups. So a teen who is isolated—by chance or choice—is at a distinct disadvantage and is often treated as an outcast. The effects of isolation on a teenager can be long lasting and create a problem that parents need to address. The first step to solving this problem is understanding what causes it.



Teens Say “Leave Me Alone”

Teens may choose to isolate themselves or it may happen as a result of bullying or exclusion by their peers. Here are some of the common reasons for isolation:

- Isolation can be caused by the way they look, dress, act, or a combination of all these factors.
- Some teenagers may be ostracized by their classmates because they may either excel academically or underachieve. Fitting in is important to adolescents; those who stand out may be pushed to the fringes of social groups.
- Moodiness and erratic or volatile behavior can drive teens away from each other.
- Certain conditions such as Asperger's syndrome and ADHD are characterized by social weaknesses that can lead to social isolation.
- Depression is another prime cause of isolation. A depressed teen loses interest in everyday activities and drops out of social groups at school.
- In some cases, a teen may spend too much time on social networking sites and lose touch with peers. He may replace genuine social interaction with chat rooms and conversations with strangers.
- Shyness can be a cause of social isolation in teens.

Isolation Hits Hard

Isolation affects teenagers in a number of different ways and with varying degrees of severity. Think about your teen and consider the possible ways that a lack of social interaction and acceptance can harm your child:

- A lack of peer support can mean teens struggle to process the dramas of their adolescent years. Stacey withdrew into herself, embarrassed by her crooked teeth and the teasing that resulted from them. When she needed a friend to do a geography project with, she couldn't find one; this made her feel even worse.
- Depression is a Catch-22; it can cause isolation but may also come from a lack of social interaction. It's important to differentiate between these if you seek professional treatment for your teen. For example, Jack was depressed when his

attempts to fit in with the guys in his class always backfired. They were sports-minded, whereas he was more artistic and musical. He was mocked by the boys and eventually stopped hanging out with them. Over a period of months, he slumped into a deep depression.

- Teens who interact online lose out on genuine social interaction. Miles was a computer geek who spent hours chatting to strangers online. After months of this, his social skills were under-developed and his understanding of face-to-face interaction was marred by hours of Internet use.
- Casey was diagnosed with Asperger's syndrome at age 9. She had a particular interest in horses; her peers found her incessant talk about them boring. They eventually left her out of social activities, which made her feel socially clumsy and unwanted.

Parents Can Help Isolated Teens

Teens may end up in a situation where they struggle to help themselves. If you see this happening, get involved and encourage your child to take positive action to overcome her problems. In the situations mentioned above, parents intervened in the following ways:

- Stacey's parents saw she was withdrawn. When she couldn't find a friend to help with the geography project, they sat down with her and asked her what was wrong. They made a plan to get her teeth straightened. As Stacey's confidence grew, her social life began to improve.
- Jack's parents took him to a doctor for a physical check-up and assessment of his depressed state. The doctor ruled out biological depression and suggested Jack join some clubs where he would meet teens with similar interests. Within months he was part of a group that painted backdrops for theatrical productions, and he joined a teen band. He eventually had to limit his social life, as he was too busy.
- Miles' parents took firm action and told their son they would limit his Internet use if he didn't make more effort to interact face to face with his peers. Miles was angry

and reluctant to do so but eventually looked up some old friends. They were willing to spend time with him. Miles soon realized the value of genuine social contact.

- Casey's parents had taken a proactive approach with her since her diagnosis of Asperger's syndrome. When her adolescent peers shunned her, they arranged for a therapist to help her acquire social skills. Casey persevered and managed to make a couple of friends who understood her difficulties.

Never underestimate the effects of isolation on a teenager. With the right kind of help and support, most young people can improve their social lives. The skills they learn as teens will stand them in good stead when they enter the workplace and have to interact with people of all ages.

Debbie Roome is an award-winning freelance writer and mom to five children; two of them are teens.

In what other ways do you think teachers, parents, friends, relatives, counselors, and so forth can help teens to feel less isolated?