Understanding Child Sexual Abuse:
A Guide for Parents & Caregivers

Loree Beniuk & Pearl Rimer
Understanding Child Sexual Abuse: A Guide for Parents & Caregivers

Published by:
Central Agencies Sexual Abuse Treatment (CASAT) Program
Child Development Institute
197 Euclid Avenue
Toronto, Ontario CANADA M6J 2J8

Funded by:
Ontario Ministry of the Attorney General, Office of Victims of Crime

Previous Edition:
When a Child or Youth is Sexually Abused:
A Guide for Youth, Parents and Caregivers
Metropolitan Toronto Edition (1997)
Funded by: The Children’s Aid Society Foundation of Metropolitan Toronto

ISBN 0-9681323-7-5

© CASAT, 2006

The contents of this guide may not be commercially reproduced.
Any other reproduction for personal, clinical or other related professional use is permitted with acknowledgement.
# Table Of Contents

Acknowledgements .......................................................... i
Note To Readers ............................................................. ii
Introduction ................................................................. iii
1. Defining Sexual Abuse ..................................................... 1
2. Telling About Abuse ..................................................... 3
3. Reporting Suspicions Of Child Sexual Abuse ................. 16
4. The Investigation ......................................................... 19
5. Possible Outcomes: Child Protection Investigation ....... 30
6. Possible Outcomes: Criminal Investigation .................. 33
7. Support & Treatment Services ........................................ 41
Glossary ................................................................. 50
Acknowledgements

This guide was made possible through the generous assistance of many people and organizations. Sincere appreciation is extended to everyone who contributed to this project.

We gratefully acknowledge the following programs and organizations for their active participation on the CASAT Handbook Committee:

Central Toronto Youth Services
Children’s Aid Society of Toronto
The Gatehouse
Hospital for Sick Children, Suspected Child Abuse and Neglect (SCAN) program
Scarborough Agencies Sexual Abuse Treatment (SASAT) program
Thistletown Regional Centre for Children and Adolescents, SAFE-T program
Toronto Child Abuse Centre (TCAC)
West End Sexual Abuse Treatment (WESAT) program

Special recognition is extended to the many people with whom the Handbook Committee members consulted along the way. In particular, we acknowledge Child Development Institute, Durham Region Sexual Assault Care Centre, TALK Program and the ongoing consultation provided by Jon Ball, Ministry of the Attorney General (Toronto Region).

CASAT is grateful to the Ontario Ministry of the Attorney General for funding the revision and initial publication of this guide. A special thank you is directed to Patti Sanders.

Lastly, on a personal note, we wish to convey an immense thank you to our colleagues and students for their encouragement, editing assistance and creative recommendations.

Kind Regards,

Loree Beniuk, M.S.W., R.S.W., Adv. Dip.
Program Manager, CASAT

Pearl Rimer Dip.C.S., M.E.S.
Program Manager, TCAC
Note To Readers
It is important to recognize that the primary audience for this handbook includes parents and caregivers from the Toronto area. We are aware, however, that this handbook will be distributed well beyond Toronto.

Although attempts were made to make the information as location-free as possible, some examples of services and practices available in Toronto are included. Please consult with the appropriate professionals in your community to learn about specific resources that may be helpful to you.

As you read this guide, you will notice that there are words in *italics*. These are defined in the glossary at the end of the handbook.

Suggestions and comments about the contents or use of this guide are welcomed, and can be forwarded to CASAT.
Introduction
The previous version of this handbook was published eight years ago. Since then, more than 15,000 copies have been distributed across Canada and the United States.

The main goals of Understanding Child Sexual Abuse: A Guide for Parents & Caregivers are to:

• provide information about child sexual abuse;
• assist you in supporting and doing what is in the best interest of your child (i.e., advocating for your child);
• outline how professional systems respond to sexual abuse; and
• clarify support services and treatment options.

Given that each family’s situation is unique, this handbook is meant as a general guide, and it is not intended to take the place of professional counselling or legal advice.
DEFINING SEXUAL ABUSE

Child sexual abuse occurs when a person uses his/her power over a child or youth, and involves the child in any sexual act. The power of the abuser can lie in age differences, intellectual or physical development, a relationship of authority over the child, and/or the child’s dependency on him/her.

“Touching” is not the only way in which a child can be sexually abused. Sexual abuse includes acts such as: fondling, genital stimulation, mutual masturbation, oral sex, using fingers, penis, or objects for vaginal/anal penetration, inappropriate sexual language, sexual harassment, voyeurism, exhibitionism, as well as exposing a child to, or involving a child in pornography or prostitution.

The offender may engage the child in sexual acts through threats, bribes, force, misrepresentation, and other forms of coercion. Sexual abuse is usually an ongoing pattern of progressively intrusive sexual interactions. Most of the time, the offender is someone well known to the child and trusted by the child and/or family.
Defining The Age Of Consent

The *Criminal Code of Canada* sets out the laws regarding *consent* to sexual acts. Consent means that a person understands what s/he is agreeing to and what could happen as a result of the agreement. Children are not able to give informed consent to sexual activity because they cannot fully understand adult-child sexual contact or predict the consequences.

An *alleged offender* may claim that the child consented, but such a claim cannot justify sexual acts with a child. Under no circumstances should a child’s physical reactions to sexual stimulation (e.g., an erection) or lack of any signs of distress (e.g., complaints) be interpreted as consent or that the child is enjoying the interaction. Children can be manipulated and coerced into sexual acts that they may not understand.

The Age Of Consent

- Children under 12 can never legally consent to sexual acts.

- 14 is the legal age of consent for sexual acts.

- The *Criminal Code* recognizes that adolescents engage in exploratory sexual behaviour (i.e., “youthful sexual experimentation”). 12 and 13 year olds may not be charged criminally if consent to sexual involvement is mutual and there is no more than 2 years age difference between them. However, if one of the youth is in a *position of trust or authority* over the other, then consent is not valid. For example, it would not be against the law for a 13 year-old and 15-year-old to be sexually involved if they both consented, unless the 15-year-old was in a position of trust or authority (e.g., as a coach or camp counselor).

- The *Criminal Code* protects teens aged 14 to 17 from sexual exploitation by someone in a position of trust or authority. Teens in this age range may legally consent to sexual acts with someone who is not in a position of trust or authority. This means, for example, that a 15-year-old male can legally consent to sexual involvement with a 20-year-old female. However, if the 20-year-old is his tutor, she is in a position of trust or authority over him and would be committing an offence. His consent would not be valid.
TELLING ABOUT ABUSE

*Disclosure* is the process by which the suspected abuse comes to the attention of others. When children or youth tell about being sexually abused, they do not always go to their parents or primary caregivers. They may talk to someone else they trust, like a teacher or friend. Upon learning that your child may have been sexually abused, it is often difficult to understand why s/he did not tell you right away or why s/he disclosed to someone else.

It is important to understand that this is not unusual. It does not mean that s/he does not love or trust you. It may be that your child does not want to worry or upset you or may not be sure that you can cope with learning about what happened. Many children are embarrassed to disclose details of sexual abuse. Others may have been threatened or manipulated into keeping the abuse a secret. If your child does disclose to you, the section “Helping A Child Who Tells” has ideas regarding how to respond to a disclosure.
When & How Children Tell

Some children tell as soon as they have been abused, however, many children do not. Often children wait to tell for an indefinite period of time.

Some children are too young to understand that what happened to them was wrong and may not know to tell. Young children who are not yet speaking and children with special needs may not be able to communicate what happened, or indicate that they need help.

A child may not be able to clearly disclose what happened because young children do not understand time, have difficulty explaining the order of how things happened, and are still developing their memory skills.

Sometimes, children think they have told and no one is listening (e.g., “I don’t want to go to Uncle John’s anymore.”).

Young children are more likely to accidentally disclose. You may suspect that something happened to your child based on:

- things you see or hear during play;
- changes in his/her behaviour;
- overhearing something s/he tells a friend; or
- questions/comments that express specific fears or worries.

Youth are more likely to purposefully disclose by talking about the abuse or by asking for help. Some youth may begin by telling a little and watching how the listener reacts. Over time, once s/he feels believed, safe and supported, s/he may tell more.
What Might Keep A Child Or Youth From Telling About Abuse

Every individual reacts differently to sexual abuse regardless of the type, extent or duration of the abuse. There are many reasons that your child may not tell about the abuse. These are some feelings that may keep a child from telling.

**Fear**

- Children who have been threatened may believe that the threats will be carried out if they tell (e.g., the disclosure will result in the break up of the family).

- The child may be afraid of rejection, upset or other negative reactions, either by family, friends, or in some cases, by the alleged offender.

- The child may fear that people will treat him/her differently if they know about the abuse.
Confusing & Conflicting Feelings

- The child may be confused when s/he has been abused by someone trusted, leaving feelings of anger, betrayal or deep sadness. “Why would someone who loves me do something like this?”

- The child may feel confused because s/he loves or cares about the abuser - should s/he be loyal to the abuser or tell what happened?

- It can be very confusing and difficult to understand if the child’s body responded to the abuse.

Self-Blame & Guilt

- The child may think s/he deserved the sexual abuse because s/he wanted love, attention or accepted presents/treats from the alleged offender.

- Some children feel guilty because they did not try to stop the abuse, while others feel guilty because they did try to stop it, but the abuse still happened.

- Some children who are abused multiple times might feel guilty because they did not tell about the abuse after it first occurred.

Feeling Vulnerable & Powerless

- The child may feel powerless and vulnerable (more at risk) because nothing s/he did stopped the abuse, or there was no way to stop it. The child may think that no one has the ability to stop the abuser.

- Some children are isolated, with no one to help or support them, or they feel there is no one who can protect them or be there to help.

- Children are highly dependent on their parents/caregivers for their safety, well-being and protection, and may worry about who will take care of them if the abuse is disclosed.
### Possible Indicators Of Sexual Abuse

Some children may display signs, symptoms or clues leading you to suspect that sexual abuse has occurred. These are called *indicators*. Indicators may be physical, behavioural and/or emotional.

If you notice any of the indicators, do not assume that this means your child was sexually abused. Some indicators may be related to something else that is happening such as a death in the family or marital separation. If you are worried that your child may have been sexually abused, call a *Children’s Aid Society* (CAS) to talk about your concerns.

### Possible Physical Indicators Of Sexual Abuse

- Unexplained injuries to breasts, genital or anal areas.
- Bloody clothing.
- Blood in urine or stool.
- Complaints of pain in the genital or anal areas.
- Unusual or excessive itching in the genital or anal areas.
- Pain while sitting or walking.
- *Sexually transmitted infections.*
- Pregnancy.

(See Chapter 4, the section called “Medical Attention” for physical indicators that need medical attention.)
**Possible Behavioural/Emotional Indicators Of Sexual Abuse**

- Having more sexual knowledge or awareness than expected for the child’s age and stage of development.
- Regressive behaviour (behaviour that seems more like when the child was younger, e.g., thumb-sucking, bedwetting).
- Sexual behaviour with other children involving force or secrecy.
- Copying of adult sexual acts.
- Sleep disturbances (e.g., bad dreams).
- Writing or artwork about abuse.
- Unexplained changes in mood (e.g., becoming withdrawn or aggressive).
- Unusual fear of intimacy or closeness.
- An unusual fear of certain individuals who have particular characteristics (e.g., a deep voice).
- Fear of going to a familiar place.

- Sudden changes in eating habits (e.g., unexpected weight loss or gain).
- Changes in school performance.
- Developmental delays (e.g., not progressing in language or motor development as expected).
- Symptoms of post-traumatic stress disorder (symptoms related to a traumatic event that do not go away, for example flashbacks, which are memories that make a person feel that s/he is back in a situation. Anxiety, heart palpitations and other signs of stress or fear often happen with flashbacks).
- Physical complaints (e.g., headaches and stomachaches) with no known reason.
- Running away.
- Suicidal thoughts or attempts.
- Engaging in self-harming behaviour (e.g., alcohol or drug use/abuse, cutting, prostitution).
Helping A Child Who Tells

How you react and what you do when your child tells you about being sexually abused is very important with respect to how s/he will ultimately cope with what happened. A child who feels believed and supported by at least one parent or caregiver is much more likely to recover from the abuse.

If you see or hear something that makes you suspect child abuse, try to keep the following in mind. (See Chapter 3, Reporting Suspicions of Child Sexual Abuse.)

1. **Control your emotions**
   Try to be calm. This may help your child open up. Control any anger you may have for the alleged offender since your child might mistake it for anger directed his/her way.

2. **Offer comfort**
   Reach out, hold and comfort your child. Remember to respect your child’s feelings and reactions. Be willing to give some space. Not all children want to be touched by anyone at this time.

3. **Reassure your child by telling him/her:**
   - this happens to other children too;
   - it was brave to tell and you are proud of him/her;
   - you will do what you can to help and protect him/her;
   - you are there to offer your love and support; and
   - s/he can always come to you about anything.

4. **Be aware of your child’s age and skills.**
   Let your child use his/her own words, including slang, since it might be the only way s/he knows to describe what happened. Be patient, it might be hard for him/her. Do not correct or change the words s/he uses, even if the details are not clear. It is extremely important for the investigation that only your child’s words are used when telling what happened.

5. **Only ask questions that allow your child to tell you what happened in his/her own words.**
   “Can you tell me what happened?”
   “What happened next?”
   Let your child tell as much as s/he is ready to tell.
6. **Avoid leading questions, scary words, or pushing too hard for details.**
   For example, do not ask things like, “Did he touch you there?” or “Are you sure it was Uncle?”

   Avoid words that may be frightening (e.g., rape, incest, molestation, child sexual abuse or jail).

   Avoid asking “why” something may have happened. Pushing for details or asking why your child did not say something earlier may cause him/her to feel blamed instead of supported.

7. **Tell your child what will happen next.**
   Do not make promises that you may not be able to keep. For example, do not agree to keep what the child said a “secret.” It is important to explain to the child that some secrets must be shared in order to get help, or to keep people from being hurt. Tell the child the information will be shared with people “whose job it is to help kids.”

8. **Answer questions simply and honestly.**
   If you do not know the correct answers to your child’s questions, do not be afraid to say, “I’m not sure” or “I don’t know.” Tell your child that you will try to get answers to whatever questions may arise.

   Do not make up answers. For example, if asked, “Will Daddy have to go to jail?” you may have to say, “I don’t know. Other people decide that.”

   Your child does not need or want to know everything. The questions s/he asks will let you know how much to share.


If you suspect that a child may have been abused or is at risk for abuse, it is not up to you to try to prove your suspicions. You must report this information to a Children’s Aid Society.
Do not be afraid to revisit anything you said or forgot to say when your child first told you about the abuse.
How You Might React To Learning That Your Child Was Sexually Abused

Learning that your child may have been sexually abused can be very distressing. Finding out who may have abused your child can be overwhelming.

It is not unusual to feel conflicted when the alleged offender is someone you and/or your child love, respect and trust. You may feel like you are on an emotional roller coaster.

An allegation or suspicion of sexual abuse may have a greater impact on a parent/caregiver who was sexually abused as a child, particularly if it was never disclosed. You may have unresolved issues and re-experience “old feelings.” These may affect your ability to help your child and other family members. It may be a good time to consider counselling for yourself. (See Chapter 7, Support & Treatment Services.)

You might experience:

- Initial denial or difficulty believing
- Anger
- Guilt
- Sadness
- Fear
- Confusion
Suggestions To Help Your Child & Family Cope

The following suggestions may assist you and your family in coping with the disclosure and subsequent investigation.

1. Minimize disruptions in the family.
   This may be a difficult time for you and your family. Try to maintain consistent routines and limits, avoiding too many new and challenging experiences and unnecessary separations from your child.

   Your other children may be confused, afraid of what is happening, or feel guilty for not protecting their sibling. Allow them to safely express their thoughts and feelings. They may also have experiences they need to discuss.

3. Accept that your child may regress.
   Your child might have feelings, fears, and behaviours that seem out of control or “babyish.” Reassure your child that these are expected after this type of experience. Let him/her know that, with time and help, s/he will feel more like before. For the time being, you may need to supervise your child more closely, setting clear limits on aggressive or worrisome behaviour.

4. Help your child feel safe at bedtime.
   Some children may need nighttime comfort and ways to cope with bedtime fears. Your child may tell you what is needed (e.g., a nightlight, or leaving the bedroom door open). Try to limit the chance of nighttime reminders of what happened. For example, if the abuse occurred in your child’s bedroom, rearrange the furniture or switch rooms. You can ask a counsellor for other ideas.

5. Get help from someone you trust.
   Right now you may be questioning yourself as a parent, your ability to judge people, and the world as a safe place. You may be angry. There may be times when you want to run away or harm the person that abused your child. All of these feelings are to be expected. Blaming yourself can interfere with your ability to support and care for your child. It is important to get help from someone you trust, not only for your child, but also for yourself.

6. Talk to a professional.
   You may experience reactions similar to those of your child. You may find yourself thinking about the abuse and wondering why it happened. Accessing appropriate
community resources may help you with emotional, legal and/or safety issues. You may want to tell the child’s doctor about the allegation of abuse. Your child may need reassurance if s/he is worried about his/her health, development and/or sexuality.

7. Consider how you express your feelings.
When you are speaking with your child, try to remain calm. Remember that minimizing or exaggerating what happened, or expressing intense feelings (e.g., threatening the alleged offender) may cause a child to feel overwhelmed or frightened. You may be upset, but make sure your child knows that it is not with him/her.

8. Let your child know that s/he does not need to worry about you.
Children and youth may not understand what happens after they tell about sexual abuse. They may be surprised and confused by how adults react. If your child senses that you cannot cope, s/he may feel a need to look after you, making it harder to get the support needed from you. Let your child know that you have people you can talk to. Your job is to look after him/her.

9. Keep a journal to track changes.
A journal can help you notice changes in your child’s behaviour. It can also help you monitor how s/he is managing at home, at school and with friends.

Writing down what your child says about the abuse, and your observations of new or changing behaviours may help the people investigating what happened. In addition, a journal can be a valuable tool in the therapeutic process. A journal can also help you express your feelings in a private place.

10. Remember to do fun stuff, too.
Family outings and fun activities that your child enjoys will help to reduce the stress for everyone.

While it is important that you provide a stable source of support for your child, it is also important that you have strong supports for yourself.
When A Child Recants

Some children *recant* or “take back” the original allegation of abuse, claiming it is not true. This can occur at any time after the first disclosure. If a child recants, it does not mean that the abuse did not occur. The investigation does not automatically stop.

Some reasons why a child may recant include:

• lack of support from family or friends;
• threats or pressure from family members, friends and/or the alleged offender;
• difficulty coping with the anxiety, disruption and intrusion caused by the investigation;
• feeling responsible for the upset in the family, and fear that the family may fall apart;
• a response to *charges laid* against the alleged offender, including fear of the alleged offender going to jail; and
• worry about court and/or having to *testify*.

If a child recants, the best way for a parent/caregiver to respond is to continue to provide unconditional love and support. It can be harmful to your child and the investigation if anyone:

• gets angry with the child or suggests that s/he lied;
• pressures your child to change his/her account of what happened;
• tries to tell him/her what really happened; and/or
• coaches your child to say that something did or did not happen.
REPORTING SUSPICIONS OF CHILD SEXUAL ABUSE

Summary Of Legal Requirements

In Ontario, the *Child and Family Services Act* describes what to do if you suspect that a child was abused or is at risk for abuse. A child is defined as a person from birth until his/her 16th birthday. Below is a summary of what the Act says about reporting.

• If there is a suspicion of child abuse or neglect, everyone, including individuals who have professional or official duties involving children, must immediately report these concerns to a local Children’s Aid Society (CAS).

• If you suspect that a child was abused or is at risk of abuse, you must make the report and cannot ask anyone else to make the report for you.

• If you have more suspicions or information about abuse, then a Children’s Aid Society must be contacted again, even if other reports have been made before.

If a child is in immediate danger, call 911 for police.
Making A Report Of Suspected Child Abuse

You only need to have a suspicion of child abuse or neglect in order to make a report. It is not your responsibility to prove the abuse. If you have any doubts about whether or not a situation should be reported, it is best to consult with a child protection worker at a CAS to discuss your concerns and ask for guidance. No one else is in a legal position to decide if a report should be made. If this is your first time calling a CAS, let the worker know. You can report a suspicion of child abuse anonymously (i.e., you do not have to leave your name).

In some communities the Children’s Aid Society is known as Family and Children Services. Sometimes the agency is specific to religion and/or culture. If known, you can call the CAS that matches the child’s religion and/or culture. If you are uncertain, contact any CAS to report your suspicion.

Contact information for a CAS can be found:
- under “Emergency Numbers” in the phone book;
- in the business listings of the telephone directory;
- at the local or regional police department;
- by calling 411 for directory assistance; and

You can contact a Children’s Aid Society 24 hours a day, 7 days a week to report your suspicions. If you call after regular business hours, you will probably get an answering service and will have to leave a message and phone number where you can be reached. A child protection worker should call you soon after. Just leaving a message is not a report - you need to speak with a worker.
Failure To Report
Individuals who, in their professional or official duties work with children and do not report a suspicion of child abuse can be charged and fined up to $1,000.

Protection From Liability
If a person reports suspected child abuse, s/he cannot be held liable if it can be proven that the report was made in good faith and not to cause trouble for anyone.

Confidentiality
Some relationships are normally considered confidential or private, for example, between a doctor and patient or clergy and congregation. However, a confidence cannot be kept if child abuse is suspected. No matter what the relationship is between people, one must always follow through on the legal duty to report suspicions of child abuse. The only confidential relationship for the purpose of reporting child abuse is that between lawyer and client.

If child abuse is suspected and not reported, the child(ren) may be left in danger of further abuse. It is the responsibility of a Children’s Aid Society to investigate, with police where necessary, and to decide on the best plan for the protection of the child.
THE INVESTIGATION

The guidelines that a Children’s Aid Society (CAS) and police follow when child abuse is suspected are often set out in a specific document. In Toronto, this is known as the “Protocol For Joint Investigations Of Child Physical & Sexual Abuse.”

A child protection worker and police communicate with one another when a suspicion of child sexual abuse comes to either system. They will discuss the information to decide if there will be a joint investigation. If this is decided, a child protection worker and police officer form the Investigative Team. They work together to plan the initial steps of the investigation.

Ask the child protection worker/police officer for a business card. They are your best source of answers for questions about the investigation.
When there is an allegation of sexual abuse, it is the job of a child protection worker to ensure the safety and protection of the child.

The police investigate allegations of sexual abuse to determine if there is enough evidence to lay a criminal charge.
CAS & Sexual Abuse Investigations

In Ontario, the protection and safety of children under 16 are central to the role of a CAS. When there is an allegation of sexual abuse, the role of a child protection worker is to investigate that allegation and ensure the child’s safety. A CAS will also investigate allegations of sexual abuse if a child is over 16 and is in the care of a CAS.

Reporting to a CAS about one specific disclosure or suspicion of sexual abuse may also result in the investigation and/or protection of other children who may have been abused or are at risk of abuse.

An alleged offender may be in charge of other children (e.g., his/her own family or students), and/or may be in a position of trust or authority over children who also need to be protected.

Wherever possible, the CAS and police will take immediate action to separate the alleged offender from the victim until the investigation is completed. The alleged offender should have no contact with the child at this time as this could put the child at risk for further abuse.

Police & Sexual Abuse Investigations

Police investigate allegations of sexual abuse to determine if a criminal offence has occurred.

The police officer is responsible for the criminal investigation, identification of the alleged offender, and the arrest and laying of criminal charges where there is evidence to do so.

If the youth who is suspected of having been abused is 16 years-of-age or older, it is typical for only the police to investigate unless younger siblings/children are or may be at risk.

At some point, the police may no longer be involved if there are no grounds for continuing a criminal investigation. The CAS may continue to be involved if there are protection issues. In other cases, police may continue to investigate without a CAS.

The police officer conducting the criminal investigation may advise a parent/caregiver to not talk about the evidence (i.e., details of what happened) with the child or others, as this could have an impact on the criminal proceedings.
Basic Steps In A Child Sexual Abuse Investigation

1. Suspicion of Sexual Abuse
2. Report Made
3. Investigations Required
4. Police Criminal Investigation
   - No Charges
   - Charges
     - Criminal Proceedings* against the alleged offender
       *(See Chapter 6)
   - Not Verified
     - Child Protection Investigation
       - Verified
       - Not Verified
         - File
           - If no protection concerns
           - For Treatment
         - Close File
           - If no protection concerns

* Court Preparation & other support for the child and/or family
Typical Steps In A Child Abuse Investigation

• A child protection worker is assigned.
• The person who reported the suspicion is interviewed.
• The child protection worker searches CAS records for past or present contact with the child, family and/or the alleged offender.
• When appropriate, police are contacted. A CAS and police may plan the next steps of a joint investigation.
• The police officer will search appropriate police records for any previous contact with the alleged offender.
• The child protection worker sees the child to assess his/her immediate safety. This may include an interview by the child protection worker and/or police.
• Siblings or other children who may be at risk or may have been abused by the alleged offender may be interviewed (see the section “Your Child’s Interview”).
• If needed, a medical assessment of the child is arranged (see the section “Medical Attention”).
• Other witnesses who are identified may be interviewed.
• The child’s parent/caregiver is interviewed by the child protection worker (with police, if appropriate), unless the parent/caregiver is the alleged offender.
• The alleged offender is interviewed by police first. The child protection worker may, when appropriate, interview the alleged offender.


Possible Reactions To An Investigation

The investigative process may stir up memories and intense feelings for the child, other family members and caregivers. Some reactions may include:

• feeling a loss of control or a sense of confusion;
• anger at the person who reported the abuse and/or the authorities for intervening;
• wondering if reporting was the right thing to do;
• anxiety that the CAS/police are not following up as quickly as you want, or are moving too quickly;
• fear of what is going to happen;
• worrying about the impact on the child and family;
• relief that something is going to be done; and
• comfort that the child is safe.

Your Child’s Interview
Following a report of suspected child sexual abuse, your child may be interviewed. Specially trained child protection workers and police officers conduct the interview(s). Where appropriate, they will complete the interview(s) together.

The interviewers will ask your child for a full account of what happened. It is possible that more than one interview may be required, particularly with younger children.

Having A Support Person At The Interview
A support person is any person from whom your child wishes assistance during any part of the investigation. If your child is of Canadian Aboriginal ancestry, s/he and/or your family may want a Band representative to be included in the interview.

It is generally best if the investigators conduct the interview without any other person(s) present. This will allow your child to speak without direct or indirect pressure from a loved one or someone in authority. The presence of a support person should always be based on the needs of the child versus the needs or wishes of others.

In order to save their parent(s) from further upset, many children, and particularly youth, feel more comfortable with a different support person such as another relative, a teacher or child care provider. If a support person is to be present, the Investigative Team will:

• discuss the possibility that s/he may hear sensitive and distressing information and the importance of remaining neutral to avoid influencing the disclosure (e.g., not to coach or encourage the child);

• ask the person to sit behind or next to the child (but not in direct eye view) so that the child can be comforted by the support person’s presence, but not influenced by his/her reactions; and

• tell the support person that if s/he is present during an interview, there is a possibility of being called as a witness in a court proceeding to testify (i.e., served with a subpoena). If this happens, it is possible that the support person may not be able to be present in the court room when the child is giving testimony.
The child may be uncomfortable disclosing details of the abuse in the presence of a support person. The child may not speak openly because the information may be embarrassing or there may be fear of upsetting others.

Consent For The Interview

The Investigative Team makes every effort to get consent from a parent/caregiver before interviewing a child. In some situations, the investigators must decide whether or not it is in your child’s best interest to contact you before interviewing your child. An interview may take place without your prior knowledge, and without a parent/caregiver present, if:

• one of the parents is the alleged offender;

• there is a concern that your presence will put your child’s safety at risk or affect his/her ability to speak honestly;

• the alleged offender is a family member and there is concern s/he may contact the child first;

• it is known that the child’s parent supports the alleged offender; or

• a parent cannot be reached and it is in the best interest of the child to proceed immediately.

Your child may be seen first at the school or child care setting. When the interview is over, it is the responsibility of the Investigative Team to tell you about the interview as soon as possible.
**Location Of Child Interviews**

In order to minimize trauma to your child, the Investigative Team will make every effort to conduct the interview in a neutral place considering your child’s needs and best interests.

Factors that the investigators take into consideration when determining where to interview the child include:

- where and how the disclosure occurred;
- where the child will likely feel safe (e.g., avoiding the location where the abuse occurred);
- the whereabouts of the alleged offender;
- accessibility of a suitable location for a child with physical challenges;
- availability of mobile recording equipment;
- access to a child-friendly, recording facility; and
- availability of a qualified interpreter or specialized professional for a child with special needs.

**Recording The Interview**

The investigative interview(s) with your child is likely to be recorded. Recorded statements provide the best possible account of the interview. Other advantages include:

- reducing the number of times your child has to give a full account of what happened;
- less chance that important information is lost due to the inability to remember details as time goes on;
- a record of the child’s account of what happened in his/her own words, without leading or suggestive questions; and
- the possibility that the recording(s) of your child’s interview may be admissible in court in addition to his/her testimony, especially if there is a long delay before court proceedings.

Before the recording equipment is turned on, the Investigative Team should discuss the following with your child and parent(s)/caregiver(s):

- what the recording is for;
- why recording the interview is a good idea; and
- who will have access to it.
Sometimes investigators may decide that it is inappropriate to record your child’s interview. Whether or not to record an interview is up to the Investigative Team.

Reasons for not recording include:

- recording the event was part of the abusive incident(s);
- the child and/or parent/caregiver objects to the procedure and offers a legitimate reason(s) why recording is not in the child’s best interest;
- your child begins to disclose and stopping the interview in order to record it would seriously inhibit the process of disclosure; and
- the interview had to take place where neither recording facilities nor a mobile unit was available.

After The Interview

After interviewing your child, the child protection worker and police officer will discuss the interview and decide what to do next, including:

- the need for more interviews;
- if any other information is needed (e.g., a medical consultation);
- discussing if criminal charges will be laid;
- if it is necessary to apprehend the child; and/or
- planning for the child’s safety and protection (see Chapter 5, “Involvement with A CAS After The Investigation” and “Family Court”).
Medical Attention

The issue of whether or not medical attention is needed may be confusing. There are no definite procedures to follow, as each case of child sexual abuse is unique.

The following information may provide guidance for you when choosing the best course of medical action. The child protection worker and/or police officer conducting the investigation will also provide guidance, often in consultation with medical personnel. In any medical situation, parents and children/youth have the right to ask questions.

Under the *Child and Family Services Act*, a child may be apprehended for purposes of a medical examination if parental consent is not obtained. If treatment is required without parental consent, the doctors may proceed only if it is a medical emergency. In all other circumstances, a Court Order under the *Child and Family Services Act* is required.

Some hospitals have specialized programs offering care, support and assessment for children and teens who have experienced sexual abuse. For example, in Toronto there is the Suspected Child Abuse and Neglect (SCAN) Program at the Hospital for Sick Children.
Urgent Medical Situations
An immediate medical examination is advisable if:
• your child is injured;
• your child has physical symptoms (e.g., pain, bleeding);
• there was recent anal, vaginal, oral penetration or attempted penetration;
• there are other medical concerns (e.g., pregnancy, sexually transmitted infections);
• your child and/or family is in crisis; and/or
• the collection of forensic evidence is indicated.

The best chance for the successful collection of forensic evidence from a medical examination occurs when the child has not bathed, has not gone to the bathroom or has not changed clothes following the incident.

Parents and youth often expect that a medical examination will prove that the sexual abuse took place. Even when you and your child follow these steps, few medical examinations result in the finding of forensic evidence to prove that the crime occurred.

Non-Urgent Medical Situations
Your child can be seen by the family physician if:
• your child/family needs reassurance;
• forensic evidence is unlikely;
• your child has no current injuries; and/or
• there are no specific medical concerns or symptoms.

Any medical examination that does not provide clear evidence that sexual abuse took place does not mean that abuse did not happen. It may mean that the medical examination did not result in enough information to make a conclusive finding.
POSSIBLE OUTCOMES OF A CHILD

The role of a Children’s Aid Society (CAS) is to make sure your child is safe and protected. The child protection worker will assess if the parent(s)/caregiver(s) is able to protect the child and provide support.

If the investigation finds that a child has been abused and is at risk for further abuse, the CAS must take immediate action to protect the child (e.g., work together with police to try and remove the alleged offender, ask the court for a Supervision Order with appropriate conditions).

There are two possible findings of a child protection investigation. The allegation can be verified or not verified.

To verify an allegation of sexual abuse means that based on all the facts, it is more likely that abuse did happen than did not. The investigators must carefully consider all the information and facts gathered during the investigation to determine if an allegation is verified.
A finding of not verified does not mean that the child investigators think that your child lied. One or more of the following might be why the abuse is not verified:

- your child might not have been sexually abused;
- there might be another explanation for your child’s behaviour and/or disclosure;
- the allegation could not be confirmed because the evidence was insufficient, inconsistent or contaminated (i.e., influenced by another factor); and/or
- your child was unable to communicate what happened (see Chapter 2, “When & How Children Tell”).

**Involvement With A CAS After The Investigation**

Regardless of the child protection findings, the child protection worker may refer you and your child to support services in your community.

A CAS may stay involved with your family after the investigation if it is determined to be in your child’s best interest. This decision is based on all of the facts that are available. It does not have to be a conclusion based on *proof beyond a reasonable doubt* like in a criminal court. Rather, it has to be a conclusion based on facts showing there is a reasonable probability or likelihood (a balance of probabilities) that abuse occurred or may occur.

The following are examples of factors a CAS will consider to determine if they will remain involved with a family.

- Your child was abused by a parent or immediate family member, and is at risk to be abused again.
- Your child was abused by someone outside the family and there is reason to believe that a parent directly contributed to the abuse or that a parent’s attitude and behaviour leaves the child at risk (e.g., the parent does not believe the child).
- There is a possibility of a relationship between the alleged offender and the child, particularly if a parent/caregiver allows contact between them.
- The alleged offender may have access to other children, including your child’s siblings.
- The alleged offender has a previous conviction(s) related to sexual abuse.
Family Court

A CAS tries to work with families on a voluntary basis. However, a CAS can take further action to protect your child and any siblings and/or any other children at risk on a longer-term basis if a court finds the child to be “in need of protection” under the *Child and Family Services Act*.

Whether or not criminal charges are laid is not a factor in the decision to begin child protection proceedings. The determination of whether or not a child is in need of protection is decided separate from the criminal process.

A CAS may go to Family Court if there are concerns regarding the safety of your child and a voluntary agreement is not possible.

Some of the actions for which it might seek permission include:

- restricting the alleged offender’s access to his/her own children and/or any children at risk;
- undertaking a medical assessment for your child, the alleged offender and/or parent(s);
- requiring treatment or counselling for the alleged offender, child and/or allied parent (this is a parent who is not suspected of abusing the child and who supports the child);
- developing a process for re-introducing the offender to the family (if the offender was separated from his/her family and/or incarcerated), considering the wishes of your child and other family members; and/or
- if necessary, apprehending your child.
POSSIBLE OUTCOMES OF A CRIMINAL

The job of police is to decide if there are reasonable grounds to lay charges under the *Criminal Code of Canada*. The two main outcomes of a police investigation are charges laid or no charges laid. There are approximately 20 sexual offences under the Criminal Code of Canada that apply to child sexual abuse. The Criminal Code defines these by the:

• nature of the acts committed (what happened);

• age of the child;

• age of the alleged offender; and

• relationship between the child and alleged offender (e.g., some charges may relate to whether or not the alleged offender is a person in a position of trust or authority with respect to the child). (See Chapter 1, “Defining Sexual Abuse - Defining the Age of Consent.”)

If charges are not laid, it does not necessarily mean that the abuse did not happen, or that the police do not believe that the abuse occurred.

In some cases, the police may believe that your child was
sexually abused, but the alleged offender is not charged. The police may not have been able to gather enough evidence to lay charges, or because of a child’s young age, s/he was unable to communicate what happened. The police will notify you, and your child where appropriate, if charges are laid.

**Conditions Of Release**

In most cases when criminal charges are laid, the police arrest the alleged offender and:

- take him/her to the police station, and release him/her with or without conditions; or

- hold him/her in custody until a release hearing to determine detention or conditions of release.

Usually, efforts are made to set a release hearing (also called a “show cause” hearing) promptly following the laying of charges. Sometimes an accused person is held in custody if it can be shown that s/he is a serious danger to others, or may not show up for the first court appearance.

For an accused person to be released, s/he often must agree to follow a number of specific conditions, which are rules that the alleged offender must follow. In many cases, input from the child and/or the child’s family is considered when determining the conditions of release. If you are concerned about the accused person harming you or your child, tell the police, the Children’s Aid Society (CAS), or the Crown Attorney. The police complete a report that includes an opinion of whether or not the accused should be released, and if so, under what conditions. Any concerns from a CAS can also be included.

Examples of conditions of release are:

- no direct or indirect communication with the victim;

- a “no contact order” (an order that prohibits the accused to have contact with certain people, for example, the child or any other children under a specific age);

- no use of weapons, alcohol or drugs;

- regular reporting to a police officer, remaining in a particular geographical area and/or notifying the police of any change of address or employment;

- not to be within a set distance of any place where the child may be found;
• depositing a sum of money or some other valuable form of security to the court (usually necessary when the accused person does not live in the jurisdiction); and/or

• the requirement of sureties (someone else signs a paper taking responsibility for ensuring that the accused appears at the next court hearing).

A victim has the right to know the conditions upon which an accused person is released, and there is a system in place for notifying victims of the results of a release hearing. Ask the police officer, child protection worker or Victim Witness Coordinator to provide this information to you. Where appropriate, the police or child protection worker may inform your child’s school principal and/or child care supervisor of release conditions (e.g., if the accused is not to be within so many metres of any place where your child may be). In the case of a young person who sexually offends a child, information disclosed to the school principal/child care supervisor to ensure the safety of students, staff or other people is shared in accordance with the Youth Criminal Justice Act.

If the accused breaks any of the conditions of release, police should be contacted immediately. The terms of his/her release may be changed, or s/he may face additional charges.

If there are concerns for the child or family at any time regarding risk of harm from the accused, it is important to notify the police of these concerns. The victim or the victim’s family can make an application to the Ontario Court Provincial Division for a Restraining Order, which restricts the contact between an alleged offender and other persons.

Assignment Of A Crown Attorney

Where a person is charged with a sexual offence against a child, a Crown Attorney is assigned to the case. S/he will decide if the case will proceed to court based on the evidence. The Crown Attorney may also consult with the police and a CAS. If there is a trial, it will be heard in criminal court, and will be prosecuted by a Crown Attorney. Once criminal charges have been laid, only the Crown Attorney can withdraw the charges. The standard of proof required for a conviction in criminal court is proof beyond a reasonable doubt.
If the defense lawyer wants to speak with you or your child, each of you has the right to say “no.” If you choose to speak with the defense lawyer, you may want to consult with the Crown Attorney or the police before doing so, or hire your own lawyer. Information shared with the defense lawyer may be used in court. The Crown Attorney has to share all evidence in his/her possession with the defense lawyer, but the defense lawyer does not have to share his/her information with the Crown Attorney.

Your child should have an opportunity to meet with the Crown Attorney who will prosecute the case. S/he will review your child’s statement and begin to develop rapport with your child. Usually, this meeting is set up by someone from the Victim Witness Assistance Programme who may also be at the meeting with the Crown Attorney. A good rapport between a child witness and the Crown Attorney helps make the child more comfortable. You, your child and the Crown Attorney should have an opportunity to discuss:

- your child’s reaction to the abuse and feelings about court;
- any concerns regarding the impact of court; and
- any special needs your child may have.

Speaking with the Crown Attorney is often a good indicator of a child’s verbal skills, level of concentration, anxiety level, and ability to talk about what happened with someone else. Knowing your child’s age, developmental abilities, and emotional state will help the Crown Attorney determine if it is appropriate for your child to testify.
Criminal Court

Preliminary Hearing

Preliminary hearings only apply to adults accused of certain charges. Most criminal charges are heard in Provincial Court, where cases go straight to trial without a preliminary hearing. All criminal court matters that involve an accused who is a youth between the ages of 12 and 17 go straight to trial.

The purpose of a preliminary hearing is for a judge to hear some of the evidence to determine if there is enough to proceed to trial. The Crown Attorney, the alleged offender and his/her lawyer attend a preliminary hearing. The Crown Attorney decides which witnesses will give evidence at the hearing. In most cases, the child is required to testify, which means that the child will appear in court to give his/her account of what happened.

If you are a witness, it is likely that you will have to remain outside the courtroom while your child testifies, unless the Crown Attorney agrees to have you testify first. The defense lawyer has the opportunity to cross-examine the witnesses, including the child. The judge decides after hearing the evidence whether or not the case will proceed to trial or be dismissed.

Trial

There is a delay between the preliminary hearing and the beginning of a trial. The purpose of a trial is to determine if an accused person is guilty of the charges that have been laid against him/her. In cases where a preliminary hearing has already happened, the accused person has the choice to be tried either by a judge or a jury. Both the Crown Attorney and defense lawyer have the opportunity to call witnesses to testify so that all the evidence can be presented. After the trial, the judge will announce the outcome of the trial. This is called the verdict. Deciding the verdict could take several weeks while the judge or jury reviews the evidence.

Criminal trials can often be very long and difficult. In cases where the alleged offender pleads guilty to the charges laid, the necessity for a trial can be avoided and the case can move directly to a sentencing hearing. In a sentencing hearing, the Crown Attorney and defense lawyer ask for a punishment they each think is appropriate, and the judge makes the final decision. Sometimes an alleged offender will plead guilty to a lesser offence in exchange for a lighter sentence. This common practice is known as a negotiated settlement. This process between

Possible Outcomes Of A Criminal Investigation
the defense lawyer and the Crown Attorney may avoid a trial and relieve the child of having to testify. The Crown Attorney may discuss this with you and your child, however, the final decision to make an offer to settle is up to the Crown Attorney.

**Testimonial Aids**

There are provisions in the *Criminal Code of Canada* that are designed to make testifying less stressful for children. These are referred to as testimonial aids. The Crown Attorney may discuss the use of any of the following testimonial aids to assist your child, although the judge has the final decision:

- the use of closed circuit T.V. allowing your child to testify outside the courtroom;
- a screen that blocks your child’s view of the accused (the possibility of seeing the alleged offender is a significant fear for many children);
- excluding the public from the courtroom (at any time during the proceedings, the judge can require that spectators leave the courtroom);
- a ban on the publication of your child’s name;
- admission of the recording of the investigative interview, providing the child adopts its contents and is available for cross-examination (see Chapter 4, “Recording The Interview”); and/or
- allowing a support person to sit with, or stand next to the child in the witness box (if the support person is a witness, it is likely that s/he will have to remain outside the courtroom while the child testifies).

There are other supports and aids for children that are not in law. You and the Crown Attorney can discuss if any of the following could be provided to assist your child in testifying:

- accommodating your child’s daily routine (e.g., naptime, school schedule) and attention span;
- a child-friendly waiting room for child witnesses;
- use of communication aids (e.g., drawings, writings, photographs, a microphone);
- modifications for a child with special needs (e.g., a hearing impairment, speech impediments, developmental
delay, physical impairment and/or chronic illness) including calling upon individuals who can assist in overcoming any communication barriers;

• a booster seat;

• allowing your child to hold a comfort object (e.g., a stuffed animal or blanket); and/or

• washroom and snack breaks.

The legal system can be confusing and overwhelming for most people. If you have any questions, ask the police, the Crown Attorney or the Victim Witness Coordinator.

Possible Outcomes Of Criminal Court

The judgment of each case that goes to court is based on the evidence presented and there is no set formula to determine the outcome. The judge or jury will consider all of the evidence presented. The alleged offender may be found guilty (beyond a reasonable doubt) or not guilty (the judge or jury have a reasonable doubt). If found guilty, the judge will decide what punishment is appropriate for the criminal behaviour of the accused. This is called the sentence.

Possible sentences include any one or combination of the following:

• jail time (incarceration);

• probation (usually with conditions such as reporting to a probation officer, not having contact with the child);

• conditional sentence (served in the community, usually involving some form of house arrest or curfew; if the offender does not comply s/he can go to jail);

• paying a fine;

• completing community service; and/or

• attending therapy or counselling.
Victim Impact Statement

If the trial results in a conviction or the alleged offender enters a guilty plea, the police officer may supply a Victim Impact Statement form to you and/or your child.

The Victim Impact Statement provides an opportunity to express both the emotional and physical impact of the abuse. Completing this fill-in-the-blank type form is entirely voluntary. A Victim Witness Assistant Programme or Toronto Child Abuse Centre can help you complete this form.

Victim Impact Statements are also provided to the defense lawyer. The victim(s) has the right to read this statement to the court. Although unlikely, the victim may be cross-examined by the defense lawyer on the details of the Victim Impact Statement.

Talking To Your Child After The Trial

It is important to reassure your child that s/he is not responsible whether or not the alleged offender is convicted; that is the role of the adults. If the accused is found not guilty, it does not necessarily mean that the judge/jury did not believe what your child said. A child’s testimony is only one part that determines the outcome of the case.

Your child’s responsibility was to tell the truth. Offer praise for the courage it took to participate in the legal process.

Once court is over, the goal is to help your child feel secure and move on with a healthy life.
SUPPORT & TREATMENT SERVICES

The impact of sexual abuse and the events that follow can affect your family in many ways. Counselling (also described as treatment or therapy) provided by a trained professional offers a safe place to express feelings surrounding the abuse and resolve any unanswered questions. As a parent or caregiver, it can be difficult coping with your own feelings and needs in addition to those of your children. These feelings can be very intense. This is especially true when your spouse or another member of your family is the alleged offender. In such cases, loyalty issues arise that can be confusing.

An allegation or suspicion that your child has been sexually abused may have an even greater impact on a parent or caregiver who has been sexually abused, particularly if the abuse was never disclosed. There may be some unresolved issues that are re-experienced. These may affect your ability to help your child and other family members. If you have experienced abuse, it may be the time to consider individual counselling for yourself.
The Benefits Of Counselling

The decision to tell people other than a Children’s Aid Society (CAS) or the police about the sexual abuse requires careful consideration. It is important to talk with your child about who must be told and why. Family, friends, teachers, or others may wonder about changes in the child and may be able to offer support if they know what happened. However, not everyone is able to respond appropriately. Your child’s feelings about who should be told need to be respected. A professional counsellor can assist you in sorting this out.

Counselling can help your child:

• address symptoms such as sleep disturbances, behaviour changes, and fears;

• identify and address thoughts of what happened and why;

• explore things like anger, sadness, responsibility, and guilt;

• identify who to talk to about the abuse;

• resolve issues of self-esteem and self-confidence; and

• look forward to a positive future.

Counselling can help you and your family:

• enhance your ability to support one another;

• establish healthy routines and a safe environment;

• decide who is safe to tell, when to tell and how much information to share;

• develop strategies to address feelings;

• determine when it is appropriate to tell siblings about the abuse and how to do so;

• learn about child sexual development; and

• address perceptions about responsibility, shame, guilt and future safety.
Deciding What Types Of Treatment & Supports Are Needed

Best practice suggests that children and youth should only be in abuse-focused assessment and/or treatment when they have a history of abuse that has been verified by a CAS or police.

Once verified, a comprehensive assessment should occur as soon as possible after disclosure. The assessment will consider how your child is coping with his/her experience of sexual abuse. Once an assessment is completed, your child and/or family may receive treatment recommendations. If treatment is indicated through this process, it should begin promptly.

Your child and other family members may have suggestions and feelings about treatment. These should be considered, taking into account their ages and developmental levels.

In Toronto, Community Information Toronto provides specific information on all community agencies. Call 211 or (416) 397-4636, or log on to www.211Toronto.ca for a listing of children’s mental health agencies and other organizations that provide services to children and families.
Counselling Options

Every individual has a unique reaction to sexual abuse regardless of the type, extent or duration of the abuse. The assessment may recommend one or more of the following counselling options.

**Individual counselling** (one person, one therapist) allows the client the opportunity to discuss and resolve issues privately with a therapist. Children and youth have individual needs that should be addressed. For those who find that they do not want to discuss their experiences in the presence of others, this might be a good option.

**Group counselling** (more than one person, one or more therapists) allows the participant to explore issues, share information and learn from a small group of people with similar experiences. Trained individuals lead discussions and/or activities. Children and youth who experience sexual abuse may find that group counselling can help reduce feelings of isolation. Parent groups provide much needed support and information to parents and caregivers.

**Family counselling** (one family, one therapist) is designed to help family members understand the impact of abuse, and improve family relationships. Family members who participate may include the child who was abused, supportive parents, partners, siblings, and/or other relatives. A therapist can work with the whole family and with individual members at different times. Careful consideration must be given to the point at which an alleged offender may be included.

**Crisis counselling** may be offered through community agencies or your local hospital. In addition, telephone crisis services often have counselors available on a 24-hour basis to provide information and support for anyone who may be lonely, upset, depressed or feeling suicidal.

For a list of support and treatment providers in your community, please refer to the list enclosed at the back of this book.
Treatment Providers

While some treatment providers have authority to provide certain services (e.g., the writing of a prescription for medication is limited to medical doctors), there is considerable overlap between the counselling functions provided by most types of therapists. It is important that the treatment provider you choose is able to satisfy your needs.

A treatment provider may have a private practice, work in a hospital or clinic setting, or be part of a community agency that provides services to children and families.

Working with child sexual abuse issues requires specialized training regardless of the treatment provider’s official title. When seeking help, it is important to ask for an explanation of the professional’s title and qualifications. The following list is a brief overview of treatment providers who work in this field.

• A social worker typically holds a degree in Social Work and is registered with the College of Social Workers and Social Service Workers. You may or may not be charged a fee for the treatment services provided by these professionals depending on where they practice (e.g., in a hospital setting or private practice). Benefit plans vary as to whether or not the services are covered.

• Counsellor and therapist are titles broadly used by people who provide treatment and rehabilitation. The qualifications of these individuals vary widely.

• A psychiatrist is a medical doctor (MD) with specialized training in the science of the human mind. They can make official medical diagnoses and write prescriptions for medicine. The Ontario Health Insurance Plan (OHIP) covers psychiatry services.

• A psychologist is a person registered with the College of Psychologists and Psychological Associates who holds an appropriate university degree in psychology. Some private insurance plans cover part or all of the costs of appointments with a psychologist. Unless they practice in a hospital or are a part of a community-funded program, psychologists are not usually covered by OHIP.
The type of therapy and length of time spent in therapy varies from person to person. Some people may require a few sessions, while others need more. It depends on how complicated the situation is, and the needs of the individual(s) involved. Each situation must be carefully assessed, followed by appropriate treatment and supports.

Often, treatment happens in stages, guided by the developmental needs and readiness of the particular child, youth and/or family member. Sometimes during the course of therapy, a stage will be reached where no further work will be of benefit at that time. However, when the person reaches a milestone in his/her life (e.g., puberty, first love, marriage, birth of a child), s/he may feel the need to return to treatment.
Choosing A Treatment Provider

It is important to learn as much as you can about your treatment options in order to make the best decision for your child, yourself, and/or your family.

Below are some questions that you may want to ask when choosing a treatment provider. If you find this difficult to do by yourself, ask a supportive person to help you.

- Where are you located?
- Is there a fee for the services? If so, what is your payment policy? Do you have a sliding scale for payment (i.e., if a client can pay based on what s/he can afford)?
- What types of treatment do you offer (e.g., individual, group, family)?
- Do you treat more than one person from the same family?
- What professional qualifications do you/your counsellors have?
- Do you have, or does your agency have counsellors with specific qualifications in sexual abuse treatment of children, youth and/or adults?
- What is the waiting period before being able to see someone for assessment and/or treatment?
- If there is a waiting period, do you offer any services while clients are waiting? If not, where could I go in the meantime?
- Do you have both male and female counsellors at your agency? (Your child, you or another family member may feel more comfortable with a male/female counsellor.)
- Are your counsellors familiar with my particular cultural background/sexual orientation/religion?
- What is your policy if I decide that I want to work with a different therapist?

If the answers are not clear or you disagree with what you are told, do not be afraid to ask for a more detailed explanation.
The following are questions to consider asking early in the therapeutic process.

- Can you tell me more about how treatment will help my child and family?
- What will happen during therapy?
- Will you follow the recommendations of the assessment?
- Are you flexible in your approach in order to meet the needs of my child/family?
- If my child does not want to go to therapy, how can you work with us to provide what is best for him/her?
- Are you available for emergency sessions?
- How can I give you feedback if my child and/or I am feeling uncomfortable with something we discuss?

If you choose a therapist and decide that you are not satisfied with the service, you have every right to change treatment providers.
Final Thoughts

Supporting one another and seeking the help of professionals who have special training in sexual abuse treatment can help you and your family cope with what has happened and plan for a positive future.

With help, your child and family can overcome an experience of sexual abuse. You and your family do not have to go through this alone. There are many resources available to assist.

It is our hope that this guide has been useful to you. We encourage you to share it with others who may find it helpful.
### GLOSSARY

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accused</td>
<td>The person named but not yet determined as being responsible for the abuse. The terms accused and the alleged offender mean the same.</td>
</tr>
<tr>
<td>Allegation</td>
<td>Something that someone says happened, which may also identify the alleged offender.</td>
</tr>
<tr>
<td>Alleged offender</td>
<td>The person named but not yet determined as being responsible for the abuse. The terms alleged offender and the accused mean the same.</td>
</tr>
<tr>
<td>Apprehend</td>
<td>Under the powers outlined in the <em>Child and Family Services Act</em>, a child protection worker or police officer may, with or without a warrant, remove a child from his/her current circumstances and bring the child to a place of safety (e.g., foster home, a hospital) if the child is believed to be at imminent risk.</td>
</tr>
<tr>
<td>Assessment</td>
<td>An in-depth examination of the impact of the abuse to decide the best course of treatment.</td>
</tr>
<tr>
<td>Charges laid</td>
<td>When police identify and have sufficient evidence to say that a person is alleged to have committed a criminal offence.</td>
</tr>
<tr>
<td>Child</td>
<td>For the purposes of this publication, a child is a person from birth to 18 years-of-age. It includes the terms youth, adolescent, teen and young person, which are used interchangeably.</td>
</tr>
<tr>
<td>Child and Family Services Act</td>
<td>This Act is a law in Ontario that promotes the best interests, protection and well-being of children in Ontario, defines a child in need of protection, and gives the court authority to make orders to protect children.</td>
</tr>
<tr>
<td>Child protection worker</td>
<td>An employee of a Children’s Aid Society responsible for ensuring children’s safety and protection.</td>
</tr>
<tr>
<td><strong>Children’s Aid Society (CAS)</strong></td>
<td>A public agency legally mandated by the <em>Child and Family Services Act</em> to protect children from harm.</td>
</tr>
<tr>
<td><strong>Confidential</strong></td>
<td>Something kept private and not shared openly.</td>
</tr>
<tr>
<td><strong>Consent</strong></td>
<td>To consent is to give permission. To truly consent to something means that the person understands what s/he is agreeing to and what could happen as a result of agreeing or not agreeing.</td>
</tr>
<tr>
<td><strong>Criminal Code of Canada</strong></td>
<td>This sets out the laws for the country pertaining to crimes.</td>
</tr>
<tr>
<td><strong>Cross-examine</strong></td>
<td>When a lawyer asks a witness questions about the evidence s/he has given in court.</td>
</tr>
<tr>
<td><strong>Crown Attorney</strong></td>
<td>The lawyer who represents the Government of Ontario and who is responsible for prosecuting crimes in criminal court.</td>
</tr>
<tr>
<td><strong>Defense lawyer</strong></td>
<td>A lawyer who represents the alleged offender.</td>
</tr>
<tr>
<td><strong>Disclosure</strong></td>
<td>The process by which the [suspected] abuse comes to the attention of others.</td>
</tr>
<tr>
<td><strong>Forensic Evidence</strong></td>
<td>Samples of physical matter that may help to prove the abuse happened (e.g., hair, bodily fluids, torn clothing).</td>
</tr>
<tr>
<td><strong>Indicator</strong></td>
<td>The signs, symptoms or clues that may lead you to suspect that a child was sexually abused.</td>
</tr>
<tr>
<td><strong>Journal</strong></td>
<td>A written diary of events and feelings.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>---------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Offender</td>
<td>The individual guilty of committing a crime(s).</td>
</tr>
<tr>
<td>Prove</td>
<td>To try to establish the truth or the existence of the abuse by finding evidence.</td>
</tr>
<tr>
<td>Proof beyond a reasonable doubt</td>
<td>The evidence suggests that there is no other reasonable possibility to explain what happened.</td>
</tr>
<tr>
<td>Reassure</td>
<td>To help someone feel confident about something.</td>
</tr>
<tr>
<td>Recant</td>
<td>When someone changes what s/he originally said, and now says it is not true.</td>
</tr>
<tr>
<td>Sentence</td>
<td>The punishment determined by the judge to be appropriate for someone who has been found guilty of a crime.</td>
</tr>
<tr>
<td>Sexually Transmitted Infections</td>
<td>Infections and diseases that are spread through sexual contact.</td>
</tr>
<tr>
<td>Support person</td>
<td>Any person who the child wishes help from during any process related to an investigation (e.g., the investigative interview, a medical examination, court appearances).</td>
</tr>
<tr>
<td>Testify</td>
<td>When a witness gives evidence at a court hearing.</td>
</tr>
<tr>
<td>Testimony</td>
<td>The account of what happened, as stated by a witness in court.</td>
</tr>
<tr>
<td>Verified</td>
<td>It is more likely than not that something has happened.</td>
</tr>
<tr>
<td>Term</td>
<td>Definition</td>
</tr>
<tr>
<td>------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Victim Impact Statement</td>
<td>A statement made by a victim or someone close to the victim explaining how a crime affected him/her.</td>
</tr>
<tr>
<td>Victim Witness Coordinator</td>
<td>Serves as link between the victims and witnesses of crime and the Crown Attorney.</td>
</tr>
<tr>
<td>Youth Criminal Justice Act</td>
<td>The law that sets out how youth alleged to have committed a criminal offence who are 12 years or older but under the age of 18 at the time of the alleged offence will be dealt with by the court. This legislation outlines procedures for these youth such as special interview techniques, and protects the widespread publication of any information that may identify the accused or convicted youth. (This act replaced the <em>Young Offenders Act of Canada</em>.)</td>
</tr>
</tbody>
</table>