



## Physician Referrals to the Sexual Behaviours Clinic (SBC)

The initial assessment consists of an interview where a consult note including recommendations for treatment will be provided to the referral source with client consent.

Services are intended for people with [paraphilic](#) (or atypical) sexual interests or behaviours including:

- Pre-pubescent and/or pubescent children
- Exposing to, touching, watching or rubbing up against unsuspecting people for sexual gratification
- Coercive or violent sexual interests
- Child sexual exploitation images (child pornography)
- Animals

Please note the SBC [DOES NOT](#) offer services to people:

- Exclusively experiencing hypersexuality (e.g. sex/porn addiction, extramarital affairs etc.)
- Exclusively experiencing sexual dysfunctions (e.g. pain during intercourse, erectile dysfunction, low libido)
- Exclusively experiencing distress, confusion, or would like to discuss their gender identity
- With pending sexual offence charges or sexually motivated offences
- Appealing a sexual offence conviction
- Currently in custody
- Seeking parenting capacity assessments
- Seeking a risk assessment

*If you have any questions about this criterion, please call 416-535-8501 Ext: 32510.*

Referrals must include:

- CAMH Referral Form (with a detailed reason for referral)
- Psychiatric or psychological reports and/ or assessments (helps in the understanding of the individual's mental health and/or sexual concerns)
- Consent to disclose PHI

Send completed referrals to:

Access CAMH by either:

1. Completing the [electronic form](#) or
2. Completing the [fillable PDF](#) and faxing the form to: 416-979-6815.

If you have questions about making a referral or the status of a referral call  
ACCESS CAMH at 416-535-8501, option 2