

# Community Briefing



prevention education treatment

This issue of our ongoing Community Briefing series explores a number of policy and service related initiatives of particular importance to our work in child abuse prevention, education, and treatment and some of the efforts underway that aim to strengthen our community's response to children and youth affected by maltreatment and abuse. Themes of early and effective intervention run through these initiatives, and continue to inform our work as well as our ongoing commitment to exemplary outcomes for our young clients.

As the holiday season approaches, all of us at the Community Child Abuse Council extend our very best wishes and our sincere thanks for your interest in our work on behalf of the youngest members of our community.

We invite you to get involved in our work, to advocate for the safe and healthy development of children, and to encourage others to be informed and engaged. And, as always, we welcome your feedback.

## This holiday season, you can change a life...

In so many ways, 2012 has been an amazing year for the Council – tremendous exposure, successful fundraising, the continued support of a caring and generous circle of friends and patrons. But the need in our community for comprehensive assessment and specialized trauma treatment continues to rise. We need your help to respond to every child in need of our services. Young people affected by sexual abuse and sexual behaviour problems, and newcomer children and youth with unique trauma-related mental health needs, are being referred to our programs in record numbers. Currently, 27 children are awaiting assessment (half of them age 6 and under). Your donation will help us to help them sooner. Please give generously – the impact will be life-changing! *Treatment works*. With your help, we can provide it as soon as possible to all who need it. Thank you.

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- The Little Grape That Could – wines with a purpose



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## Treatment Works: Better Futures After Sexual Behaviour Problems

Childhood sexual behaviour problems (SBP) are not rare, especially among children with behaviour problems in general, among young children exposed to sexual stimuli (e.g. domestic violence) in their environment, and as reactive behaviours among children who have been sexually abused. The range of behaviours involved is broad in terms of severity and potential to cause harm. Some SBP involve little or no victimization of others, but SBP can range up to and include serious aggressive and forced sexual interactions. However, children with sexual behavior problems are qualitatively different from adult sex offenders, they are not simply a younger version. Children with SBP need to be seen as children first.

There is virtually no one characteristic or profile that is common to children who engage in problematic sexual behaviours. Therefore a comprehensive assessment of each child engaging in SBP is needed to identify the unique circumstances and appropriate treatment each needs. Treatment approaches based on best practices and that are evidence based work!



When given appropriate treatment, children with SBP, including aggressive SBP, were no more likely to have future arrests for sexual or non-sexual offenses than a comparison group of clinic children with common non-sexual behaviour problems such as ADHD. Therefore, public policy should promote appropriate treatment where assessment suggests it is needed. Making appropriate treatment available to these children is in the public's interest.

Excerpted from: *Report of the Task Force on Children with Sexual Behavior Problems*, 2006, Association for the Treatment of Sexual Abusers



The response to the crisis in mental health care from those who contribute to mental health policy is currently on improving timely access to assessment and treatment by *reducing wait times* and increasing system integration by *making every door the right door*. Although such changes would be welcomed, they are premature if we cannot answer the questions of what we are treating and what works. A component of access is the ability to receive quality treatment, with demonstrated effectiveness. While access to treatment may be one measure of success for a system, *it is not a sufficient measure of success* when evaluating the effectiveness of mental health treatment from the client or patient perspective.

Minden, K., Yamada, S. Waiting For What? An inquiry into the fundamental questions of how to fix adolescent mental health care. *Healthcare Quarterly*, Vol. 14, October 2011.

## Policy Landscape: Children's Mental Health in the Spotlight

Too many young people living in Canada are at risk for poor mental health outcomes. The majority of young people who require specialized mental health care do not receive it. Historically, service silos have artificially segregated care provision, making it difficult to address whole-person needs of young people and families. Some individuals and some groups residing in Canada are not treated equally with regards to accessing quality and appropriately responsive mental health programs and services.

A number of reports, including *A Canada Fit for Children* (Canada, 2004) and *Reaching for the Top*, (Leitch, 2007) have recognized the need to prioritize child and youth mental health. The Standing Senate Committee on Social Affairs, Science and Technology, *Out of the Shadows at Last: Transforming Mental Health, Mental Illness and Addiction Services in Canada*, identified the need for immediate national action in mental health, especially with regards to children and youth (Kirby & Keon, 2006). Recently, the Government of Canada created the Mental Health Commission of Canada (MHCC) which in turn recognized the importance of child and youth mental health by establishing the Child and Youth Advisory Committee of the MHCC Board. Under this mandate, a number of national child and youth mental health initiatives have been launched, including but not limited to *Evergreen*.

Canadians have realized that meaningful changes must be made to how we approach child and youth mental health. These range from how the social determinants of health are addressed all the way to improving the provision of responsible and appropriate specialty mental health services, based on best available evidence. Maintaining the status quo within Canada's mental health system is no longer an option as substantive changes in how we think about and address child and youth mental health are required.

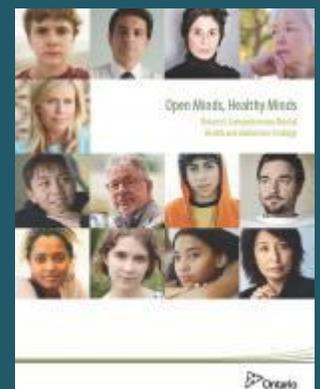
Kutcher, S. and McLuckie, A. for the Child and Youth Advisory Committee, Mental Health Commission of Canada. (2010). *Evergreen: A child and youth mental health framework for Canada*. Calgary, AB: Mental Health Commission of Canada.

In Ontario, *Moving on Mental Health – A system that makes sense for children and youth* (November, 2012) describes the government's action plan for realizing its mental health and addictions policy framework (*Open Minds, Healthy Minds*) and sets out the planned transformation of the system over the next few years. Key features in the plan include a new funding model, the establishment of community lead agencies responsible for providing core services, a new legislative and regulatory framework, and the creation of clear and streamlined pathways to care between primary care, schools and community-based supports and services. Immediate priorities identified by the provincial government include delivery of more services and helping children and youth get the services they need faster. Implementation will be supported with new investments and will be guided by advisory groups, parents, youth and service providers. Additional details are to be announced shortly.

**See:** *Open Minds, Healthy Minds: Ontario's Comprehensive Mental Health and Addictions Strategy* (2011) [www.ontario.ca/youthmentalhealth](http://www.ontario.ca/youthmentalhealth)

The Ministries of Education, Health and Long-Term Care, and Training, Colleges and Universities have joined the Ministry of Children and Youth Services as partners in efforts to decrease wait times and improve access to quality child and youth mental health services. As all ministries grapple with finding ways to marry impact with efficiency, sectors are working separately and together to ask hard questions about how to maximize resources, provide better service, and improve access for Ontario's children and youth.

Ontario Centre of  
Excellence for Child and  
Youth Mental Health,  
November 2012



# From The Field

## Exploring Links: Child Maltreatment – Youth Violence

Research into the cycle of violence among children and youth (A.W. Leschied, 2008) points to evidence of distinct factors linking early victimization with later violence. Children who experience either maltreatment or exposure to violence in their families of origin are nearly twice as likely to report clinically significant elevations for emotional and behavioural disorder compared to children and youth who do not report maltreatment. The legacy of child maltreatment is enduring in the context of ongoing violence. It is not only the impact of being maltreated that for certain children and youth sets the stage for the development of serious emotional disorder; for many, it also translates into their own perpetration of violence.

Early family conditions related to poverty, abuse, and a generally poor relationship between child and parent are related to later violence. Urban-based risk factors for youth violence include extreme poverty, community disorganization, high rates of transitions, criminal subculture, availability of drugs and weapons.

There is a significant overlap in the conditions that account for violence with those that also account for mental health disorder. For example exposure to violence within a child or youth's family of origin has both the impact of modeling violence as well as being a risk factor in promoting emotional disorder such as depression. Durant, Barkin et al (2007) noted that while adolescents who are exposed to violence have a greater likelihood of resorting to violence to resolve interpersonal conflicts, acquire possessions and achieve goals, such exposure is also associated with higher scores on depression and increases in the consumption of illegal substances.

Exposure to family violence for children, either through vicarious trauma of witnessing violence or being the victim of maltreatment sets the stage for the development of both higher reported rates of emotional disorder (i.e. depression) and acting out the violence.

*Child and youth violence victimization, be it either as a result of family-based maltreatment or peer-on-peer violence such as school-based violence has the effect of increasing the likelihood a child or youth will reflect some form of mental health disorder; and the presence of a mental health disorder increases the risk that a child or youth will act out violently. Hence, as a general statement, interventions that address mental health disorders in children and youth will have the effect of reducing the risk for violence within this population as well.*

Leschied, A.W., The Roots of Violence: Evidence from the literature with emphasis on child and youth mental health disorder (2008), The Provincial Centre of Excellence for Child and Youth Mental Health at CHEO



## Over The Rainbow Benefit Concert - Thank you Kate Daly!

During an evening she described as “very special to my heart”, singer-songwriter Kate Daly took to the stage at Redeemer College to raise money for the Council and, in the process, helped raise awareness about child abuse and its impact on young lives. The event raised \$1,500. The Council is honoured and very grateful for Kate's support, and extends thanks to the many musicians, singers, and volunteers who helped to make the evening such a success. Highlights of the concert can be seen on YouTube (Kate Daly Charity Concert Highlights).

# News & Updates



As regular readers know, the 2012 RBC Canadian Open was held in Hamilton in July and brought a special opportunity for the Council – our selection as Local Charity Partner by RBC meant that the *heart* of the week-long event was linked to helping vulnerable and victimized children right here in our community. Our *Heart of the Open* Campaign continues until the end of this year, raising funds and awareness. Please support the campaign – your investment in child abuse prevention, education, and treatment programs will truly make a difference in young lives. Put your heart into it and help us create a community free of child abuse.

## SPECIAL THANKS TO THESE GENEROUS SUPPORTERS:

Kristine Beaupre \* BMO Bank of Montreal \* Jeremy Bortz \* Bullock Family \* Greg & Shawna Button \* CHML/Y108 Children's Fund \* Kate Daly \* Greg Doerr \* Tim Dickins \* Hamilton Police Senior Officers' Association \* Rotary Club of Hamilton AM \* Investors Group \* IODE Princess Margaret Rose Chapter \* Patti Kelly \* Ruth Liebersbach \* George & Bernie McCarter \* Dr. Anne Niec \* Pioneer Energy Foundation at Hamilton Community Foundation \* Pioneer Energy LP \* Print Factory Ink \* RBC \* St. Vincent de Paul School \* Scotiabank \* Mike & Karen Shea \* Dr. Frank Stechey \* Shawn Tylee \* Shendal Yalchin \*

Visit our web site for more information:

[www.childabusecouncil.on.ca](http://www.childabusecouncil.on.ca)

## THANK YOU INVESTORS GROUP!



Council board member, George Bakker (left) accepting cheque from Investors Group Regional Director, Jon Jurus, following the successful 2012 IG Charity Golf Classic. \$6,300 was donated to the Council from tournament proceeds.

## Running For Kids

A proud salute to Janice Floyd and Margaret Maillet, who participated in the 2012 *Road To Hope* in November and collected more than \$1,000 in pledges to support the Community Child Abuse Council. Thank you both for your energetic efforts, and thank you to all who donated!



A philanthropist is anyone who gives anything – time, money, experience, skills, and networks – in any amount to create a better world.

Laura Arrillaga-Andreessen



**The Little Grape That Could** is a non-profit wine company founded in Toronto by passionate volunteers – 100% of the profits from the sale of each bottle go to a charity of the purchaser's choice...and one of the eligible charities is the Community Child Abuse Council. Try one of these wines, and when you get home simply enter the code from your bottle online and direct the donation to the Council. It's fast and simple. Like the wine? Tell your friends! Every bottle generates funds for important causes, and we hope those donations will add up to an ongoing source of all-important revenue for our programs and services. You can find **The Little Grape That Could** wines at local LCBO outlets.

For more information: [www.thelittlegrapethatcould.com](http://www.thelittlegrapethatcould.com).

## Leaders For Kids

Are you a **Leader for Kids**? These remarkable individuals are community advocates and ambassadors, pledging their ongoing support to the Council's efforts in child abuse prevention, education, and treatment. Each knows the value of speaking up, stepping forward, and lending their support to our outreach and community engagement work. They are caring and compassionate citizens committed to making a difference in the lives of victimized children in a variety of ways. If you would like to join them and bring your talents and commitment to this vital cause, please contact us. We'd be happy to tell you more about being a **Leader For Kids**.

**Anna Allevato**

Past Executive Director (retired)  
Community Child Abuse Council

**Dan Bowman**

Manager, Fleet and Facilities  
Hamilton Police Service

**Glenn De Caire**

Chief, Hamilton Police Service

**Laura Gainey**

RBC

**Rocco Gizzarelli**

Director of Services  
Catholic Children's Aid Society of Hamilton

**Bruce Gottzman**

Sobeys

**Vince Isber**

RBC

**Fred Losani**

Losani Homes

**Lino Losani**

Losani Homes

**George McCarter**

Pearson Dunn Insurance

**Dan McLean**

Former CHCH Anchor

**Margaret Maillet**

Sobeys

**Brian Melo**

Recording Artist

**Joyce Morrison**

RBC

**Dr. Anne Niec**

Hamilton Health Sciences

**Mike Shea**

Hamilton Police Service

**Brenda Symons-Moulton**

Clinical Therapist

*Your name* here?



The Community Child Abuse Council gratefully acknowledges funding support provided by the Ontario Ministry of Children and Youth Services and the City of Hamilton.

### A Wonderful Evening with Jeremy Bortz & Friends



Warmest thanks to everyone who attended this special fundraising event on November 13<sup>th</sup> in support of the Community Child Abuse Council, Good Shepherd, and McMaster Children's Hospital. Special thanks to Tim Dickins, whose vision and enthusiasm made the entire event possible, and to the many sponsors and donors who gave generously to ensure the evening's success. The Council received more than \$13,000 in proceeds. Warm thanks also to artist Jeremy Bortz (pictured at left with his beautiful Flowers of Hope tiles), the evening's talented entertainers, The Hamilton Club, and our generous friends at the Rotary Club of Hamilton AM (event hosts). It was a wonderful evening!

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Donate online at  
[www.childabusecouncil.on.ca](http://www.childabusecouncil.on.ca)

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