

Radius Child and Youth Services Canada



Type of intervention



Group Work



Individual Work



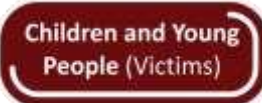
Family Work

Target groups, levels of prevention and sub-groups:



Tertiary Prevention

Children (4-11 Years), Young People (12-17 Years), Young Adults (18-19 Years) | Male & Female | Group Work, Individual Work, Family Work | English



Tertiary Prevention

Young Children (0-5 Years), Children (6-11 Years), Young People (12-18 Years) | Male & Female | Group Work, Individual Work, Family Work | English



Tertiary Prevention

Young Children (0-5 Years), Children (6-11 Years), Young People 12-18 Years, Parents Male & Female | Group Work, Individual Work, Family Work | Professional Training | Research

Target population

Adolescents aged 12 -19 years who have engaged in sexually abusive behaviour within or outside of the family and their families.

Children aged 4-11 years who have engaged in concerning sexual behaviour

Children and adolescents aged 0 – 18 years who have experienced sexual abuse or interpersonal violence

Specialize in: Intrafamilial sexual abuse & reunification

Siblings of children and youth are also eligible for service

Delivery organisation

Radius is the province's largest provider of this specialized care. For almost 40 years, we have become a widely recognized leader in the field of abuse prevention and care. We are a multidisciplinary team comprised of social workers, psychotherapists, psychometrists, researchers, and psychologists.

Mode and context of delivery

Radius Child and Youth Services is a specialized community-based organization that provides clinical assessment and counselling services to children, youth and families affected by interpersonal abuse: physical, sexual, or emotional abuse, neglect, or who have witnessed domestic violence. Radius also offers services for children under 12 years old who have engaged in concerning sexual behaviour and adolescents who have engaged in sexually abusive behaviour. Services at Radius are offered at no cost.

The assessment and treatment services at Radius focus on strengths and challenges so that individuals and families can make changes necessary for healthy futures. In addition to our clinical work, we provide local, provincial, national, and international training and consultation on issues related to interpersonal violence, children under 12 years old who have engaged in problematic sexual behaviour, and adolescents who have engaged in sexually abusive behaviour. We also conduct research examining the populations we serve, which results in the development and promotion of best practice guidelines, counselling innovations, and increased public awareness that support prevention of abuse.

Level/Nature of staff expertise required

Qualified social workers, psychotherapists, psychologists, psychometrists, and psychiatrists who have completed training in the model.

Intensity/extent of engagement with target group(s)

Recommended intensity:

Dependent on treatment needs, although individual sessions typically run approximately 1-hour. In addition to individual therapy, the clinicians work with dyads, families, and groups (typically run weekly, for 2 hours).

Recommended duration:

Again, this is dependent on individual client needs. The average length of treatment is 18-24 months. The dyads, families, and groups typically run for 12-18 weeks.

Description of intervention

The essential components of Radius Child & Youth Services are individual treatment combined with regular dyad, family, and group therapy with up to 8-10 adolescents.

Researchers at Radius have developed a specialized risk-assessment tools: The ERASOR (Estimate of Risk of Adolescent Sexual Offense Recidivism) and the AR-RSBP (Assessing Risk to Repeat Sexual Behaviour Problems)

)Version 2.1 (AR- RSBP). Treatment is guided by the recommendations obtained from completing a comprehensive assessment, which includes psychological and clinical evaluations. Information obtained during the assessment includes, but is not limited to the following topics:

- family history & functioning
- developmental history
- physical health
- intellectual, academic and cognitive functioning and expression
- spiritual/cultural issues
- self-perception
- nonsexual delinquency
- potential traumatic experiences & impact
- sexual development & sexual behaviours
- sexual identity and sexual interest
- non-offensive sexual relationships
- knowledge of consent issues & sexual attitudes
- sexually abusive or problematic behaviours
- victim impact awareness
- knowledge of risk for engaging in sexually abusive behaviours & prevention awareness
- parental perception of strengths
- common treatment topics Include (not necessarily for all adolescents):
 - developing sexual abuse-prevention plans
 - enhancing parent-child communication/relationships
 - healing from childhood trauma
 - enhancing social relationships/intimacy
 - enhancing pro-social sexual attitudes
 - Increasing accountability for sexually abusive behaviour
 - Enhancing health sexual interests
 - Developing a support network
 - Enhancing affective expression/regulation
 - Enhancing awareness of victim impact
 - Enhancing self-esteem
- The philosophy behind Radius is that:
 - Vision: A community free from abuse, neglect and violence.
 - Mission: Radius Child and Youth Services helps children, youth and families build their futures free from abuse, neglect and violence.
 - Values:

People First:

Children, youth and families are at the heart of what we do and we celebrate their strengths with respect, passion and purpose.

Better Together:

Success is rooted in partnerships that lead to better results.

Excellence Everyday:

Achieving excellence starts with expecting the best of ourselves, promoting innovation and learning and fostering quality improvement.

Integrity Focused:

Honesty, fairness and openness shapes our relationships and actions.

Evaluation

This programme is rated as having promising research evidence by the California Evidence Clearinghouse for Child Welfare (see www.cebc4cw.org). This rating is based on evidence from at least one study with controls. The information in this summary is based on that published by the California Evidence Clearinghouse for Child Welfare.

References

JOURNAL ARTICLES

- Worling, J. R. (1995a). Adolescent sibling-incest offenders: Differences in family and individual functioning when compared to nonsibling sex offenders. *Child Abuse & Neglect, 19*, [633-643](#).
- Worling, J. R. (1995b). Adolescent sex offenders against females: Differences based on the age of their victims. *International Journal of Offender Therapy and Comparative Criminology, 39*, [276-293](#).
- Worling, J. R. (1995c). Sexual abuse histories of adolescent male sex offenders: Differences based on the age and gender of their victims. *Journal of Abnormal Psychology, 104*, [610-613](#).
- Worling, J. R., & Curwen, T. (2000). Adolescent sexual offender recidivism: Success of specialized treatment and implications for risk prediction. *Child Abuse & Neglect, 24*, [965-982](#).
- Worling, J. R. (2001). Personality-based typology of adolescent male sexual offenders: Differences in recidivism rates, victim-selection characteristics, and personal victimization histories. *Sexual Abuse: A Journal of Research and Treatment, 13*, [149-166](#).
- Worling, J. R., & Langstrom, N. (2003). Assessment of criminal recidivism risk with adolescents who have offended sexually: A review. *Trauma, Violence, & Abuse: A Review Journal, 4*, [341-362](#).
- Curwen, T. (2003). The importance of offense characteristics, victimization history, hostility, and social desirability in assessing empathy of male adolescent sex offenders. *Sexual Abuse: A Journal of Research and Treatment, 15*, [347-364](#).
- Worling, J. R. (2004). The Estimate of Risk of Adolescent Sexual Offense Recidivism: Preliminary psychometric data. *Sexual Abuse: A Journal of Research & Treatment, 16*, [235-254](#).
- Worling, J.R. (2006). Assessing Sexual Arousal with Adolescent Males Who Have Offended Sexually: Self Report and Unobtrusively Measured Viewing Time. *Sexual Abuse: A Journal of Research and Treatment, 18*, [383-400](#).
- O'Neil, B.J, Burns, G. L., Kahn, T.J., Rich, P, & Worling, J.R.(2008). Initial Psychometric Properties of a Treatment Planning and Program Inventory for Adolescents who Sexually Abuse. *Sexual Abuse: A journal of Research & Treatment. Vol. 20*, [161-187](#)
- Worling, J. R. (2010). Risky Business: Providing fair and accurate information regarding risk assessment instruments for adolescent sexual offense recidivism. *Journal of Aggression, Maltreatment & Trauma, 19*, [243-246](#)
- Worling, J. R., Litteljohn, A., & Bookalam, D. (2010). 20-year prospective follow-up study of specialized treatment for adolescents who offended sexually. *Behavioral Sciences and The Law, 28*, [46-57](#).
- Worling, J. R. (2012). The assessment and treatment of deviant sexual arousal with adolescents who have offended sexually. *Journal of Sexual Aggression, 18*, [36-63](#). doi:10.1080/13552600.2011.630152
- Worling, J. R., Bookalam, D., & Litteljohn, A. (2012). Prospective validity of the Estimate of Risk of Adolescent Sexual Offense Recidivism (ERASOR). *Sexual Abuse: A Journal of Research and Treatment, 24*, [203-223](#). doi: [10.1177/1079063211407080](https://doi.org/10.1177/1079063211407080)

Worling, J. R., & Langton, C. M. (2012). Assessment and treatment of adolescents who sexually offend: Clinical issues and implications for secure settings. *Criminal Justice and Behavior*, 39, 814-841. doi:10.1177/0093854812439378

Worling, J. R. (2103). What were we thinking?: Five erroneous assumptions that have fueled specialized interventions for adolescents who have sexually offended. *International Journal of Behavioral Consultation and Therapy*, *8*(3-4), 88-96.

Worling, J. R., & Langton, C. M. (2014). A prospective investigation of factors that predict desistance from recidivism for adolescents who have sexually offended. *Sexual Abuse: A Journal of Research and Treatment*. Advance online publication. doi. 10.1177/1079063214549260 <http://sax.sagepub.com/content/early/2014/09/05/1079063214549260.abstract>

BOOK CHAPTERS

Worling, J. R. (1998). Adolescent sexual offender treatment at the SAFE-T Program. In W. L. Marshall, Y. M. Fernandez, S. M. Hudson, & T. Ward (Eds.), *Sourcebook of treatment programs for sexual offenders* (pp. 353-365). New York: Plenum Press.

Worling, J. R., & Curwen, T. (2001). *Estimate of Risk of Adolescent Sexual Offense Recidivism* (Version 2.0: The "ERASOR"). In M. C. Calder, *Juveniles and children who sexually abuse: Frameworks for assessment* (pp. 372-397). Lyme Regis, Dorset, UK: Russell House Publishing.

Worling, J. R. (2002). Assessing risk of sexual assault recidivism with adolescent sexual offenders. In M. C. Calder (Ed.), *Young people who sexually abuse: Building the evidence base for your practice* (pp. 365-375). Lyme Regis, Dorset, U.K.: Russell House Publishing.

Worling, J. R. (2004). Essentials of a good intervention programme for sexually abusive juveniles. Part two: Offence related treatment tasks. In G. O'Reilly, W. L. Marshall, R. C. Beckett, & A. Carr (Eds.), *The Handbook of clinical intervention with juvenile sexual offenders*. London: Plenum Press.

Worling, J. R. (2005). Assessing reoffense risk for adolescents who have offended sexually. In B. Schwartz (Ed.), *The sex offender* (Vol. 5, pp. 18.1-18.7). Kingston, NJ: Civic Research Institute.

[Worling, J.R. & Langstrom, N. \(2006\). Risk of Sexual Recidivism in Adolescents Who Offend Sexually. In Barbaree, H. E., & Marshall, W. L. \(Eds.\), The Juvenile Sex Offender \(2nd ed., pp. 219-247\). New York: Guilford Press.](#)

DOCUMENTATION/MANUALS

[Responding to Adolescent Sexual Offending – Recommendations for a Regional Protocol](#)
[Sexual Decision Making – Your Personal Code](#)

Contact details

Address: Radius Child & Youth Services, 1 Eva Road, Suite 216, Etobicoke, ON M9C 4Z5

Name: Dr. Bente Skau, MSW, RSW, Ph.D

Email: bskau@radiuschild-youthservices.ca

Phone: 001 (416) 744-9000

Fax: 001 (416) 744-7776