

Learning Network

Mobilizing knowledge to end gender-based violence
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Preventing and Responding to Sexual Violence: Centering Children’s Power and Agency in Practice

This resource was originally developed in French and has been translated into English.

Children and youth are particularly vulnerable to sexual violence. Their evolving needs, along with the developmental changes unique to childhood and adolescence, contribute to this vulnerability. As such, the younger the children are, the more they rely on adults to meet their needs. Moreover, for their development, children need to build and maintain meaningful emotional connections with the adults around them. This can lead children, in many situations, to prioritize and seek adult approval in order to feel valued and accepted.

Often, adults are not fully aware of the impact of the power imbalance and hierarchy that exists between them and children. This imbalance is not questioned and is seen as unchangeable. Yet adults exercise their power in both

supportive and harmful ways—through everyday decisions, child-rearing practices, and sometimes through abusive behaviours toward young people.

Research indicates that sexual violence is frequently experienced as a loss of power and a violation of personal integrity.¹⁻² For children, it is often also experienced as a betrayal, since the person responsible for causing harm is frequently someone the child trusted.

This Brief offers a reflection-based, practice-informed approach to preventing and responding to sexual violence in ways that restore power to the child. Grounded in the work of Marie-Vincent—a Québec-based organization that supports children and adolescents who have experienced sexual violence—it shares guiding principles, concrete examples, and relational strategies that practitioners and caregivers can adapt in their own contexts.

About the Author

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Restoring Power to the Child

Within the context of child sexual violence, what does “restoring power to the child” mean? First and foremost, it means recognizing and supporting the child’s ability to advocate for themselves, centering their needs, and teaching them about their rights and how to exercise them. It means providing them with the tools to identify and respond to situations involving sexual violence. It also means welcoming their disclosure, taking it seriously, and responding without delay. Restoring power further involves ensuring that the child is at the centre of the services that will be put in place for them—by providing clear information, assessing their needs, and taking their perspective into account at every stage of the service pathway following disclosure. Finally, it means offering the child opportunities to have restorative experiences with trusted adults, whether within their personal relationships or with the professionals they encounter.



1. Prevention: Best Practices

Lily’s Story

Throughout this resource, we follow Lily’s Story—a practice-informed narrative developed for learning purposes to illustrate how evidence-based prevention and intervention strategies can be applied in real-world situations.

*Lily is 11 years old. This summer, she is really excited to be attending day camp, as she will be spending a week with her friend Alix at an equestrian camp. Her camp is implementing Marie-Vincent’s **Compass** prevention program—designed to prevent sexual violence among children aged 6 to 12. At the start of the camp season, the camp team organizes an information session for parents and children, to present the program and the various tools that will be used over the course of the summer. The camp leader is present and addresses parents’ concerns and questions. The team takes the time to create a safe environment. Lily notices that her two dads are engaged; they ask questions and look through the materials. Some parents, however, seem angry. One mother refuses to allow her son to take part in the sexual health education workshops. Alix’s parents wonder if the workshops and tools are appropriate for him, given that he is on the autism spectrum. The team provides reassurance, explaining that the content is adapted and that the tools are designed to take individual realities into account, as they are drawn from the **Compass**, **Lantern**, and **Pathways** programs (resources available in French only). On the drive home, Lily’s dads remind her that she can always come to them with any questions, as they are trusted adults in her life and will always do everything they can to protect her.*

What do we mean by “sexual health education”?

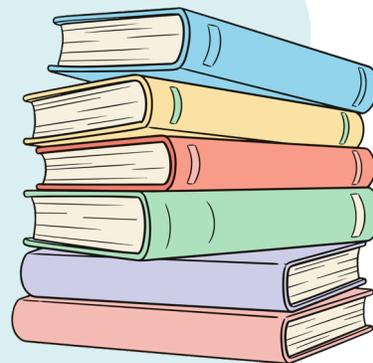
In this resource, sexual health education refers to age-appropriate learning about bodies, consent, boundaries, relationships, emotions, communication, identity, safety, and overall well-being. This term includes social, emotional, and relational dimensions of sexuality in addition to biological or medical information. Some literature also uses the term sexuality education to describe this broader scope.

Other useful resources:

UNESCO Comprehensive Sexuality Education:
For Healthy, Informed and Empowered Learners:
www.unesco.org/en/health-education/cse

Sex Information & Education Council of
Canada (SIECANN): www.sieccan.org

Action Canada for Sexual Health and Rights:
www.actioncanadashr.org

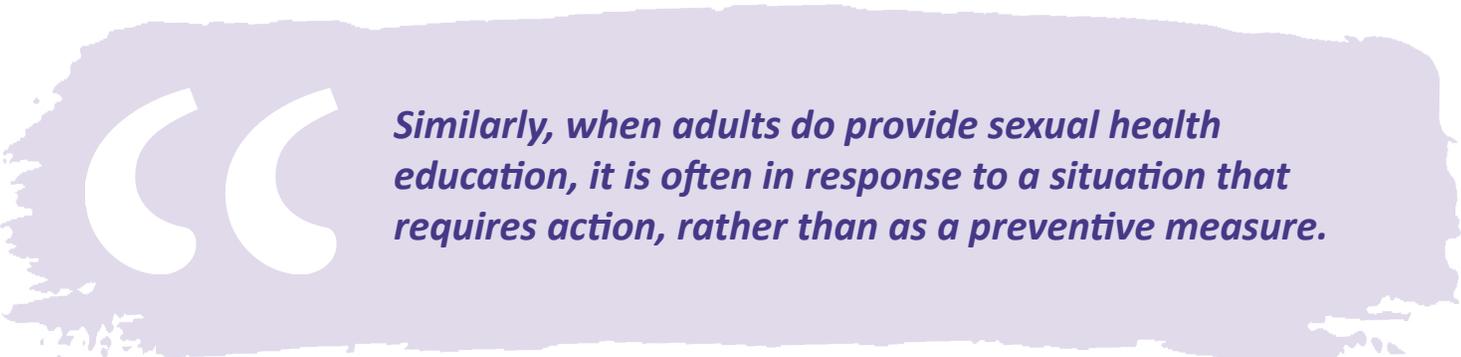


Prevention of sexual violence begins in early childhood. The resource ***Prevention of Sexual Violence Begins in Early Childhood*** (available in French only) provides practical guidance for adults on early prevention. To maximize its effectiveness, an ecosystemic approach is highly recommended. Such an approach can be defined as a way of understanding the lived experiences of individuals that considers the individual (the child), their needs and characteristics, as they interact with the various systems that surround them (their family, their community, and society itself). These systems mutually influence one another and encompass both risk factors and protective factors for the individual. Experiences within these different systems have a direct impact on the child's lived experience and, ultimately, on their development. As a result, within the context of sexual violence prevention, each system has both the power and the responsibility to act to protect children, especially the youngest. Engaging all the adults in a child's environment and providing them with support and concrete tools helps ensure that the responsibility for self-protection does not rest with the child. Child protection is therefore a collective responsibility.

Moreover, for prevention efforts to be effective, all children must have access to prevention programs. This requires measures that can reach as many children as possible over the short, medium, and long term. For example, this may include implementing programs in settings where children spend time, mobilizing communities and key stakeholders

in youth development, engaging committed partners, identifying ways to support sustainability and knowledge transfer, and adapting programs to children rather than expecting children to adapt to the programs. All of this is intended to foster a protective community for all children.

It is now well understood that two essential pillars in sexual violence prevention are sexual health education and the promotion of healthy and egalitarian relationships. Yet, sexual health education remains a taboo subject, and is closely tied to social and moral norms, as well as to individuals' deeply held values. It is not uncommon for adults to feel uncomfortable delivering sexual health education. Additional barriers to their comfort may arise when they themselves have not had access to sexual health education. This discomfort may be further compounded when their broader societal norms, culture, religion, or the teachings imparted by their family, the significant people in their lives, or their community portray sexuality as a taboo topic. Our perceptions of sexuality—and, consequently, the messages we convey to children—may also be influenced by many other factors. Similarly, when adults do provide sexual health education, it is often in response to a situation that requires action, rather than as a preventive measure. In such contexts, adults generally have little time to reflect before taking action. Yet taking time for personal reflection is essential to ensuring that children receive sexual health education that is comprehensive, healthy, and positive, and grounded in openness and acceptance.



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To adequately prepare yourself to support children in matters of sexuality, take time to reflect on the following points:

- How is my perception of sexual health education shaped by the values I was taught? By my own experiences with sexuality (a positive experience of sexuality? negative, violent, or traumatic experiences?), by my culture, my gender (including the influence of gender stereotypes), my upbringing, my religion, my social status, my privileges?
- What potential challenges might I encounter when dealing with children? With their parents?
- What is my level of comfort in answering children's questions about sexuality? In responding when children display sexual behaviours? What are my limits?

After reflecting on these important questions, adults are better positioned to adopt positive attitudes toward each child by emphasizing respect for the diverse identities and lived experiences of each child, as well as for their perspectives and ideas.

Notably, for prevention efforts to be effective, sexual health education should not be moralizing or prescriptive. Rather, it should provide an open environment for sharing, reflecting, and developing critical thinking.

Universal prevention programs have the advantage of being applicable across a wide range of settings and contexts. As a result, even children who have already experienced maltreatment can benefit from these programs, as their educational component can help prevent revictimization.

In fact, having access to this type of content can reduce barriers to disclosure, including in situations of polyvictimization. Polyvictimization can be defined as the experience of multiple forms of maltreatment occurring concurrently. Various studies conducted in recent years indicate that this is a relatively common phenomenon and that it may contribute to delaying the disclosure of a situation of sexual violence.

The reasons for this are multifaceted. Firstly, children growing up in unstable environments often do not have trusted adults to turn to in order to disclose abuse, and they may experience isolation. Additionally, among the many adverse life experiences a child may face, they may not initially perceive sexual violence as the most severe. Indeed, growing up in an unstable—and at times violent—family environment can foster a persistent sense of insecurity in the child, and even a fear of retaliation. The child may feel compelled to protect themselves through various strategies, such as keeping a heavy secret. They may also seek to protect other family members, for example in situations of intimate partner violence, or to prevent siblings from experiencing the same abuse. Finally, because people who sexually abuse children use a variety of techniques to coerce them into not disclosing and exploit their vulnerabilities, a child growing up in an emotionally unnurturing environment may confuse sexual violence with attention or care, as it has the potential to provide a sense of connection or validation from an adult. This does not mean that the child does not recognize the harm, but rather reflects the complex emotional compromises they are forced to make in the absence of safe and nurturing relationships.

Thus, while sexual violence against children is already an underreported phenomenon, polyvictimization of youth constitutes an additional barrier to disclosure. However, addressing all youth through a universal approach, and fostering awareness of their rights and the ability to recognize risky situations encourages children to seek help. Not only do universal sexual health education programs help prevent sexual violence, but they also play a role in preventing potential revictimization. In turn, educational components that focus on healthy relationships contribute to the prevention of all forms of interpersonal violence. It is therefore beneficial for children from all backgrounds to have access to these programs. To achieve this, it is essential to train and mobilize the adults who interact with children and youth in both formal and informal settings, to deliver the sexual health content.



1.1 Tools to Identify and Respond to Disclosure

Lily's Story

Lily and Alix take part in a workshop on sexual cyberviolence prevention, facilitated by two camp counsellors. The workshop discusses the manipulation tactics used by online sexual predators (people who use online tactics to sexually exploit others) and reflects on how easy it can be to pretend to be someone else. As the workshop progresses, Lily becomes increasingly quiet. Alix notices that Lily is not acting like herself. When he asks her about it, she admits that she has a secret but is not allowed to talk about it. Alix explains that his teacher talked to him about safe secrets and unsafe secrets. He tells Lily that if her secret makes her feel sad, angry, or confused, she should talk to a trusted adult.

Prevention programs should include certain essential elements to be effective. The following are some key components:

Demystifying Sexual Health Education and Promoting Communication

- Sexual health education should be comprehensive (addressing all areas of development), health-focussed (not focused solely on risks), tailored (aligned with children's age, stage of development, and needs), and inclusive (affirming diverse identities and lived experiences).
- The benefits of introducing sexual health education from an early age should be clearly highlighted (breaking taboos, easing curiosity, providing accurate and appropriate information, fostering access to a network of trusted adults, etc.). The resource [***Why Does Sex-Ed Matter? Because Science Says So!***](#) by Action Canada for Sexual Health and Rights further explores the evidence supporting early, comprehensive sexual health education.
- Adults should be encouraged to take an active role by expanding their knowledge of children's psychosexual development and enhancing their skills in addressing sexual behaviours.

Building Self-Advocacy and Safety Skills

- Children's ability to assert themselves should be supported and strengthened. It is essential that children understand that their opinions are valid, that they have rights, and that it is both possible and important to assert themselves and have their boundaries respected.
- Concepts such as personal space, intimacy, and consent are fundamental to developing assertiveness and maintaining respectful relationships with others.
- Children must be able to recognize risky situations, learn to trust their feelings and instincts, know what to do to protect themselves, and be able to identify trusted adults in their environment whom they can turn to.
- It is important to create conditions where children and youth feel safe to tell someone and can access support quickly. Disclosure of any situation involving sexual violence must be strongly encouraged.
- Responsibility for sexual violence must never rest with the child; it lies entirely with the perpetrator.

Discussing Sexual Violence in All Its Forms

- Sexual violence against children takes many forms. Too often, prevention efforts focus primarily on acts involving direct physical contact, overlooking other forms of sexual violence such as sexual cyberviolence (e.g., sextortion, child luring, non-consensual sharing of intimate images) or sexual violence within adolescent or youth dating relationships (e.g., cyberbullying, coercive control, pressure to engage in sexual activity). In most cases, children and youth experience sexual violence at the hands of someone they know, which poses a major barrier to disclosure. It is therefore crucial to adapt our practices and to highlight the different forms of sexual violence so that youth can recognize them and respond effectively if they find themselves in risky situations.
- Children must be taught to distinguish between safe secrets and unsafe secrets, to understand the difference between safe and unsafe touch, and to recognize actions that are unacceptable.

For definitions of different forms of sexual violence, see the resource [***Forms of Sexual Violence***](#) by the Sexual Violence Helpline.

Promoting Healthy and Egalitarian Relationships

- Challenging gender stereotypes should be encouraged, both in children and adults, as adults serve as role models for children.
- Developing relational skills should be prioritized, so that children acquire social, communication, and conflict resolution skills that are healthy, respectful, and egalitarian.

Each of these strategies helps engage all the adults in the lives of children and adolescents—both people close to them and professionals—to be part of a protective community. In this way, the responsibility for self-protection does not rest solely on the child's shoulders, but also (and primarily) on the adults in their lives.





1.2 Children’s Needs at the Centre of Prevention Efforts

When it comes to sexual health education, children’s needs are universal. However, the way in which these needs are addressed must be tailored to each child’s context, unique characteristics, and specific vulnerabilities. Effective prevention practices must reflect and affirm the diversity of children’s lived realities. Thus, to be relevant, the messages, content, and imagery used must represent their lived experiences. Placing the child at the centre of sexual violence prevention practices therefore requires a certain humility and a great deal of openness: it is impossible to be an expert on the reality of every child, every family, every community, and every group. Engaging in co-construction with communities and partners is a

valuable asset in making sexual health education and prevention methods as inclusive as possible. To convey meaningful and effective messages, it is essential to seek the perspectives and collaboration of the various systems involved. For example, when developing resources for children with specific support needs, partnerships should be established with specialists in education, field-based experts, and organizations that advocate for the rights of this population. Their involvement may take the form of an advisory committee that works actively, on the development of knowledge mobilization materials, or that serves as an advisor for the development of tools intended for your target audience.

A Few Recommendations

- Pay attention to the various systems and forms of oppression that shape people’s experiences and ensure that you avoid imposing your own assumptions, norms, or approaches. A co-construction approach should be prioritized when a program is intended for a specific population. Seek partnerships with key community stakeholders.
- Take the time to build relationships and to truly understand the target audience you wish to reach. Avoid creating one-size-fits-all resources based on the assumption that you understand everyone’s reality.
- Adopt others’ perspectives in order to better understand their reality. Ensure that the materials developed are inclusive, both in the language used and in their visual representation (e.g., illustrations that reflect diversity in all its forms).
- Conduct a pilot implementation that includes feedback mechanisms with participants and community members. Evaluate programs to measure their short- and medium-term effects.

2. Restoring Power to Children and Youth

There is no standard profile when it comes to children’s reactions, consequences, and lasting impacts after experiencing sexual violence. While some children may show few or no visible signs of distress, others may experience significant emotional, behavioural, or relational effects. These differences are shaped by a range of individual and contextual factors.

Some children have strong internal resources that they can draw on to cope with adversity (for instance, a strong sense of self-esteem and optimism). For others, an apparent lack of reaction may be the result of defence mechanisms such as avoidance, emotional numbing, or dissociation. In some cases, signs of trauma in children may emerge months or even years later. It is therefore difficult to predict how a child will respond following disclosure. In addition, adults in the child’s environment may interpret the absence of symptoms as a sign that everything is fine, or even as an indication that the child is lying. This type of response can lead to secondary victimization for the child, whose experience is minimized or even dismissed by the adult making this interpretation. Conversely, when a child receives quality support and care at the time of disclosure, as well as throughout the subsequent stages of their process, this can be one of the most significant protective factors in their healing. The moment of disclosure is therefore a key moment in the child’s experience of support and care.



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Secondary Victimization

Within the context of children and youth disclosing experiences of sexual violence, Secondary Victimization refers to “when child victims face negative reactions—whether received, perceived, or not adapted to their needs—from their loved ones and/or professionals in the sociojudicial system. This can contribute to increased suffering and trauma for the victim.”¹

¹ Martin, J. (2025). ***Building a protective community for all children and adolescents: Best practices in sexual violence prevention and intervention.*** Learning Network & Knowledge Hub Webinar. Centre for Research & Education on Violence Against Women & Children.

The article ***Le double coup porté aux victimes d’agression sexuelle*** (available in French only) discusses recent Canadian research on secondary victimization and its psychological impacts.



2.1 Receiving the Disclosure

Lily's Story

Lily meets privately with her facilitator, Mistral. She shares the secret that has been causing her great distress: for the past few weeks, a school friend she plays with online has been making her send intimate pictures of herself. When she says she wants to stop, the friend threatens to send the photos to her parents and to all her friends. Lily is extremely uncomfortable. She feels guilty for having agreed to share some photos and is afraid that her dads will scold her. Mistral takes the time needed to properly receive Lily's disclosure. He sits facing her, at eye level. He maintains reassuring eye contact and lets her tell her story without interrupting or pressing for details. He thanks her for sharing her secret and emphasizes how brave she was to do so. He promises to take the necessary steps to ensure the situation does not happen again and that she is safe. Lily feels anxious about what comes next but is also relieved that she finally found the courage to share.

Disclosure of sexual violence sometimes takes the form of a child's verbal statements, but it can also be signalled through behaviours or indicators that raise concerns. For example, some children may display sexual behaviours that are concerning (such as behaviours involving the use of force, threats, or coercion; sexually explicit drawings or language; adult-like sexual behaviours; or sexual knowledge that is beyond what would be expected for their developmental stage). Other children may show signs that cannot be directly attributed to sexual violence but nonetheless raise concerns (e.g., somatization, anxiety, depression, sudden changes in behaviour, etc.). It is important to remember that, while these elements may hint at a situation of sexual violence, they are not proof. The most reliable indicator

that a child has experienced sexual violence is when the child reports an act of sexual violence. Regardless of the form the disclosure takes, it is often an anxiety-provoking experience for the child, and can feel frightening and overwhelming. The resource [**Key Considerations When a Child Discloses Sexual Abuse**](#) (available in French only) further outlines the specific challenges children may face when disclosing sexual violence. At the same time, disclosure can also be an important first step toward safety, support, and healing. When a child intentionally shares what they have experienced, it can be an important step toward reclaiming power. The response of the adult who receives the disclosure has the potential to significantly influence the child's path forward.

Words and Actions Matter

The child needs to be told:

"Thank you for trusting me and sharing with me."

"I hear you."

"You are brave."

"I'm sorry that you had to go through this."

"I believe you."

"I will do what's needed to make sure this stops and that you are safe."

These words can be powerful for a child who has experienced sexual violence. They help the child feel safe and validated. They can restore trust and help the child begin their healing journey. However, for this process to begin, the adult's actions must be consistent with their words. It is essential to act promptly and to take the necessary steps to protect the child (reporting the situation to child protection authorities without delay).

The resource [**How to Respond When There Is Concern or a Disclosure?**](#) (available in French only) provides practical guidance on how to respond when a child discloses or when there are concerns about possible sexual violence.



2.2 Coordinating Services Around the Child

From the moment a child's situation is disclosed to the authorities, a number of processes are set in motion. This can include medical services (e.g., a general examination and a sexual assault evidence kit) justice system processes (e.g. a non-suggestive interview with the investigative team and potential legal proceedings), and social services (e.g. assessment of the child's situation and protective measures, if required). For the child and their family, this marks the beginning of a series of events over which they have very little control. The socio-judicial trajectory varies from one situation to another and from one family to another. Its duration is impossible to predict. The child and their family are often faced with the unknown. They will be required to meet with many professionals working to ensure the health, well-being, and safety of the child. For many families, this could be the first (and only) time they will have to interact with representatives of the justice system, which can be intimidating or confusing. As professionals involved in the socio-judicial trajectory are responsible for enforcing laws, policies, and procedures—which are often unfamiliar to the child and their loved

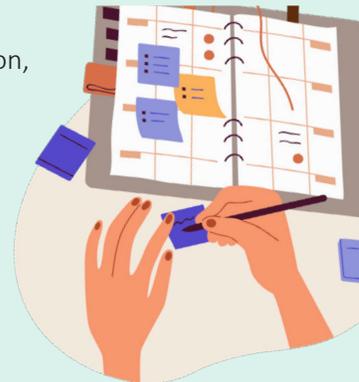
ones—families may quickly lose their sense of control and their bearings.

As the child interacts with multiple systems and services providers, they are often required to open up to unfamiliar adults and recount their story. Each time, there is a risk of causing secondary victimization. Many professionals remain unaware of the potential impact their verbal and non-verbal reactions and their practices can have on the child. To guide the family and to ensure that the socio-judicial trajectory has restorative potential, the child's perspective must remain central throughout their interactions with different services and providers. The child's needs, their perception and understanding of the processes involved, as well as their feedback, must be prioritized at all times. This requires access to trained professionals who are knowledgeable about child development and who adopt a trauma-informed approach. Collaboration among the various partners supports these practices by ensuring continuous, personalized, and responsive care.

Distress Felt Upon Disclosure

When a child discloses that they have experienced sexual violence, it is deeply distressing for the entire family. It is not uncommon for parents, caregivers, and other supportive adults to react just as strongly—or even more strongly—than the child. Why?

- Loss of bearings and a sense of losing control over one's life
- Feelings of guilt, shame, and isolation
- Physical and emotional impacts (e.g., post-traumatic stress symptoms, anxiety, depression, changes in relationships and wellbeing)
- Exhaustion related to the many appointments and steps involved
- Disruption of personal and family life (e.g., changes to routines, caregiving arrangements, family reorganization, separation, work absenteeism)



Lily's Story

*Lily's dads seek support from the **NeedHelpNow** platform, a service of the Canadian Centre for Child Protection that helps young people who wish to have a sexual image and/or video shared online removed. Once child protection services determine that Lily's parents are ensuring her safety and that her development is not compromised, her file is closed after a personalized referral is made to **Marie-Vincent**, so that Lily and her family can receive support from the organization's specialized sexual violence support team. Her case then proceeds to a needs assessment, to determine the most appropriate type of support (individual psychosocial support, individual therapy, group therapy). Lily's dads also have access to psychosocial support services that help them cope with the situation and guide them through the various steps needed to support Lily. These services are offered to all parents of children and youth who have experienced sexual violence, through individual and/or group-based supports. For Lily's dads, this support is essential, as they are devastated by what their daughter is experiencing and feel guilty for not having known sooner.*

In some cases, parents, caregivers, or other adults who support children may be deeply affected by the child's experience of sexual violence, particularly if it echoes their own past experiences. Research suggests that a parent's previous exposure to sexual violence or trauma may influence how they respond to their child's situation. This phenomenon is sometimes discussed in the literature as intergenerational impacts of violence. The article **The Intergenerational Cycle of Childhood Sexual Abuse (CSA)** (available in French only) explores intergenerational impacts of violence and their influence on parental responses.

In these situations, it can be difficult for a caregiver to distinguish their child's experience from their own.

They may experience heightened emotions, need to manage overwhelming feelings, or hold mistrust toward systems if their own experiences with those systems were not supportive or reparative. Their reactions may at times appear misaligned with the child's immediate needs.

A non-judgmental and compassionate stance is essential in supporting caregivers through these challenges. It is important to recognize that such responses are shaped by many factors, including the supports available to the caregiver, cultural context, and individual coping strategies, and that they do not follow a single or predictable pattern.

Lily's Story

Today, Lily completes her therapeutic journey at Marie-Vincent. Her psychotherapist gives her a teddy bear, Marvin, as a symbol of her healing journey. Lily is now able to talk about her story. But what matters most to her is that this violence no longer defines her story. It is only a chapter, and she is convinced that she will write many more—each with a happy ending.

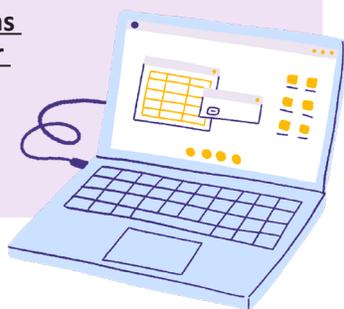
Every child is unique. This uniqueness is shaped not only by a child's temperament, but also by their lived experiences, skills, needs, and the environment in which they grow, including the people they encounter along the way. As a protective community, we can influence a child's life trajectory before a difficult situation arises by

acting as agents of prevention. We can also support the child when that trajectory becomes more challenging, by adopting trauma-informed, needs-based practices that recognize their individuality. Every child has the capacity for resilience. It is up to us, as professionals and trusted adults, to nurture that capacity and help them flourish.

Online Resources

Marie-Vincent offers additional online trainings and professional development opportunities. A full catalogue of courses is available at: <https://marie-vincent.uxpertise.ca/catalog>

See: **Supporting Child Victims of Sexual Violence and Their Families Through the Socio-judicial Trajectory** (available in French only).





About Marie-Vincent

Marie-Vincent is a child and youth advocacy centre located in Quebec. Its mission is to support children and adolescents who experience sexual violence by providing the services they need, under one roof and in collaboration with its partners. Marie-Vincent also works to prevent violence through education, awareness and training, and by helping children who have engaged in problematic sexual behaviours.

Ultimately, Marie-Vincent wants to help build a world free of violence. To achieve this, the organization is involved in developing a protective community that will ensure the optimal development of all young people, including children who have experienced sexual violence and children who have engaged in problematic sexual behaviours.

Programs at Marie-Vincent

Marie-Vincent develops sexual violence prevention programs for children (ages 0 to 12) and adolescents (ages 12 to 17). The Lantern program is aimed at preschool-aged children and the adults in their lives. It focuses on sexual health education and on promoting egalitarian relationships and is tailored to the developmental stage of young children. The Compass program targets elementary school-aged children, as well as the adults who interact with them daily. Developed using an ecosystemic approach, it helps foster adult engagement in prevention by giving them the tools to foster healthy and egalitarian relationships with children and to provide sexual health education tailored to their needs. Building on the Lantern and Compass programs, the Pathways project aims to implement tailored prevention practices to protect from sexual violence children aged 4 to 12 who require specific supports. It focuses on providing sexual health education tailored to their needs, fostering autonomy, and promoting egalitarian relationships. Pathways tools were developed for children aged 4 to 12, who may benefit from additional cognitive and/or communication supports, including children with a mild intellectual disability (ID), autism with mild support needs, or a developmental language disorder (DLD).



Marvin the Bear

Marvin is the emblem of Marie-Vincent. This little orange teddy bear—whose bilingual name combines “Marie” and “Vincent”, two of the most popular first names when the Foundation was established 50 years ago—is given as a plush toy to children who have completed their therapeutic journey at Marie-Vincent. Marvin has come to symbolize resilience. In recent years, Marvin has taken on an increasingly prominent role in prevention programs. Youth (and adults too!) readily adopt him as an ally in preventing sexual violence.

Restoring Power to the Child: What Supported Lily’s Safety and Recovery

Lily’s story, woven throughout this resource, illustrates how trauma- and violence-informed (TVI), ecosystemic, and child-centered approaches can restore power to children who have experienced sexual violence.

The following elements drawn from different moments in her story highlight what helped support Lily’s safety, and healing, and reduced the risk of further harm.

Key practice/element	Description	How it restored power & prevented further harm
<i>Safe, inclusive prevention environment</i>	The camp implemented an evidence-based program (Marie-Vincent’s Compass program) that was inclusive, adaptive, and transparent with parents.	Centered children’s safety and inclusion; modelled openness and respect; began building trust before harm occurred.
<i>Informed and engaged caregivers</i>	Lily’s dads attended the parent information session, asked questions, and reminded Lily that she could always talk to them.	Reinforced protective adult relationships; made it clear that responsibility for safety rests with adults, not the child.
<i>Peer support and early recognition</i>	Alix noticed Lily’s discomfort and reminded her about safe and unsafe secrets.	Empowered peer-to-peer awareness and support; emphasized that help-seeking is acceptable and safe.
<i>Respectful disclosure process</i>	Mistral, the counsellor, met Lily at eye level, maintained calm tone and body language, and validated her courage.	Restored Lily’s agency during a vulnerable moment; countered shame with affirmation; modelled trustworthy adult behaviour.
<i>Diligent, coordinated response</i>	Mistral ensured proper reporting and access to specialized services (NeedHelpNow, Marie-Vincent).	Protected Lily from further harm; minimized risk of secondary victimization through timely, appropriate action.
<i>Psychosocial support for families and loved ones</i>	Lily’s dads received psychosocial support alongside Lily’s therapy.	Reduced parental guilt and reactivity; strengthened the family’s capacity to be protective and supportive.
<i>Specialized, trauma-informed services</i>	The support team adapted care to Lily’s developmental level and family context.	Created continuity, predictability, and safety; allowed Lily to process trauma at her own pace.
<i>Rituals of closure and recognition</i>	At the end of therapy, Lily received a symbolic object (Marvin the teddy bear) representing her healing journey.	Affirmed her progress and resilience; reframed her story from harm and survival to self-determination and agency.

References

¹ Campbell, R., Dworkin, E., & Cabral, G. (2009). *Trauma, Violence, & Abuse*, 10(3), 225–246.

² Ullman, S. E. (2002). Social Reactions to Child Sexual Abuse Disclosures: A Critical Review. *Journal of Child Sexual Abuse*, 12(1), 89–121. https://doi.org/10.1300/J070v12n01_05

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Related Webinar

This resource builds on the LNKH Webinar “***Building a Protective Community for All Children and Adolescents: Best Practices in Sexual Violence Prevention and Intervention***,” presented by Jessica Martin. We invite readers who are interested in continuing to explore these themes to view the recording.

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