



Centre d'expertise Marie- Vincent: Services offered to young child sexual assault victims

Support centre for children –
Knowledge exchange 2011

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Director General

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Interuniversity Chair

Co-chairs

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Mission

Develop leading-edge scientific knowledge on sexual assault* towards children

* incluant violence sexuelle



Interuniversity Chair

Research axes

- **AXIS 1** Document the profiles of sexually abused children and their families and their specific needs
- **AXIS 2** Evaluate the different services offered by the Centre d'expertise Marie-Vincent
- **AXIS 3** Explore the different developmental trajectories of children involved in sexual assault situations.

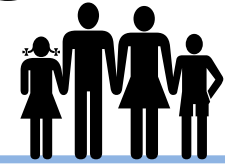


Inter-sectoral partnership

- Medical sector: 3
- Police sector: 4
- Social-judicial sector: 3
- Psychosocial sector: 6
- University sector: 3



Integrated services for the clientele (2 languages)



Research

Police
services

Medical
Services

Psychosocial
Services

Personalized Services for Parents

Needs
Assessment

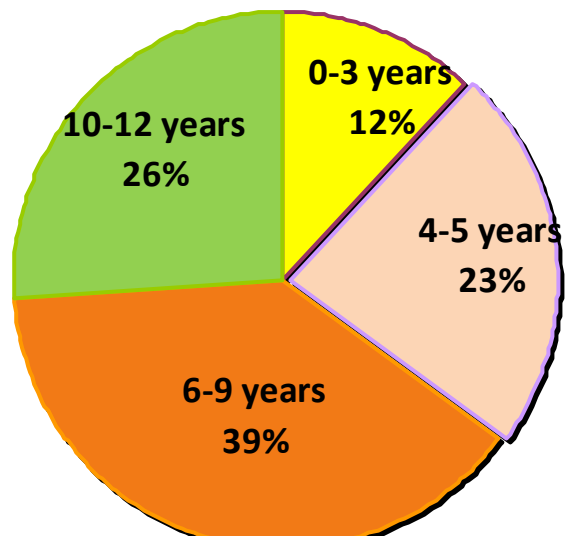
Treatment



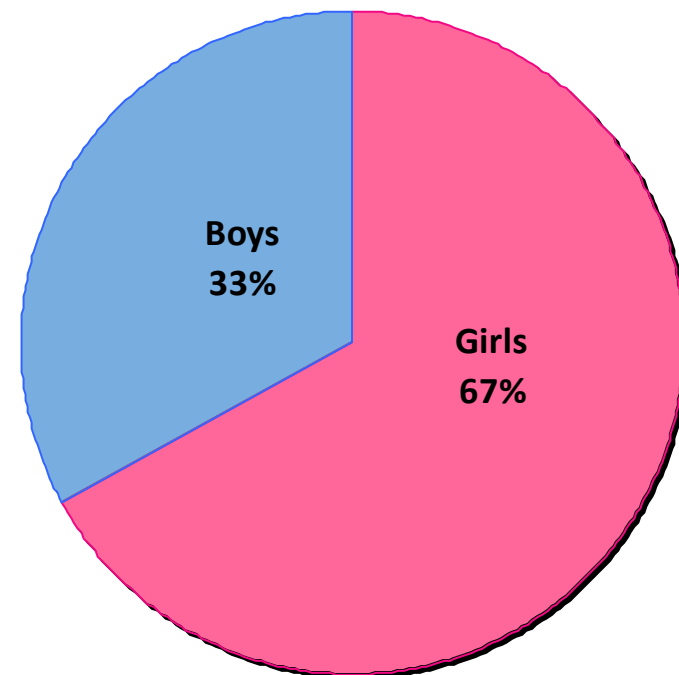
Profile of clients served

(2006-2010)

**Distribution
according to child's
age**



**Distribution
according to sex of
child**





Parent-child Psychosocial expertise

- Personalized services following disclosure of SA
- Needs assessment
- Specialized treatment for child SA victims and their parents
- Specialized treatment for children with problematic sexual behaviour (PSB)



Personalized services for parents

- Client identification
- Assessment of client needs
- Plan for services
- Link between client and services
- Crisis intervention



Personalized services for parents

To provide:

- An adapted and quick response; telephone access 12 hours/day
- Assistance and accompaniment during the social, legal and medical process, up to 8 weeks or more after disclosure





Assessment of personalized services for parents—ongoing

- 37 mothers
- 6 fathers

42 adults
(including 3 couples)



44 children
(30 girls; 14 boys)

- Results  May 2011



Needs assessment

- Evaluation of the child:
 - History of "victimization"
 - Psychological and behavioural profile
 - Associated factors
- Evaluation of the parent:
 - Psychological profile
 - History of "victimization"
- Evaluation of the family environment



Needs assessment

- Three or four meetings (estimated total \cong 10 to 12 hours)
- Clinical interviews
 - with the child
 - with the parent / significant adult
 - joint parent-child
- Standardized interviews / research
- Multiple sources of information



VSA treatment choice

- Trauma-focused cognitive behavioural therapy approach (TF-CBT; Cohen, Deblinger & Mannarino, 2005)
- Evidence-based practice
- Support during implementation and supervision
- Unique treatment
- Tied to an assessment (pre, post, around 3 months, 1 year, 2 years)



Characteristics of VSA treatment

- Based on the elements of specific treatments
- Family-based approach involving non-offending parents
- Therapeutic goals and strategies presented in a straightforward manner
- Time commitment and order of execution adapted to the specific needs of the child and his or her family
- Therapist-client collaboration



Characteristics of VSA treatment

Conditions of treatment at the CEMV:

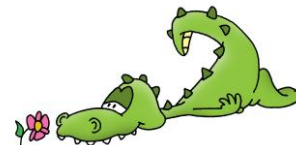
- Around 12 weekly 90-minute meetings:
 - Individual meetings with the child (± 45 minutes)
 - Individual meetings with the parent (± 45 minutes)
 - Joint meetings with parent and child
 - Family meetings involving siblings or other members of the family, as required

Elements of child VSA treatment

- Identification and expression of emotions



- Cognitive triangle: Relationship between thoughts, emotions and behaviour
- Ability to manage emotions (stress, anger, sadness)





Elements of VSA treatment

- Education about sexual body parts and respect of privacy (boundaries, secrets, touching)
- Gradual exposure: from psycho-education to narrative accounts
- Treatment of cognitions and affects related to the sexual assault
- Sexuality education
- Ability to self-protect

Preliminary study (Hébert, 2010)

Socio-demographic characteristics

Type of family

16,1%	46,2%	22,6%	15,1%
Intact	Single parent	Blended	Others

Education of maternal figure

46,7%	39,1%	14,1%
Primary-Secondary	College	University

Family Income

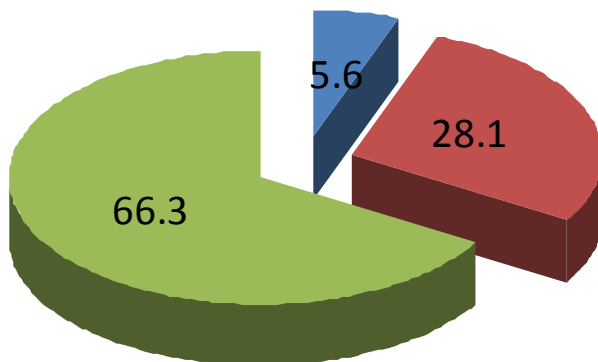
38,9%	27,8%	12,2%	21,1%
Less than 20 000\$	20 000\$ - 40 000\$	40 000\$ - 60 000\$	60 000\$ and up

Preliminary study (Hébert, 2010)

Characteristics of sexual assaults

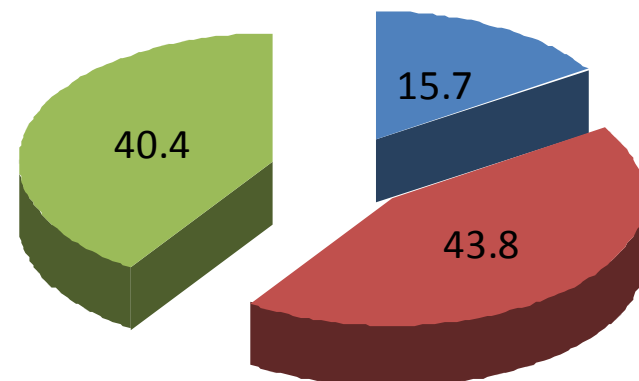
Severity

■ less serious SA ■ serious SA
■ very serious SA



Duration

■ single episode ■ some events
■ renetitive



- Inter-family sexual assault: 68.5%
- Childhood sexual assault experienced by the mother: 37.5%
 - 64.3% revealed
 - 40.7% received services



Preliminary Study (Hébert, 2010)

Effects of treatment

- Sample : 66 **girls** Ages
 27 **boys** 6 to 12 years
- According to the measurements given by the children after therapy:
 - significant ↑ in self esteem
 - significant ↓ in symptoms of anxiety, depression and desperation and less avoidance coping with symptoms of post-traumatic stress and fewer feelings of guilt



Preliminary study (Hébert, 2010)

Effects of treatment

Symptoms in children reported by the parents: ↓ in time (pre and post testing)

- PTS
- Dissociation
- Internalized problems
- Externalized problems
- Social difficulties
- Thought difficulties
- Attention difficulties

Preliminary study (Hébert, 2010)

Satisfaction of parents

Satisfaction regarding services received?	Intervention beneficial for the child?	Intervention beneficial for the parent?	Learned something new?	Recommend the CEMV?
97% very satisfied	90% very beneficial	97% very beneficial	73% yes, a lot	91% very likely
3% moderately satisfied	10% moderately beneficial	3% moderately beneficial	25% yes, a little	8% probably
			2% not at all	1% not likely

Preliminary study (Hébert, 2010)

Satisfaction of children



Enjoyed participating in the parent-child intervention?	Change or improve the intervention?	Learned something new?	Recommend participating in the intervention?
74% A lot	85% No	88% Yes	92% Yes
22% A little	15% Yes	6% No	4% No
4% Not at all		6% I do not know	4% I am not sure



Preliminary study (Hébert, 2010)

Next steps

- Include a control group of children not participating in the TF-CBT therapy
- Analyze the follow-up data to evaluate the maintenance of benefits
- Proceed with detailed analyses of the factors related to the benefits
- Results to come \Rightarrow in 2011



Characteristics of specialized PSB treatment

- Comparable treatment methods
- Additional themes
- Under evaluation

Centre's Website

www.ceasmv.ca



- Bilingual
- Secure zones
- Training component: interactive follow-up, pre and post training



Special Day of the Centre d'expertise 2011

- May 24 and 25, 2011
- Montreal and Québec City
- Clientele:
 - Inter-sectoral:
 - Medical
 - Police
 - Social-judicial
 - Health and social services