

ONTARIO INCIDENCE STUDY OF REPORTED CHILD ABUSE AND NEGLECT — 2023

MAJOR FINDINGS

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The OIS-2023 was conducted by a team of researchers who are committed to the need for high quality data to help inform child welfare system decisions. In particular, I would like to thank Drs. Tara Black and Rachael Lefebvre for their leadership on this project. As we disseminate the findings contained in this report, we continue to work with our community partners to highlight where there are disparities and how these data can be used to inform policy and practice.

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EXECUTIVE SUMMARY

The OIS-2023 is the seventh provincial study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by child protection services in Ontario. The OIS-2023 tracked 6,799 child maltreatment-related investigations (6,360 investigations involving children less than one to 15 years old and 439 investigations involving 16- and 17-year-olds) conducted in a representative sample of 20 child welfare service agencies across Ontario in the fall of 2023. To maintain comparability between cycles of the OIS, Chapter 3 provides descriptive data based on the 6,360 investigations of children 0-15 years of age. The rest of this report provides descriptive data based on the full sample of investigations involving children 0-17 years of age.

Objectives and Scope

The primary objective of the OIS-2023 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2023. Specifically, the OIS-2023 is designed to:

1. determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence as well as multiple forms of maltreatment;
2. investigate the severity of maltreatment as measured by forms of maltreatment, duration, and physical and emotional harm;
3. examine selected determinants of health that may be associated with maltreatment;

4. monitor short-term investigation outcomes, including substantiation rates, out-of-home placement, and use of child welfare court, and
5. compare selected rates and characteristics of investigations across the 1993, 1998, 2003, 2008, 2013, 2018, and 2023 cycles of the OIS.

Child welfare workers completed a standardized online data collection instrument. Weighted provincial, annual estimates were derived based on these investigations. The following considerations should be noted when interpreting OIS statistics:

- » the unit of analysis is a child investigation;
- » the study is limited to reports investigated by child welfare agencies and does not include reports that were screened out, only investigated by the police, or never reported;
- » the study is based on the assessments provided by investigating child welfare workers that were not independently verified;
- » as a result of changes in the way cases are identified, the OIS-2023 report can only be directly compared to the OIS-2018, OIS-2013, and OIS-2008, but not previous OIS reports; and
- » all estimates are weighted, annual estimates for 2023, presented either as a count of child maltreatment-related investigations (e.g., 12,300 child maltreatment-related investigations) or as the annual incidence rate (e.g., 3.1 investigations per 1,000 children).¹

Caution is also required in comparing the OIS-2023 Major Findings Report with reports from previous cycles of the study because of changes in procedures for tracking investigations made in 2008. Due to changes in investigation mandates and practices over the last twenty-five years, the OIS-2023 tracked risk assessments and maltreatment investigations separately. To better capture both types of cases, the OIS-2008 was redesigned to separately track maltreatment investigations versus cases opened only to assess the risk of future maltreatment. Before the OIS-2008, cases that were only being assessed for risk of future maltreatment were not specifically included. Thus, comparisons with previous cycles, prior to 2008, in Chapter 3 of this report are limited to comparisons of rates of all maltreatment-related investigations including risk-only investigations. In contrast, risk of future maltreatment cases are excluded from the 2023 estimates of rates and characteristics of substantiated maltreatment in Chapters 4 and 5.²

Investigated and Substantiated Maltreatment in 2023

Of the 117,527 maltreatment-related investigations conducted in Ontario in 2023 involving children less than one to 15 years old (a rate of 48.80 per 1,000 children), 77 percent were maltreatment investigations which focused on a concern of abuse or neglect (an estimated 90,460 child maltreatment investigations or 37.56 investigations per 1,000 children), and 23 percent of investigations were concerns about risk of future maltreatment (an estimated 27,067 investigations or 11.24 investigations per 1,000 children). As shown in Figure 1, thirty-three percent of all investigations were substantiated, an estimated 39,236 child investigations. In a further two percent

¹ Please see Chapter 2 of this report for a detailed description of the study methodology.

² Two exceptions to this are Table 5-1a and Table 5-1b, which include risk of future maltreatment investigations.

of investigations (an estimated 2,404 child investigations or 1.00 investigations per 1,000 children) there was insufficient evidence to substantiate maltreatment; however, maltreatment remained suspected by the investigating worker at the conclusion of the investigation. Forty-two percent of investigations (an estimated 48,820 child investigations or 20.27 investigations per 1,000 children) were unfounded. In four percent of all investigations, the investigating worker

concluded there was a significant risk of future maltreatment (1.82 per 1,000 children, an estimated 4,382 child investigations). In 18 percent of investigations, no significant risk of future maltreatment was indicated (an estimated 21,740 investigations or 9.03 investigations per 1,000 children). In one percent of investigations, workers did not know whether the child was at significant risk of future maltreatment (an estimated 945 investigations or 0.39 per 1,000 children).

1993-1998-2003-2008-2013-2018-2023 Comparison

Changes in rates of maltreatment-related investigations can be attributed to a number of factors including changes in (1) public and professional awareness of the problem, (2) legislation or case-management practices, (3) the OIS study procedures and definitions, and (4) the actual rate of maltreatment-related investigations.

Changes in practices with respect to investigations of risk of maltreatment pose a particular challenge since these cases were not clearly identified in the 1993, 1998, and 2003 cycles of the study. Because of these changes, the findings presented in this report are not directly comparable to findings presented in the OIS-1993, OIS-1998, and OIS-2003 reports, which may include some cases of risk of future maltreatment in addition to maltreatment incidents. Because risk-only cases were not tracked separately in the 1993, 1998, and 2003 cycles of the OIS, comparisons that go beyond a count of investigations are beyond the scope of this report.

FIGURE 1: Type of Investigation and Level of Substantiation in Ontario in 2023

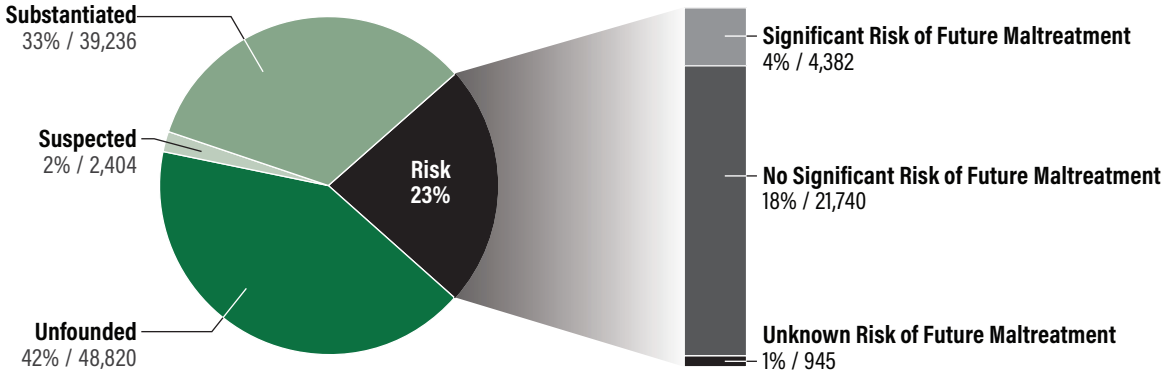
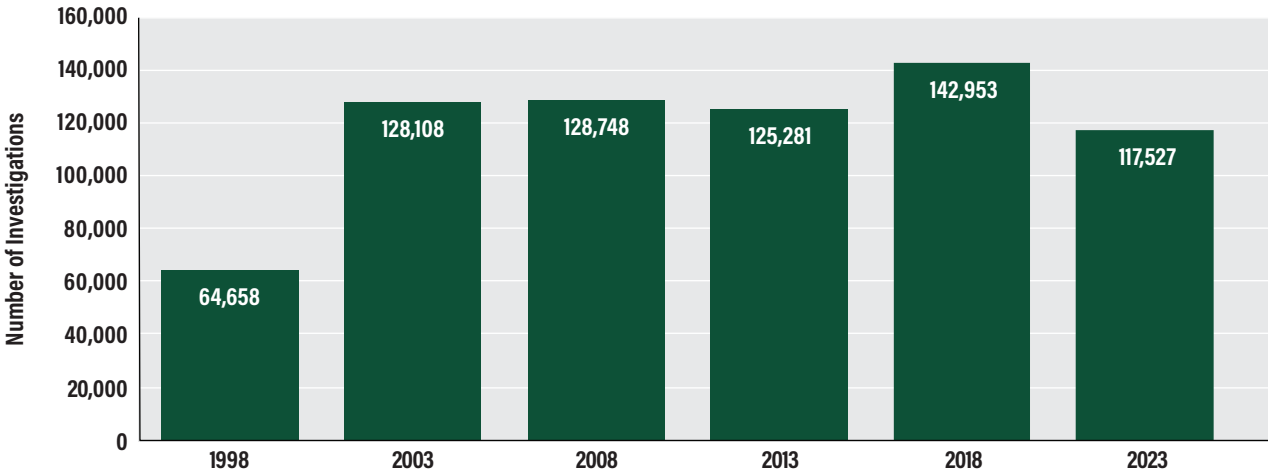


FIGURE 2: Number of Child Maltreatment Investigations in Ontario in 1998 and 2003, and Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023



As shown in Figure 2, in 1993, an estimated 46,860 investigations were conducted in Ontario, a rate of 21.32 investigations per 1,000 children. In 1998, an estimated 64,658 investigations were conducted in Ontario, a rate of 27.43 investigations per 1,000 children. In 2003, the number of investigations doubled, with an estimated 128,108 investigations and a rate of 53.59 per 1,000 children. The number of child maltreatment-related investigations did not change significantly between 2003, 2008, 2013, 2018, and 2023. In 2008, an estimated 128,748 maltreatment-related investigations were conducted across Ontario, representing a rate of 54.05 investigations per 1,000 children. An estimated 125,281 investigations were conducted in 2013, a rate of 53.32 investigations per 1,000 children. In 2018, an estimated 142,953 investigations were conducted, representing a rate of 60.53 investigations per 1,000 children. An estimated 117,527 investigations were conducted in 2023, a rate of 48.80 investigations per 1,000 children. There was a statistically significant decrease in the rate of maltreatment-related investigations between 2018 and 2023.

Placements

The OIS tracks out-of-home placements that occur at any time during the investigation. Investigating workers are asked to specify the type of placement. In cases where there may have

been more than one placement, workers are asked to indicate the setting where the child spent the most time. In 2023, there were no placements in 97 percent of all investigations (an estimated 113,705 investigations or 4721 investigations per 1,000 children). Three percent of investigations resulted in a change of residence for the child: two percent to informal kinship care (an estimated

2,381 investigations or 0.99 investigations per 1,000 children); one percent to foster care (an estimated 1,336 investigations or 0.55 investigations per 1,000 children); and less than one percent to residential/secure treatment or group homes (an estimated 105 investigations or 0.04 investigations per 1,000 children).

As shown in Figure 3, placement rates (measured during the investigation) have remained relatively consistent across the past six cycles of the OIS, other than a statistically significant decrease in informal placements from 2008 to 2013.

FIGURE 3: Placement in Child Maltreatment Investigations in 1998 and 2003, and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 1998, 2003, 2008, 2013, 2018, and 2023

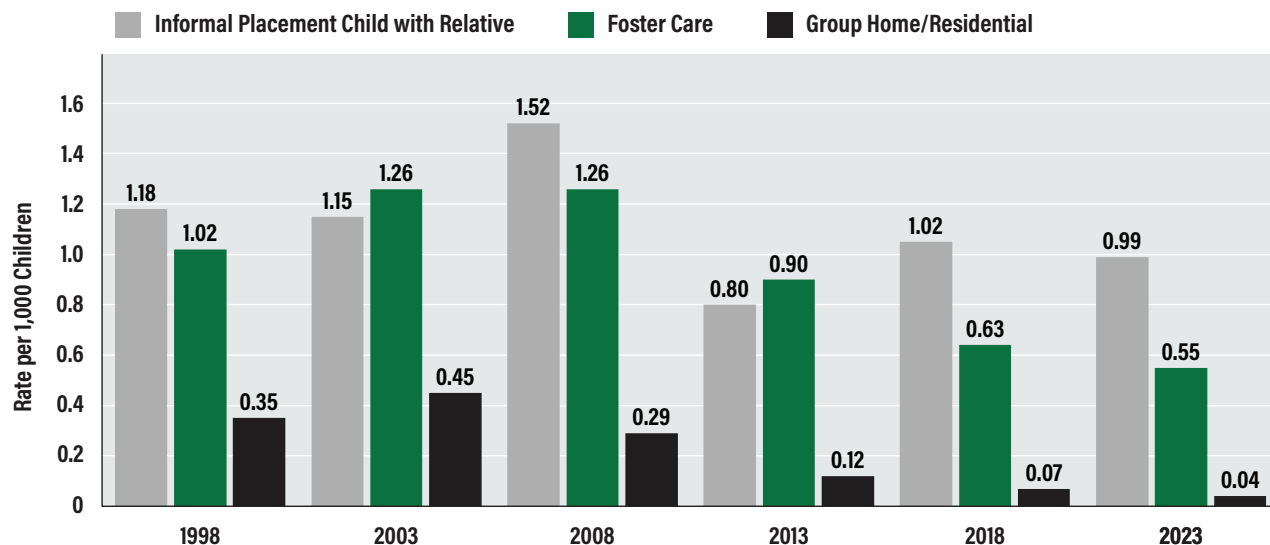
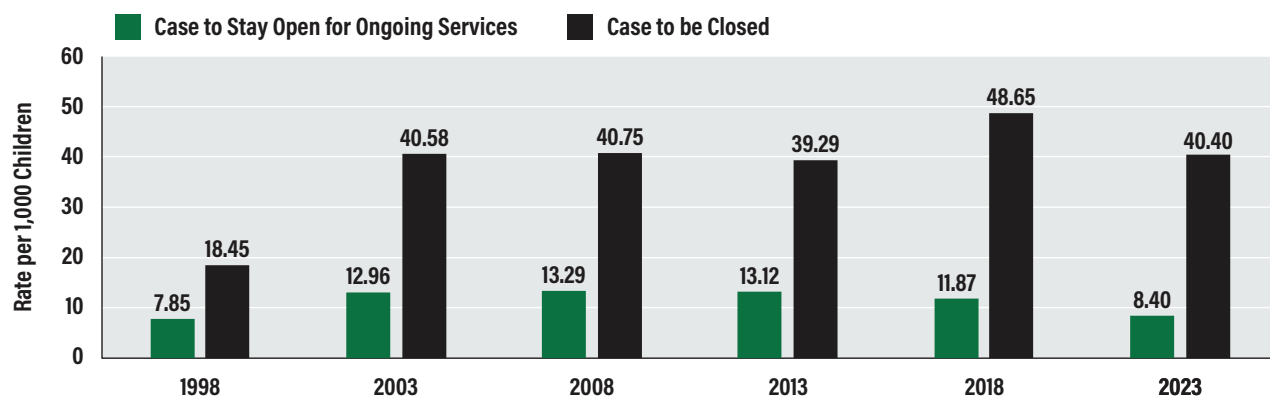


FIGURE 4: Provision of Ongoing Services Following Child Maltreatment Investigations in 1998 and 2003, and Following Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023



Ongoing Services

Investigating workers were asked whether the investigated case would remain open for further child welfare services after the initial investigation (Figure 4). An estimated 20,235 investigations remained open for ongoing services in Ontario in 2023, a rate of 8.40 investigations per 1,000 children or 17 percent of all investigations. In an estimated 97,292 investigations, the case was closed following the initial investigation (a rate of 40.40 investigations per 1,000 children or 83 percent of all investigations). There was a statistically significant decline in the incidence of maltreatment-related investigations that were opened for ongoing child welfare services between 2018 and 2023, and the incidence of investigations transferred to ongoing services in 2023 (a rate of 8.40 investigations per 1,000 children) is comparable to the incidence in 1998 (a rate of 7.85 investigations per 1,000 children).

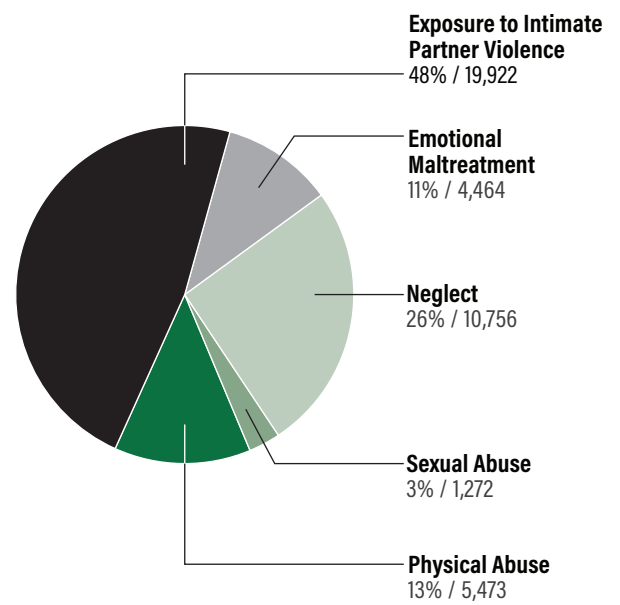
Key Descriptions of Substantiated Maltreatment Investigations in Ontario in 2023

Categories of Maltreatment

Figure 5 presents the incidence of substantiated maltreatment in Ontario, broken down by primary category of maltreatment, for the sample of maltreatment investigations in 2023 involving children 0-17 years of age.

There were an estimated 41,887 substantiated child maltreatment investigations in Ontario in 2023 (15.36 investigations per 1,000 children). Exposure to intimate partner violence represents the largest proportion of substantiated maltreatment investigations. Nearly half (48 percent) of all substantiated investigations identified exposure to intimate partner violence as the primary form of maltreatment (an estimated 19,922 investigations or 7.30 investigations per 1,000 children). In 26 percent of substantiated investigations, neglect was identified as the overriding concern, an estimated 10,756 investigations (3.94 investigations per 1,000 children). In 13 percent of substantiated investigations, or an estimated 5,473 investigations, the primary form of maltreatment identified was physical abuse (2.01 investigations per 1,000 children). Emotional maltreatment was identified as the primary form of maltreatment in another 11 percent of substantiated investigations (an estimated 4,464 investigations or 1.64 investigations per 1,000 children). In a small proportion of investigations (three percent), sexual abuse was identified

FIGURE 5: Primary Category of Substantiated Child Maltreatment in Ontario in 2023



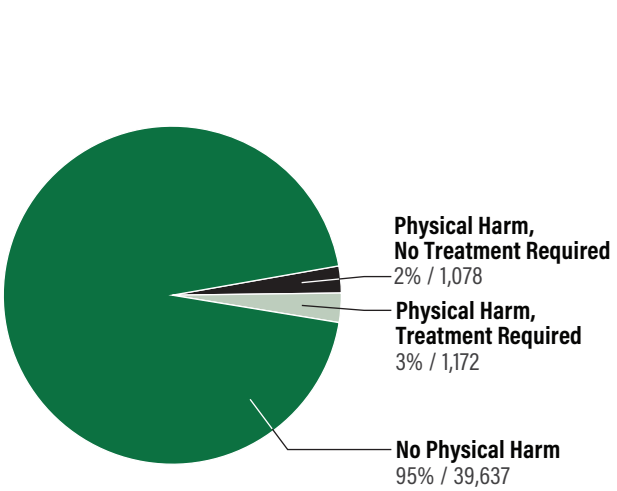
as the primary maltreatment form (an estimated 1,272 investigations or 0.47 investigations per 1,000 children).

Physical and Emotional Harm

The OIS-2023 tracked physical harm identified by the investigating worker. Information on physical harm was collected using two measures, one describing severity of harm as measured by medical treatment needed and one describing the nature of harm.

Physical harm was identified in five percent of substantiated maltreatment investigations (Figure 6). In two percent of substantiated investigations (an estimated 1,078 substantiated investigations, or 0.40 investigations per 1,000 children) physical harm was noted but no medical treatment was required. In a further three percent of substantiated investigations (an estimated 1,172 substantiated investigations, or 0.43 investigations per 1,000 children), harm was sufficiently severe to require treatment.

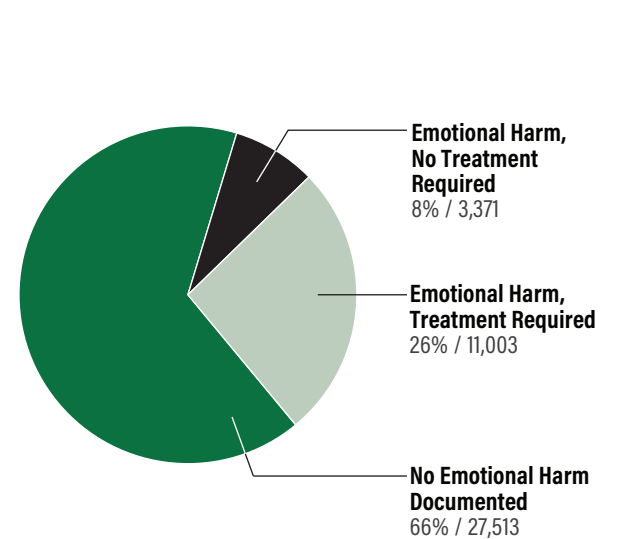
FIGURE 6: Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2023



Information on emotional harm was collected using a series of questions asking child welfare workers to describe emotional harm that had occurred because of the maltreatment incident(s). If the maltreatment was substantiated or suspected, workers were asked to indicate whether the child was showing signs of mental or emotional harm (e.g., nightmares, bed-wetting, or social withdrawal following the maltreatment incident[s]). To rate the severity of mental/emotional harm, workers indicated whether therapeutic treatment was required to manage the symptoms of mental or emotional harm.

Figure 7 presents documented emotional harm identified during the child maltreatment investigations. Emotional harm was noted in 34 percent of all substantiated maltreatment investigations (an estimated 14,374 substantiated investigations or 5.27 investigations per 1,000 children). In 26 percent of substantiated investigations (an estimated 11,003 investigations or 4.03 investigations per 1,000 children), emotional harm was severe enough to require therapeutic treatment.

FIGURE 7: Documented Emotional Harm in Substantiated Child Maltreatment Investigations in Ontario in 2023



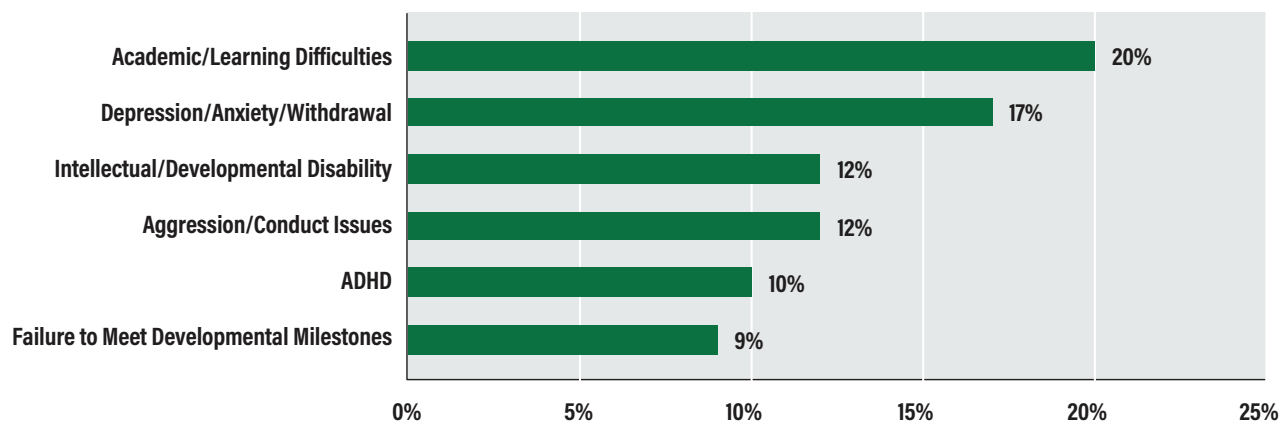
Child Functioning Concerns

Child functioning classifications that reflect physical, emotional, cognitive, and behavioural issues were documented on the basis of a checklist of 18 challenges that child welfare workers

were likely to be aware of as a result of their investigations. The checklist only documents problems that child welfare workers became aware of during their investigations and, therefore, undercounts the occurrence of child functioning problems. Investigating workers were asked to indicate problems that

had been confirmed by a diagnosis, directly observed by the investigating worker or another worker, and/or disclosed by the parent or child, as well as issues that they suspected were problems but could not fully verify at the time of the investigation. The six-month period before the investigation was used as a reference point where applicable.

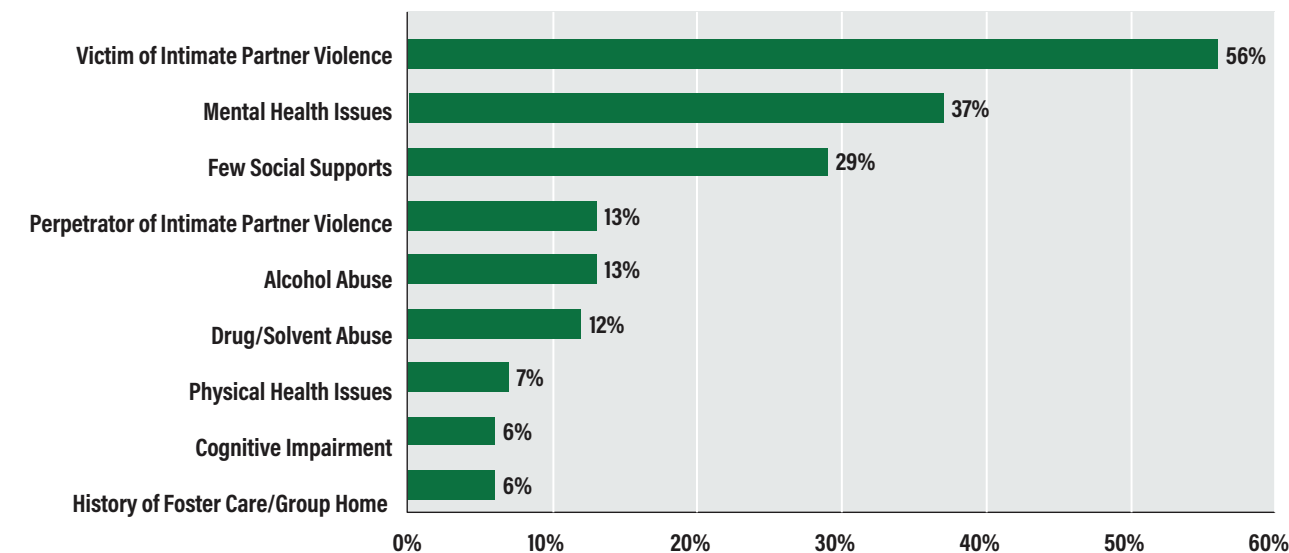
FIGURE 8: Major Child Functioning Concerns Documented in Substantiated Child Maltreatment Investigations in Ontario in 2023



In 42 percent of substantiated child maltreatment investigations (an estimated 17,689 child investigations or 6.49 investigations per 1,000 children), at least one child functioning issue was indicated by the investigating worker.

Academic or learning difficulties was the most frequently reported child functioning concern (20 percent of substantiated maltreatment investigations), and the second most common was depression/anxiety/withdrawal (17 percent of substantiated maltreatment investigations). In twelve percent of substantiated maltreatment investigations, the worker indicated that the child had an intellectual/developmental disability and in twelve percent of investigations, the worker indicated that the child had aggression/conduct issues. Ten percent of substantiated maltreatment investigations involved a child with noted ADHD. The worker noted failure to meet developmental milestones for the child in nine percent of substantiated maltreatment investigations. It is important to note that these ratings are based only on information available to the child welfare worker during the initial investigation (Figure 8).

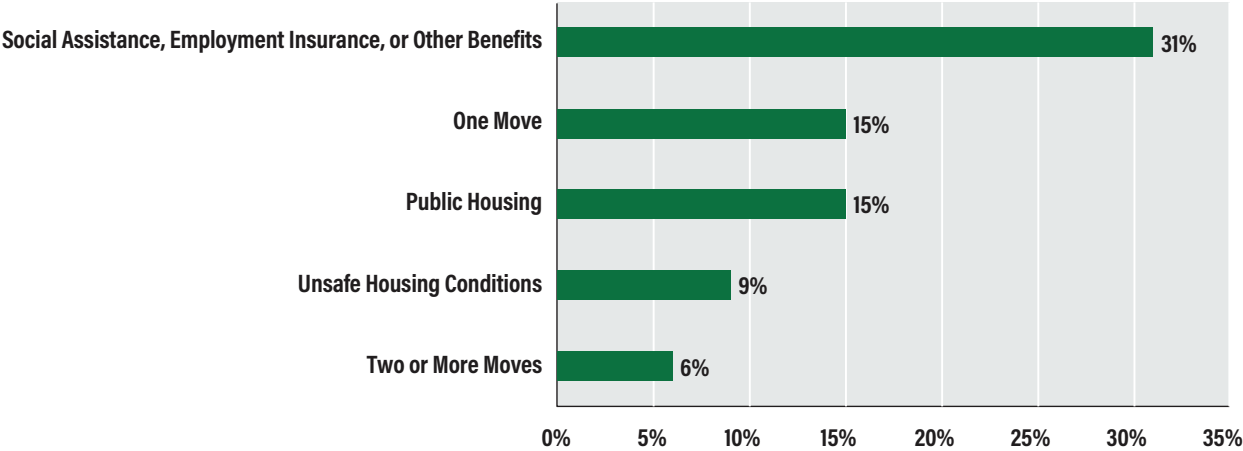
FIGURE 9: Primary Caregiver Risk Factors in Substantiated Child Maltreatment Investigations in Ontario in 2023



Primary Caregiver Risk Factors

For each investigated child, the investigating worker was asked to indicate who the primary caregiver was. Concerns related to caregiver risk factors were reported by investigating workers using a checklist of nine items that were asked about each caregiver. Where applicable, the reference point for identifying concerns about caregiver risk factors was the previous six months. At least one primary caregiver risk factor was identified in 81 percent of substantiated maltreatment investigations (an estimated 33,379 substantiated investigations). The most frequently noted concerns were victim of intimate partner violence (56 percent), mental health issues (37%), few social supports (29 percent), perpetrator of intimate partner violence (13 percent), and alcohol abuse (13 percent).

FIGURE 10: Household Risks in Substantiated Child Maltreatment Investigations in Ontario in 2023



Household Risk Factors

The OIS-2023 tracked a number of household risk factors including social assistance as the household income, two or more moves in the last 12 months, and unsafe living conditions. Thirty-one percent of investigations involved children whose families received social assistance/employment insurance/other benefits as their primary source of income (12,842 substantiated maltreatment investigations) and eight percent of families relied on part-time work, multiple jobs, or seasonal employment. Fifteen percent of substantiated maltreatment investigations involved families that had moved once in the previous year, and six percent involved families that had moved two or more times. Fifteen percent of substantiated maltreatment investigations involved families living in public housing. Unsafe housing conditions were noted in nine percent of substantiated maltreatment investigations.

Future Directions

The OIS-1993, 1998, 2003, 2008, 2013, 2018, and 2023 datasets provide a unique opportunity to examine changes in child investigations across Ontario over the last three decades.

For updates on the OIS and for more detailed publications visit the Canadian Child Welfare Research Portal at cwrp.ca.

CHAPTER 1: INTRODUCTION

The following report presents the major findings from the Ontario Incidence Study of Reported Child Abuse and Neglect-2023 (OIS-2023). The OIS-2023 is the seventh provincial study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by child protection services in Ontario. The estimates presented in this report are based on information collected from child protection workers on a representative sample of 6,799 child protection investigations conducted across Ontario during a three-month period in 2023. The OIS-2023 report also includes selected comparisons with estimates from the 1998, 2003, 2008, 2013 and 2018 cycles of the study, and select data from the OIS-1993 (Chapter 3).

This introduction presents the rationale and objective of the study, provides an overview of the child welfare system in Ontario, and outlines the organization of the report.

Background

At the time of OIS-2023 sampling, responsibility for protecting and supporting children at risk of abuse and neglect fell under the jurisdiction of the 51 child protection agencies in Ontario (see Table 1-1), including a system of Indigenous child welfare agencies which increasingly have responsibility for protecting and supporting Indigenous children and their families. Because of variations in the way service statistics are kept, it is difficult to obtain a province-wide profile of the children and families receiving child welfare services. The Ontario Incidence Study of Reported Child Abuse and Neglect (OIS) is designed to provide such a profile by collecting information on a periodic basis from child protection agencies across Ontario using a standardized set of definitions.

The OIS-2023 is funded by Ontario's Ministry of Children, Community and Social Services (MCCSS). All participating agencies contributed significant in-kind support, which

included the time required for child protection workers to complete instruments, and respond to additional information requests, in addition to coordinating support from team administrative staff, supervisors, managers, and data information specialists.

The first Ontario Incidence Study of Reported Child Abuse and Neglect was completed in 1993. It was the first study in Ontario to estimate the incidence of child abuse and neglect reported to and investigated by the child welfare system. The OIS-1993 was designed by Dr. Nico Trocmé and was partially based on the design of the United States' National Incidence Studies (NIS-1). A second cycle of the Ontario Incidence Study was conducted in 1998 as part of the first Canadian Incidence Study of Reported Child Abuse and Neglect (CIS). In 2003 and 2008, Ontario's Ministry of Children and Youth Services provided funding to supplement the Public Health Agency of Canada's funding for the Ontario sample of the CIS. This additional funding allowed an enhanced sample sufficient to develop provincial estimates of investigated child abuse and neglect in Ontario in 2003 and 2008. There was no national study conducted in 2013, and the OIS-2013 was solely funded by Ontario's Ministry of Children and Youth Services. The OIS-2018 was solely funded by the Ministry of Children, Community and Social Services. The data collected in the OIS-2018 was included with the national data collected as part of the First Nations/Canadian Incidence Study of Reported Child Abuse and Neglect 2019 (FN/CIS-2019). The FN/CIS-2019 was funded by the Public Health Agency of Canada through a Contribution Agreement with the Assembly of First Nations. Barbara Fallon (University of Toronto) is the principal investigator of the OIS-2008, OIS-2013, OIS-2018, and OIS-2023.

Please see Appendix A and Appendix B for a full list of all the researchers and advisors involved in the OIS-2023.

Findings from the previous six cycles of the OIS have provided much needed information to service providers, policy makers, and researchers seeking to better understand the children and families encountering the child welfare system. Findings from the studies have assisted in better adapting child welfare policies to address the array of difficulties faced by victims of maltreatment and their families.

Objectives and Scope

The primary objective of the OIS-2023 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2023. Specifically, the OIS-2023 is designed to:

1. determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence as well as multiple forms of maltreatment;
2. investigate the severity of maltreatment as measured by forms of maltreatment, duration, and physical and emotional harm;
3. examine selected determinants of health that may be associated with maltreatment;
4. monitor short-term investigation outcomes, including substantiation, out-of-home placement, and use of child welfare court; and
5. compare selected rates and characteristics of investigations across the 1993, 1998, 2003, 2008, 2013, 2018, and 2023 cycles of the OIS.

TABLE 1-1: Ontario Children's Aid Societies (CAS), and Indigenous Child and Family Well-Being Agencies (ICFWBA)

Akwesasne Child and Family Services	Children's Aid Society of the United Counties of Stormont-Dundas-Glengarry	Kenora-Rainy River Districts Child and Family Services
Anishinaabe Abinoojii Family Services	Children's Aid Society of Thunder Bay	Kina Gbezhgomi Child and Family Services
Bruce Grey Child and Family Services	Children's Aid Society of Toronto	Kunuwanimano Child and Family Services
Catholic Children's Aid Society of Hamilton	Dilico Anishinabek Family Care	Linck Child, Youth and Family Supports
Catholic Children's Aid Society Toronto	Dnaagdawenmag Binnoojiyag Child and Family Services	Native Child And Family Services of Toronto
Child and Family Services of Grand Erie	Dufferin Child and Family Services	Nijjaansinaanik Child and Family Services
Children & Family Services for York Region	Durham Children's Aid Society	Nogdawindamin Family and Community Services
Children's Aid Society of Algoma	Family & Children's Services of St Thomas and Elgin	North Eastern Ontario Family and Children's Services
Children's Aid Society of Hamilton	Family and Children's Services of Frontenac Lennox and Addington	Payukotayno James & Hudson Bay Family Services
Children's Aid Society of London and Middlesex	Family and Children's Services of Guelph and Wellington	Simcoe Muskoka Child, Youth and Family Services
Children's Aid Society of Ottawa	Family and Children's Services of Lanark Leeds and Grenville	Six Nations of the Grand River
Children's Aid Society of Oxford County	Family and Children's Services of Renfrew County	The Children's Aid Society of Haldimand and Norfolk
Children's Aid Society of the City of Sarnia and the County of Lambton	Family and Children's Services of the Waterloo Region	The Children's Aid Society of the Niagara Region
Children's Aid Society of the District of Nipissing and Parry Sound	Highland Shores Children's Aid Society	Tikinagan Child & Family Services
Children's Aid Society of the District of Sudbury-Manitoulin	Huron-Perth Children's Aid Society	Valoris for Children & Adults of Prescott-Russell
Children's Aid Society of the Region of Peel	Jewish Family & Child Service of Greater Toronto	Weechi-it-te-win Family Services
Children's Aid Society of the Regional Municipality of Halton	Kawartha-Haliburton Children's Aid Society	Windsor-Essex Children's Aid Society

The OIS collects information directly from a provincial sample of child welfare workers at the point when an initial investigation regarding a report of possible child abuse or neglect is completed. The scope of the study is, therefore, limited to the type of information available to workers at that point. As shown in the OIS Iceberg Model (Figure 1-1), the study only documents situations that are reported to and investigated by child welfare agencies. The study **does not** include information about unreported maltreatment-related allegations nor does it include cases that are **only investigated by the police**. Similarly, the OIS **does not include** reports that are made to child welfare authorities but are **screened out** before they are investigated. While the study reports on short-term outcomes of child welfare investigations, including substantiation status, initial placements in out-of-home care, and court applications, the study **does not track** longer-term **service events that occur beyond the initial investigation**.

Changes in investigation mandates and practices over the last 25 years have further complicated what types of cases fall within the scope of the OIS. Child welfare authorities receive reports about situations where the primary concern is that a child may be at risk of future maltreatment but where there are no specific concerns about a possible incident of maltreatment that may have already occurred. Because the OIS was designed to track investigations of alleged incidents of maltreatment, it is important to maintain a clear distinction between risk of future maltreatment and investigations of maltreatment that may have already occurred. Beginning in the 2008 cycle, the OIS was redesigned to separately track both types of cases; however, this has complicated comparisons with past cycles of the study. For this report, comparisons with previous cycles are limited to comparisons of rates of all investigations including risk-only cases. In contrast, **risk-only cases are not included in the OIS-2023 estimates of rates and characteristics of substantiated maltreatment**.

Child Welfare Services: A Changing Mosaic

The objectives and design of the OIS-2023 are best understood within the context of the decentralized structure of Canada's child welfare system and with respect to changes over time in mandates and intervention standards. Child welfare legislation and services are organized in Canada at the provincial and territorial levels. Child welfare is a mandatory service, directed by provincial and territorial child welfare statutes. Although all child welfare systems share certain basic characteristics organized around investigating reports of alleged maltreatment, providing various types of counselling and supervision, and looking after children in out-of-home care, there is considerable variation in the organization of these service delivery systems. Some provinces and territories operate under a centralized, government-run child welfare system; others have opted for decentralized models run by mandated agencies. Several provinces and territories have recently moved towards regionalized service delivery systems.

In Ontario, the Child, Youth and Family Services Act governs child welfare services and outlines principles for promoting the best interests of children. Alleged maltreatment is reported directly to a local Children's Aid Society or Child and Family Service Agency. Child welfare agencies are private, non-profit organizations funded by the provincial Ministry of Children, Community and Social Services. At the time of sampling for the OIS-2023, there were 51 agencies in Ontario that provided child protection services, and several of these agencies were providing services to specific communities based on religious affiliation or Indigenous heritage. The autonomous community-based delivery model supports the development of strong community links with innovative programs that reflect local needs.

Although provincial and territorial child welfare statutes apply to all Indigenous people, special considerations are made in many statutes with respect to services to Indigenous children and families. The responsibility for funding services to First Nations children and families living on reserve rests with the federal government under the Indian Act. Funding for on-reserve

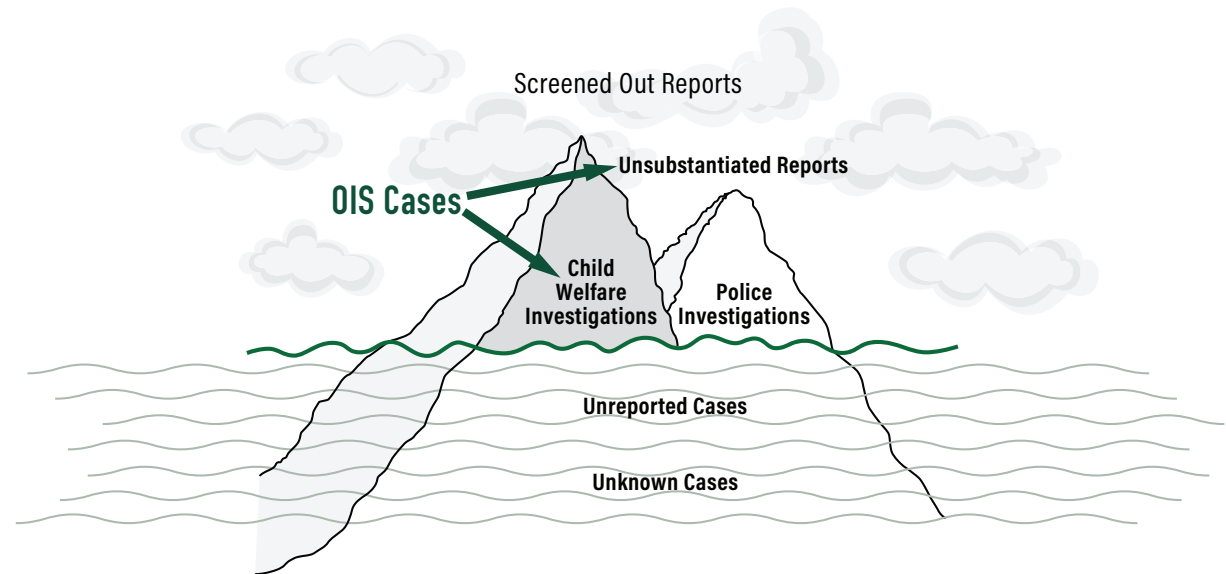
services is provided by the government at the provincial level, and provinces and territories are subsequently reimbursed by the federal government under the guidelines of the 1965 Indian Welfare Agreement. A growing number of services are being provided either by fully mandated Indigenous agencies or by Indigenous counselling and prevention services that work in conjunction with mandated services.

In addition to variations in mandates and standards between jurisdictions, it is important to consider that these mandates and standards have changed over time. Between 1998 and 2003, the OIS found that rates of investigated maltreatment had nearly doubled. Most of the available data point to the increase because of changes in detection, reporting, and investigation practices rather than an increase in the number of children being abused or neglected. Using the analogy of the iceberg (Figure 1-1), there is no indication that the iceberg has increased in size; rather, the detection line (depicted as the water line on

the iceberg model) has dropped, leading to a higher number of reports and substantiated cases. The OIS-2003 findings revealed four important changes: (1) an increase in reports made by professionals; (2) an increase in reports of emotional maltreatment and exposure to intimate partner violence; (3) a larger number of children investigated in each family; and (4) an increase in substantiation rates. These changes are consistent with changes in legislation and investigation standards in Ontario where statutes and regulations have been broadened to include more forms of maltreatment and more investigation standards, requiring that siblings of reported children be systematically investigated.

A file review of a sample of CIS-2003 cases conducted in preparation for the CIS-2008 and the OIS-2008 identified a growing number of risk assessments as a fifth factor that may also be driving the increase in cases. Several cases that were counted by investigating workers as maltreatment, appeared

FIGURE 1-1: Scope of OIS-2023



Adapted from Trocmé, N., McPhee, D. et al. (1994). Ontario incidence study of reported child abuse and neglect. Toronto, ON: Institute for the Prevention of Child Abuse. and, Sedlak, A. J., & Broadhurst, D. D. (1996). Executive summary of the third national incidence study of child abuse and neglect. Washington, DC: U.S. Department of Health and Human Services.

in fact to be risk of future maltreatment investigations where the investigating worker was not assessing a specific incident of alleged maltreatment, but was assessing instead the risk of future maltreatment. Workers completing the CIS-2003 form often chose maltreatment codes to represent concerns such as “parent-teen conflict” or “caregiver with a problem,” which were reflective of a family’s need to access preventative services or added support and not necessarily allegations of maltreatment. Rather than screening out these cases, they were being categorized as maltreatment investigations even though no maltreatment had been alleged or occurred, and the primary concern was the risk of future maltreatment that family circumstances posed. Unfortunately, because the CIS/OIS-1998 and CIS/OIS-2003 were not designed to track these cases, we cannot estimate the extent to which risk assessments may have contributed to the increase in cases between 1998 and 2003. The OIS-2008, OIS-2013, OIS-2018, and OIS-2023 are designed to separately track these risk-only cases.

Numerous developments over the past 25 years have led to an evolving focus for child welfare in Ontario. The Child and Family Services Act underwent revisions in the year 2000 which resulted in: increased funding to compensate for a lack of uniform and centralized child welfare services in Ontario, increased focus on responding to neglect and emotional maltreatment, a lower threshold for determining “risk of harm” to the child, and increased clarity in the requirements for the “duty to report” for professionals and the public. In 2003, the Ministry of Children and Youth Services was created in Ontario, followed by the introduction of the Child Welfare Secretariat and the Child Welfare Transformation Agenda in 2004/2005. These changes initiated a new focus for child welfare in Ontario, which included an emphasis on prevention, early detection, and intervention, as well as improved coordination among the three fields of child welfare, youth justice, and children’s mental health. In addition, the Ontario Risk Assessment Model was adopted in 1998, and the Differential Response Model was adopted in 2005. Following this, new standards were developed in 2007 that increased the emphasis on customized response and promoted a wider range of informal and formal supports for families in the system. Since the inception of these models, the number of families referred to Ontario child welfare agencies has doubled, and the nature of the cases referred

has changed considerably. In 2009, a Commission to Promote Sustainable Child Welfare was established to develop and implement changes to the Ontario child welfare system over a period of three years. Sustainable child welfare is defined as a system that can adapt to evolving challenges, effectively utilize resources to maximize positive outcomes for children and youth, and balance both short- and long-term demands. As a result of this Commission, several Children’s Aid Societies were amalgamated and there has been an increased focus on accountability and strong governance.

In June 2017, the Child, Youth and Family Services Act replaced the Child and Family Services Act. In January 2018, the age of protection in Ontario increased from 15 years of age to 17 years of age. In April 2018, the new act was formally proclaimed. The current act requires child welfare services to be provided to children, youth, and families with the following directions: child and youth-centered; build on a family’s strengths through prevention, early intervention, and community support to reduce the need for more disruptive services and interventions; respect diversity and inclusion, as set out in the *Ontario Human Rights Code* and the *Canadian Charter of Rights and Freedoms*; be informed by the need to address systemic racism and the barriers it creates; and help maintain connections between children, families, and their communities. **To make this report comparable with previous OIS reports, the data presented in Chapter 3 are based on a sample of child investigations involving children under 16. The data presented in Chapter 4 and 5 are based on the sample of child investigations involving children under 18.**

Using a standard set of definitions, the OIS-1993, 1998, 2003, 2008, 2013, 2018, and 2023 provide the best available estimates of the incidence and characteristics of reported child maltreatment in Ontario over a 30-year period.

Organization of the Report

The OIS-2023 report presents the profile of investigations conducted across Ontario in 2023 and a comparison of rates of investigations documented by the 1993, 1998, 2003, 2008, 2013, 2018 and 2023 cycles of the study.

The **OIS-2023 report** is divided into five chapters and five appendices. Chapter 2 describes the study’s methodology. Chapter 3 presents the difference in the incidence of investigations and the types of investigations conducted by child welfare agencies in Ontario in 1993, 1998, 2003, 2008, 2013, 2018, and 2023. Chapter 4 examines the characteristics of substantiated maltreatment investigations by type of maltreatment in Ontario in 2023, including duration of maltreatment, and the nature and severity of physical harm. Chapter 5 examines the child and family characteristics of substantiated maltreatment investigations in Ontario in 2023.

Readers should note that because of changes in the way child welfare investigations are conducted in Ontario and in the way the OIS tracks the results of these investigations, the findings presented in this report are **not directly comparable to findings presented in the OIS-2003, OIS-1998, and OIS-1993 reports**. It should be noted that previous reports do not separately track investigations of cases where future risk of maltreatment was the only concern. Moreover, the findings presented in Chapter 4 and 5 of this report include children under the age of 18.

The **Appendices** include:

- » Appendix A: OIS-2023 Site Researchers
- » Appendix B: OIS-2023 Advisory Committee
- » Appendix C: Glossary of Terms
- » Appendix D: OIS-2023 Maltreatment Assessment
- » Appendix E: OIS-2023 Guidebook
- » Appendix F: Description of the Estimation Procedures

CHAPTER 2: METHODOLOGY

The OIS-2023 is the seventh provincial study examining the incidence of reported child abuse and neglect in Ontario. The OIS-2023 captured information about children and their families as they encountered child welfare services over a three-month sampling period. Children who were not reported to child welfare services, screened-out reports, or new allegations on cases currently open at the time of case selection were not included in the OIS-2023.

A multi-stage sampling design was used, first to select a representative sample of 20 child welfare agencies across Ontario, and then to sample cases within these agencies. Information was collected directly from investigating workers at the conclusion of the investigation. The OIS-2023 sample of 6,799 child maltreatment-related investigations was used to derive estimates of the annual rates and characteristics of investigated maltreatment in Ontario. In Ontario, the age of protection was amended to include 16- and 17-year-olds in 2018. **To maintain comparability between cycles of the OIS, Chapter 3 provides descriptive data based on the 6,360 investigations of children 0-15 years of age. The rest of this report provides descriptive data based on the full sample of investigations involving children 0-17 years of age.**

As with any sample survey, estimates must be understood within the constraints of the survey instruments, the sampling design, and the estimation procedures used. This chapter presents the OIS-2023 methodology and discusses its strengths, limitations, and impact on interpreting the OIS-2023 estimates.

Sampling

The OIS-2023 sample was drawn in three stages: first, a representative sample of child welfare agencies from across Ontario was selected, then cases were sampled over a three-

month period within the selected agencies, and, finally, child investigations that met the study criteria were identified from the sampled cases. The sampling approach was developed in consultation with a statistical expert.

Agency selection

Child welfare agencies are the Primary Sampling Units (PSU) for the OIS-2023. The term “child welfare agency” describes any organization that has the authority to conduct child protection investigations. In Ontario, agencies serve the full population in a specific geographic area; however, in some instances several agencies may serve different populations in the same area based on religion or Indigenous heritage. There are specific agencies in Ontario which only provide services to Indigenous children and families (i.e., Indigenous Child and Family Well Being Agencies) and other agencies can be considered mainstream child welfare agencies. A final count of 51 agencies constituted the sampling frame for the 2023 study (see Figure 2-1). A representative sample of 20 child welfare agencies was selected for inclusion in the OIS-2023 using a stratified random sampling approach.

Child welfare agencies in Ontario were allocated among five strata from which the OIS-2023 participating agencies were sampled. Agencies were stratified by whether they provided mainstream child welfare services or services to Indigenous children and families. There were three strata for mainstream agencies and two for Indigenous Child and Family Well Being Agencies. Agencies were allocated to these strata by size (large, medium, or small for mainstream agencies and large or medium/small for Indigenous Child and Family Well Being Agencies). Sizes were determined by the total number of investigations provided by the Ministry of Children, Community and Social Services from the past fiscal year. All agencies allocated in the large strata for both Indigenous Child and

Family Well Being Agencies and mainstream agencies were selected. Within each medium and small strata, systematic sampling was used.

FIGURE 2-1: Three Stage Sampling

I: Site Selection

- » 20 child welfare agencies selected from provincial list of 51 child welfare agencies
- » Stratified random sampling

II: Case Sampling

- » 3,651 opened between October 1 and December 31
- » In Ontario cases are counted as families
- » Cases that are opened more than once during the study period are counted as one case

III: Identifying Investigated Children

- » 6,799 children investigated because maltreatment-related concerns were identified
- » Excludes children over 17, siblings who are not investigated, and children who are investigated for non-maltreatment concerns

Directors of the sampled agencies were sent letters of recruitment, which introduced the study and requested voluntary participation. All sampled agencies accepted the invitation to participate in the study.

Case Selection

The second sampling stage involved selecting cases opened in the participating agencies during the three-month period of October 1, 2023 to December 31, 2023. Three months was the optimum period to ensure high participation rates and good compliance with study procedures. Consultation with service providers indicated that case activity from October to December is considered typical of a whole year. However, follow-up studies are needed to systematically explore the extent to which seasonal variation in the types of cases referred to child welfare agencies may affect estimates that are based on a three-month sampling period.

In small and mid-sized agencies, all cases opened during the sampling period were included. In larger agencies that conducted over 1,000 investigations per year, a random sample of 250 cases opened during the sampling period was selected for inclusion in the study.¹ In Ontario, families are the **unit of service** at the point of the initial decision to open a case.

Several caveats must be noted with respect to case selection. To ensure that systematic and comparable procedures were used, the formal process of opening a case for investigation was used as the method for identifying cases. The following procedures were used to ensure consistency in selecting cases for the study:

- » situations that were reported but **screened out** before the case was opened were not included (Figure 1-1). There is too much variation in screening procedures to feasibly track these cases within the budget of the OIS;
- » reports on **already open cases** were not included; and
- » only the first report was included for cases that were **reported more than once** during the three-month sampling period

These procedures led to 3,651 family-based cases being selected in Ontario.

Identifying Investigated Children

The final sample selection stage involved identifying children who were investigated because of concerns related to possible maltreatment. Since cases in Ontario are opened at the level of a family, procedures were developed to determine which child(ren) in each family were investigated for maltreatment-related reasons.

In Ontario, children eligible for inclusion in the final study sample were identified by having investigating workers complete the *Intake Information* section of the online *OIS-2023 Maltreatment Assessment*. The *Intake Information* section allowed the investigating worker to identify any children who were investigated because of maltreatment-related concerns (i.e., investigation of alleged incidents of maltreatment or assessment of risk of future maltreatment). These procedures yielded a final sample of 6,799 child investigations in Ontario because of maltreatment-related concerns.

Investigating Maltreatment vs. Assessing Future Risk of Maltreatment

The primary objective of the OIS is to document investigations of situations where there are concerns that a child may have been abused or neglected. While investigating maltreatment is central to the mandate of child protection authorities, their mandates can also apply to situations where there is no specific concern about past maltreatment but where the risk of future maltreatment is being assessed. As an aid to evaluating future risk of maltreatment, a variety of risk assessment tools and methods have been adopted in Ontario, including the Ontario Risk Assessment Model, an Eligibility Spectrum, a Risk Assessment Tool, and more formalized differential response models.² Risk assessment tools are designed to promote structured, thorough assessments and informed decisions. Risk

assessment tools are intended to supplement clinical decision making and are designed to be used at multiple decision points during child welfare interventions.

Due to changes in investigation mandates and practices over the last twenty-five years, the OIS-2023 tracked risk assessments and maltreatment investigations separately. To better capture both types of cases, the OIS-2008 was redesigned to separately track maltreatment investigations versus cases opened only to assess the risk of future maltreatment. Before the OIS-2008, cases that were only being assessed for risk of future maltreatment were not specifically included.

For the OIS-2008, OIS-2013, OIS-2018, and OIS-2023 investigating workers were asked to complete a data collection instrument for both types of cases. For cases involving maltreatment investigations, workers described the specific forms of maltreatment that were investigated and whether the maltreatment was substantiated. In cases that were only opened to assess future risk of maltreatment, investigating workers were asked to indicate whether the risk was confirmed.

For this reason, Chapter 3 comparisons with previous cycles are limited to comparisons of rates of all maltreatment-related investigations, including risk-only investigations. In contrast, risk-only cases are not included in the Chapter 4 and 5 estimates of 2023 rates and characteristics of substantiated maltreatment.³

Forms of Maltreatment Included in the OIS-2023

The OIS-2023 definition of child maltreatment includes **33 forms of maltreatment** subsumed under **five categories** of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence.

1 In the OIS-2008, extensive analyses were conducted to improve the efficiency of the sampling design. The analyses revealed that sampling more than 250 investigations within a child welfare agency does not result in an improvement in the standard error. Obtaining a random sample of investigations also reduces worker burden in larger agencies.

2 Barber, J., Shlonsky, A., Black, T., Goodman, D., and Trocmé, N. (2008). Reliability and Predictive Validity of a Consensus-Based Risk Assessment Tool, *Journal of Public Child Welfare*, 2(2), 173-195.

3 One exception to this is Table 5-1, which includes risk of future maltreatment investigations.

A source of potential confusion in interpreting child maltreatment statistics lies in inconsistencies in the categories of maltreatment included in different statistics. Most child maltreatment statistics refer to both physical and sexual abuse, but other categories of maltreatment, such as neglect, exposure to intimate partner violence, and emotional maltreatment are not systematically included. There is even less consensus with respect to subtypes or forms of maltreatment. The OIS-2023 tracked up to three forms of maltreatment for each child investigation.

Investigated Maltreatment vs. Substantiated Maltreatment

The child welfare statute in Ontario, the Child, Youth and Family Services Act requires that professionals working with children and the public report all situations where they have concerns that a child may have been maltreated or where there is a risk of maltreatment. The investigation phase is designed to determine whether the child was in fact maltreated or not. Jurisdictions in Ontario use a two-tiered substantiation classification system that distinguishes between substantiated and unfounded cases or verified and not verified cases. The OIS uses a three-tiered classification system for investigated incidents of maltreatment, in which a “suspected” level provides an important clinical distinction in certain cases: those in which there is not enough evidence to substantiate maltreatment, but maltreatment cannot be ruled out.⁴

In reporting and interpreting maltreatment statistics, it is important to clearly distinguish between risk-only investigations, maltreatment investigations, and substantiated investigations of maltreatment. Estimates presented in Chapter 3 of this report include maltreatment investigations and risk-only investigations, and the estimates in Chapter 4 and 5 of this report focus on cases of substantiated maltreatment.⁵

Risk of Harm vs. Harm

Cases of maltreatment that draw public attention usually involve children who have been severely injured or, in the most tragic cases, have died because of maltreatment. In practice, child welfare agencies investigate and intervene in many situations in which children have not yet been harmed but are at risk of harm. For instance, a toddler who has been repeatedly left unsupervised in a potentially dangerous setting may be considered to have been neglected, even if the child has not been harmed. The OIS-2023 includes both types of situations in its definition of substantiated maltreatment. The study also gathers information about physical and emotional harm attributed to substantiated or suspected maltreatment (Chapter 4).

The OIS-2023 documents both physical and emotional harm; however, definitions of maltreatment used for the study do not require the occurrence of harm.

There can be confusion around the difference between risk of harm and risk of maltreatment. A child who has been placed at risk of harm has experienced an event that endangered their physical or emotional health. Placing a child at risk of harm is considered maltreatment. For example, neglect can be substantiated for an unsupervised toddler, regardless of whether harm occurs, because the parent is placing the child at substantial risk of harm. In contrast, risk of maltreatment refers to situations where a specific incident of maltreatment has not yet occurred, but circumstances, for instance parental substance abuse, indicate that there is a significant risk that maltreatment could occur in the future.

Instrument

The OIS-2023 survey instrument was designed to capture standardized information from child welfare workers conducting maltreatment investigations or investigations of risk of future maltreatment. Given the time constraints faced by child welfare workers, the instrument had to be kept as short and simple as possible.

The *OIS-2023 Maltreatment Assessment* (Appendix D) was an online instrument. The paper-and-pencil Maltreatment Assessment was updated to an online instrument as of the OIS-2018 cycle. The online data collection system was housed on a secure server at the University of Toronto with access given only to the OIS-2023 Site Researchers through the internet, through secure logins and connections. Site Researchers worked directly with the primary investigating worker to complete the *OIS-2023 Maltreatment Assessment* during a virtual Microsoft Teams meeting upon completion of each child welfare investigation. This data collection instrument consists of an *Intake Information* section, a *Household Information* section, and a *Child Information* section.

Intake Information Section

Information about the report or referral was collected on the *Intake Information* section. This section requested information on: the date of referral; referral source; number of caregivers and children in the home; age and sex of caregivers and children; the reason for referral; which approach to the investigation was used; the relationship between each caregiver and child; the type of investigation (a risk investigation or an investigated incident of maltreatment); and whether there were other caregivers outside the home.

4 For more information on the distinction between these three levels of substantiation, please see: Trocmé, N., Knoke, D., Fallon, B., & MacLaurin, B. (2009). Differentiating between substantiated, suspected, and unsubstantiated maltreatment in Canada. *Child Maltreatment*, 14(1), 4–16.

5 One exception to this is Table 5-1, which includes risk of future maltreatment investigations.

Household Information Section

The household was defined as all the adults living at the address of the investigation. The *Household Information* section collected detailed information on up to two caregivers living in the home at the time of referral. Descriptive information was requested about the contact with the caregiver, caregiver functioning, household risk factors, transfers to ongoing services, and referral(s) to other services.

Child Information Section

The third section of the instrument, the *Child Information* section, was completed for each child who was investigated for maltreatment or for risk of future maltreatment. The *Child Information* section documented up to three different forms of maltreatment and included levels of substantiation, alleged perpetrator(s), and duration of maltreatment. In addition, it collected information on child functioning, physical harm, emotional harm to the child attributable to the alleged maltreatment, previous victimization, spanking, child welfare court activity, and out-of-home placement. Workers who conducted investigations of risk of future maltreatment did not answer questions pertaining to substantiation, perpetrators, and duration, but did complete items about child functioning, placement, court involvement, previous victimization, and spanking. In both types of investigations, workers were asked whether they were concerned about future maltreatment.

Guidebook

All items on the *OIS-2023 Maltreatment Assessment* were defined in an accompanying *OIS-2023 Guidebook* (Appendix E).

Revising and Validating the OIS-2023 Maltreatment Assessment

The OIS-2023 data collection instrument was based on the OIS-2018, OIS-2013, OIS/CIS-2008, OIS/CIS-2003, OIS/CIS-1998, and OIS-1993 data collection instruments to maximize the

potential for comparing OIS findings across cycles of the study. A key challenge in updating instruments across cycles of a study is to find the right balance between maintaining comparability while making improvements based on the findings from previous cycles. In addition, changes in child welfare practices may require that updates be made to data collection instruments to ensure that the instruments are relevant to current child welfare practices.

Validation Focus Groups

In the summer of 2023, a focus group was conducted in Ontario to gather feedback on proposed revisions to the OIS-2018 data collection instrument. The focus group was held with five intake workers.

Changes to the OIS-2023 version of the instrument were made in close consultation with the *OIS-2023 Advisory Committee*, which is composed of Children's Aid Society administrators; a representative from the Ontario Ministry of Children, Community and Social Services; a representative from the Ontario Association of Children's Aid Societies; a representative from the Association of Native Child and Family Services Agencies of Ontario (ANCFSAO); representatives from One Vision One Voice (OVVOV); and scholars (Appendix B).

Changes to the data collection instrument included: adding questions about Identity-Based Data (i.e., gender and sexual orientation), band engagement, Anti-Black Racism (ABR) consultations, communities that Black and Latin American caregivers identify with, and refugee status; removing certain questions (e.g., a question about what other adults live in the home); and, re-wording some questions (e.g., the economic hardship questions were changed from "ran out of money" to "struggle to pay for").

Please see Appendix D for the final version of the data collection instrument.

Data Collection and Verification Procedures

Each participating agency was offered a presentation led by an OIS-2023 Site Researcher to familiarize child welfare workers to the OIS-2023 methodology and data collection procedures. Several agencies chose to receive this introductory session. Site Researchers coordinated data collection activities at each participating agency. They worked directly with the primary investigating worker to complete the data collection instruments during a virtual Microsoft Teams meeting. Workers were notified by email at the end of each sampling month if they had an investigation selected for the study and were provided with a link to schedule a meeting with a Site Researcher through Microsoft Bookings. Site Researchers underwent training on the study instruments and procedures. The completion of the data collection instrument was timed to align with the point when investigating workers finalize their written report of the investigation; typically due within 45 days of initiating the investigation.

Data Verification and Data Entry

Completed data collection instruments were verified by two Site Researchers and the Principal Investigator for inconsistent responses. Consistency in instrument completion was examined by comparing the data collection instrument to the brief case narratives provided by the investigating worker. No identifying information was included on the study forms as workers were instructed to only provide a pseudonym initial to represent the child's first name. The data were extracted from the online platform and entered into SPSS Version 29. Inconsistent responses and miscodes were systematically identified and cleaned. Duplicate cases were screened and deleted based on agency identification numbers and date of opening.

Participation and Item Completion Rates

The *OIS-2023 Maltreatment Assessment* was as short and simple as possible to minimize the response burden and ensure a high completion rate. Item completion rates were over 99 percent for all items. The participation rate was determined by comparing actual cases opened during the case-selection period with the number of cases for which data collection instruments were completed. The overall participation rate was approximately 92 percent.

Estimation Procedures

Design

The study design was implemented for the purpose of point estimation and the estimation of variance. The population of agencies was stratified by size. Agencies were selected from each stratum using systematic sampling to take agency size into consideration. The three months (corresponding to October, November and December) were assumed to be a random sample of the 12 months comprising the calendar year for each agency selected. In each selected month, cases at large agencies were selected using simple random sampling.

Weighting

The data collected for the OIS-2023 were weighted to derive provincial, annual incidence estimates. Design weights were applied to each case selected in sampled agencies during the three-month case selection period. To increase the precision and accuracy of estimates for the overall agency volume for 2023, calibration weights, based on known numbers of investigations, were applied. Provincial incidence estimates were calculated by dividing the weighted estimates by the child population in Ontario by age (less than one to 17 years). Child population numbers are based on 2021 Census data (see Table 5-1a). Please see Appendix F for a detailed description of the weighting and estimation.

Case Duplication

Although cases reported more than once during the three-month case sampling period were unduplicated, the weights used to develop the OIS annual estimates include an unknown number of “duplicate” cases, i.e., children or families reported and opened for investigation two or more times during the year. Although each investigation represents a new incident of maltreatment, confusion arises if these investigations are taken to represent an unduplicated count of children. To avoid such confusion, the OIS-2023 uses the term “child investigations” rather than “investigated children,” since the unit of analysis is the investigation of the child’s alleged maltreatment.

Sampling Error Estimation

Although the OIS-2023 estimates are based on a relatively large sample of 6,799 child maltreatment-related investigations, sampling error is primarily driven by the variability between the 20 sampled participating agencies and the non-sampled agencies. Sampling error estimates were calculated to reflect the fact that the survey population had been randomly selected from across the province. Standard error estimates were calculated for select variables at the $p < 0.05$ level. Most coefficients of variation were in the acceptable and reliable level, with the exception of low frequency events. Estimates that should be interpreted with caution include informal kinship care (18.10). There were estimates that had CV’s over 33 that should be interpreted with extreme caution (e.g., placement in group home/residential secure treatment estimates). See Appendix F.

The error estimates do not account for any errors in determining the design and calibration weights, nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from agency to agency. The error estimates also cannot account for any variations due to seasonal effects. The accuracy of these annual estimates depends on the extent to which the sampling period is representative of the whole year.

Ethics Procedures

The OIS-2023 data collection and data handling protocols and procedures were reviewed and approved by the University of Toronto Office Research Ethics Board.

The study utilized a case file review methodology. No directly identifying information was collected on the data collection instrument. The *Intake Information* section included the file/case number the agency assigns. This information was used only for verification purposes. Workers were instructed to only provide a pseudonym initial to represent the child’s first name. The OIS-2023 used a secure, web-based delivery system for data collection.

This report contains only provincial estimates of child abuse and neglect and **does not identify any participating agency**.

Indigenous Ethics

The OIS-2023 adhered to the principles of Ownership of, Control over, Access to, and Possession of research (OCAP principles), which must be negotiated within the context of individual research projects. In the case of the OIS-2023, adherence to OCAP principles is a shared concern that shapes the collaborative relationship between the *OIS-2023 Advisory Committee* and the research team. Representatives from ANCFSAO were invited to be members of the *OIS-2023 Advisory Committee*, which guided the research design and implementation. A separate report about First Nations children in Ontario will be produced at the direction of ANCFSAO.

Ethno-racial Data Analyses

Any future analyses of ethno-racial data will be governed/informed in consultation with applicable ethno-cultural communities and will reflect their perspectives and input.

Study Limitations

Although every effort was made to make the OIS-2023 estimates precise and reliable, several limitations inherent to the nature of the data collected must be taken into consideration:

- » because of changes in the way risk-only cases are identified in the OIS-2008, OIS-2013, OIS-2018, and OIS-2023 comparisons between study cycles must be done with caution. While tables in the OIS-2023, OIS-2018, OIS-2013, and OIS-2008 may be compared, tables in the OIS-2023 report **cannot be directly compared** to tables in the OIS-2003, OIS-1998, and OIS-1993 reports. Chapter 3 presents select comparisons across study cycles, please interpret this chapter with caution;
- » the weights used to derive annual estimates include counts of children investigated more than once during the year; therefore, the unit of analysis for the weighted estimates is a **child investigation**;
- » the OIS tracks **information during approximately the first 45 days** of case activity; service outcomes such as out-of-home placements and applications to court only include events that occurred during those first approximately 45 days; Table 3-6a, Table 3-6b, and Table 3-7 were affected by this limitation;
- » the provincial counts presented in this report are **weighted estimates**. In some instances, sample sizes are too small to derive publishable estimates. For example, Table 4-4 presents the nature of physical harm; the number of substantiated investigations involving burns and scalds or head trauma could not be reported due to the small sample sizes;
- » the OIS **only tracks reports investigated by child welfare** agencies and does not include reports that were screened out, cases that were only investigated by the police, and cases that were never reported. For instance, Table 4-1 presents the estimated number of substantiated incidents of exposure to intimate partner violence that were

investigated and does not include incidents of intimate partner violence that were reported only to police or never reported; and

- » the study is based on the assessments provided by the investigating child welfare workers and **could not be independently verified**. For example, Table 5-2 presents the child functioning concerns documented in cases of substantiated maltreatment. The investigating workers determined if the child demonstrated functioning concerns, for instance depression or anxiety. However, these child functioning concerns are not verified by an independent source.

CHAPTER 3: RATES OF MALTREATMENT-RELATED INVESTIGATIONS IN THE OIS-1998, OIS-2003, OIS-2008, OIS-2013, OIS-2018, AND OIS-2023 (AND SELECT COMPARISONS TO THE OIS-1993)

This chapter primarily compares rates of maltreatment-related investigations documented by the 1998, 2003, 2008, 2013, 2018, and 2023 cycles of the OIS. Changes in rates of maltreatment-related investigations can be attributed to several factors including (1) changes in public and professional awareness of the problem, (2) changes in legislation or in case-management practices, (3) changes in the OIS study procedures and definitions, and (4) changes in the actual rate of maltreatment-related investigations. As noted in the Introductory and Methods chapters of this report, changes in practices with respect to investigations of risk of maltreatment pose a particular challenge since these cases were not clearly identified in the 1993, 1998, and 2003 cycles of the study. Readers are reminded that because of these changes, the findings presented in this report are not directly comparable to findings presented in the OIS-1993, OIS-1998, and OIS-2003 reports. This chapter presents select comparisons with investigations from the OIS-1993, and these comparisons are presented in Figure 3-1, 3-3, 3-4 and 3-5 (rate of investigations, transfers to ongoing services, child welfare placements, and use of child welfare court). Given the growing complexity of the OIS, more detailed analyses will be developed in subsequent reports and articles.

The estimates presented in this chapter are weighted estimates derived from child investigations conducted in 1993, 1998, 2003, 2008, 2013, 2018, and 2023 in selected Ontario child welfare agencies. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates (see the Methods chapter of this report, as well as the Methods chapters of the 1993, 1998, 2003, 2008, 2013, and 2018 reports).

Estimates presented from the OIS-1993, OIS-1998, OIS-2003, OIS-2008, OIS-2013, OIS-2018, and OIS-2023 do not include (1) incidents that were not reported to child welfare agencies, (2) reported cases that were screened out by child welfare agencies before being fully investigated, (3) new reports on cases already open by child welfare agencies, and (4) cases that were investigated only by the police.

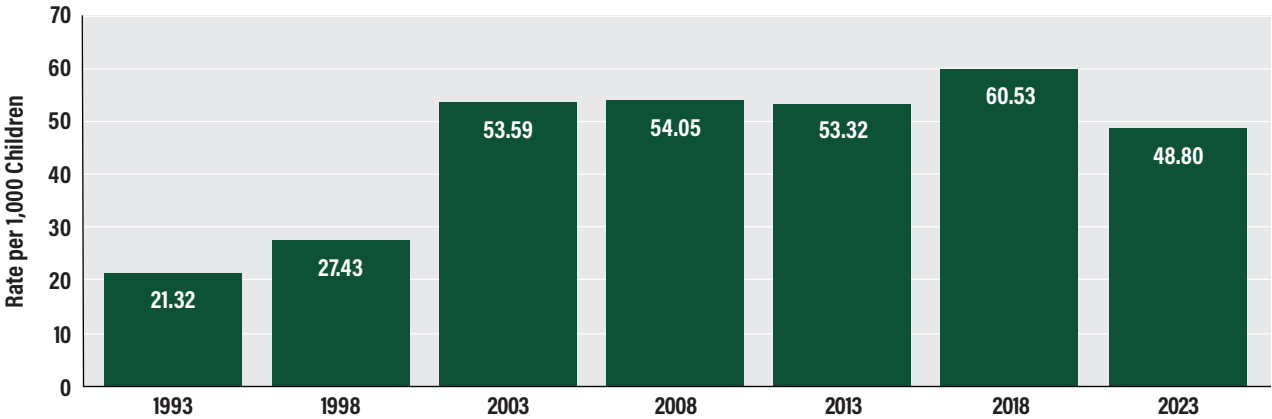
Data in this chapter are presented in terms of the estimated annual number of investigations, as well as the incidence of investigations per 1,000 children aged less than one to 15. These statistics refer to child investigations and not to the number of

investigated families. Investigations include all maltreatment-related investigations, including cases that were investigated because of risk of future maltreatment.

Comparisons Between the OIS-1993, 1998, 2003, 2008, 2013, 2018, and 2023

Chapter 3 presents some select comparisons between the seven provincial cycles of the OIS. Comparisons focus on changes in rates and key characteristics of investigations.

FIGURE 3-1: Comparisons Between the OIS-1993, 1998, 2003, 2008, 2013, 2018, and 2023



Statistical tests of significance were used to test the differences between the 2018 and 2023 estimates. Where a change in rate between 2018 and 2023 is statistically significant for a variable of interest, the level of significance is indicated by an asterisk(s) and in the table note.

Number and Rate of Investigations

Table 3-1a presents the number and incidence of investigations in 1993, 1998, 2003, 2008, 2013, 2018, and 2023. An estimated 46,860 maltreatment investigations were conducted in Ontario in 1993, a rate of 21.32 investigations per 1,000 children. In 1998, an estimated 64,658 maltreatment investigations were conducted in Ontario, a rate of 27.43 investigations per 1,000 children. In 2003, the number of maltreatment investigations doubled, with an estimated 128,108 investigations and a rate of 53.59 per 1,000 children. The number of child

maltreatment-related investigations were consistent between 2008, 2013, 2018. In 2008, an estimated 128,748 maltreatment-related investigations were conducted across Ontario, representing a rate of 54.05 investigations per 1,000 children. In 2013, the rate of investigation remained consistent. An estimated 125,281 investigations were conducted in 2013, a rate of 53.32 investigations per 1,000 children. In 2018, an estimated 142,953 investigations were conducted, representing a rate of 60.53 investigations per 1,000 children. An estimated 117,527 investigations were conducted in 2023, a rate of 48.80 investigations per 1,000 children, which was a statistically significant decrease from the rate in 2018.

TABLE 3-1A: Number and Rate of Child Maltreatment Investigations in Ontario in 1998 and 2003 and Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

Child Welfare Investigations													
1993		1998		2003		2008		2013		2018		2023	
#	Rate per 1,000 Children	#	Rate per 1,000 Children	#	Rate per 1,000 Children	#	Rate per 1,000 Children	#	Rate per 1,000 Children	#	Rate per 1,000 Children	#	Rate per 1,000 Children
46,860	21.32	64,658	27.43	128,108	53.59	128,748	54.05	125,281	53.32	142,953	60.53	117,527	48.80***

Based on a sample of 2,447 investigations in 1993, 3,050 investigations in 1998, 7,172 investigations in 2003, 7,471 investigations in 2008, 5,265 investigations in 2013, and 7,115 investigations in 2018, and 6,360 in 2023.

*** Difference between 2018 and 2023 incidence rate is statistically significant (p<.001)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

TABLE 3-1B: Type of Response in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

Type of Response	2008			2013			2018			2023		
	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Customized Response	96,347	40.45	75%	101,919	43.38	82%	120,731	51.12	84%	104,407	43.35***	89%
Traditional Response	32,321	13.57	25%	23,128	9.84	18%	22,223	9.41	16%	13,121	5.45***	11%
Total Investigations	128,668	54.02	100	125,047	53.22	100%	142,953	60.53	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 7,471 investigations in 2008, 5,265 investigations in 2013, 7,115 investigations in 2018, and 6,360 investigations in 2023.

Rate and percentage columns may not add to totals due to rounding.

*** Difference between 2018 and 2023 incidence rate is statistically significant (p<.001)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

Type of Response for Investigations

Table 3-1b describes the type of response for the investigations. The type of investigation (customized or traditional response) has only been collected since the 2008 cycle. Overall, there was a statistically significant decrease in the incidence of reported child maltreatment-related investigations between 2018 and 2023. However, in 2023 as a proportion, there were more customized investigations (89 percent in 2023 compared to 84 percent in 2018).

Child Age in Investigations

Table 3-2 describes the number and incidence of investigations by age group in 1998, 2003, 2008, 2013, 2018, and 2023.

In 2023, an estimated 28 percent of investigations involved children aged four to seven years old (33,247 investigations or 55.78 investigations per 1,000 children aged four to seven).

Twenty-seven percent of investigations in 2023 involved children aged eight to eleven years old (31,897 investigations or 50.76 per 1,000 children aged eight to eleven). A small proportion (five percent) of investigations in 2023 involved infants under one; the overall incidence of infant child maltreatment-related investigations was 45.90 investigations per 1,000 children under one in Ontario. In 2023, 43.75 investigations per 1,000 children aged one to three were conducted in Ontario. Just under one quarter of investigations in Ontario in 2023 involved children aged 12 to 15 years old (28,549 investigations or 44.23 investigations per 1,000 children aged 12 to 15).

Readers should note that comparisons between age groups should always be made on the basis of incidence rates that take into consideration variations in age rates in the general population, rather than on the basis of the count of investigations. There were statistically significant decreases in the rates of maltreatment-related investigations for all age groups between 2018 and 2023.

Types of Investigations and Substantiation Decisions

Figure 3-2 describes types of investigations and substantiation decisions resulting from maltreatment-related investigations conducted across Ontario in 2023.

The OIS-2023 tracks two types of investigations: those conducted because of a concern about a maltreatment incident that may have occurred and those conducted to assess whether there is a significant risk of future maltreatment where there is no alleged or suspected maltreatment.

The outcomes of maltreatment investigations are classified in terms of three levels of substantiation:

Substantiated: the balance of evidence indicates that abuse or neglect has occurred;

TABLE 3-2: Age of Children in Child Maltreatment Investigations in Ontario in 1998 and 2003 and Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

Child Age Group	1998			2003			2008			2013			2018			2023		
	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
<1 Year	6,154	43.31	10%	8,237	65.71	6%	9,286	70.25	7%	7,915	58.44	6%	8,207	60.92	6%	5,827	45.90***	5%
1–3 Years	8,412	19.17	13%	19,638	48.63	15%	22,199	55.08	17%	21,801	51.25	17%	22,035	52.80	15%	18,007	43.75***	15%
4–7 Years	17,023	28.01	26%	32,847	54.84	26%	31,222	55.93	24%	36,730	64.29	29%	39,892	67.20	28%	33,247	55.78***	28%
8–11 Years	16,736	28.27	26%	36,124	56.52	28%	32,939	53.07	26%	29,907	51.48	24%	39,689	65.16	28%	31,897	50.76***	27%
12–15 Years	16,333	28.33	25%	31,262	50.15	24%	33,102	49.56	26%	28,928	45.45	23%	33,130	54.57	23%	28,549	44.23***	24%
Total Investigations	64,658	27.43	100%	128,108	53.59	100%	128,748	54.05	100%	125,281	53.32	100%	142,953	60.53	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 3,050 investigations in 1998, 7,172 investigations in 2003, 7,471 investigations in 2008, 5,265 investigations in 2013, 7,115 investigations in 2018, 6,360 in 2023.
Rate and percentage columns may not add to totals due to rounding.
*** Difference between 2018 and 2023 incidence rate is statistically significant (p<.001)
Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

- » **Suspected:** insufficient evidence to substantiate abuse or neglect, but maltreatment cannot be ruled out;
- » **Unfounded:** the balance of evidence indicates that abuse or neglect has not occurred (unfounded does not mean that a referral was inappropriate or malicious; it simply indicates that the investigating worker determined that the child had not been maltreated).

The outcomes of risk-only investigations are classified in terms of three categories:

- » Significant risk of future maltreatment
- » No significant risk of future maltreatment
- » Unknown risk of future maltreatment

Of the 117,527 investigations conducted in Ontario in 2023, 77 percent were maltreatment investigations which focused on a concern of abuse or neglect (an estimated 90,460 child maltreatment investigations or 37.56 investigations per 1,000 children) and 23 percent of investigations were concerns about risk of future maltreatment (an estimated 27,067 investigations or 11.24 investigations per 1,000 children).

Thirty-three percent of all investigations were substantiated, an estimated 39,236 child investigations. In a further two percent of investigations (an estimated 2,404 child investigations or 1.00 investigations per 1,000 children) there was insufficient evidence to substantiate maltreatment; however, maltreatment remained suspected by the investigating worker at the conclusion of the investigation. Forty-two percent of investigations (an estimated 48,820 child investigations or 20.27 investigations per 1,000 children) were unfounded.

In four percent of all investigations, the investigating worker concluded there was a significant risk of future maltreatment (1.82 investigations per 1,000 children, an estimated 4,382 child investigations). In 18 percent of investigations, no significant risk of future maltreatment was indicated (an estimated 21,740 investigations or 9.03 investigations per 1,000 children). In one percent of investigations, workers did not know whether the child was at significant risk of future maltreatment (an estimated 945 investigations or 0.39 per 1,000 children).

OIS-1998, 2003, 2008, 2013, and 2018

As shown in Table 3-3, rates of substantiated maltreatment more than doubled from 1998 to 2003. Relative to this dramatic expansion, the rate of substantiated maltreatment appeared

to decrease from 24.44 per 1,000 children in 2003 to 16.19 per 1,000 children in 2008. This comparison, however, is complicated since the 1998 and 2003 cycles of the OIS did not specifically track risk-only investigations. As a result, it is not possible to determine the extent to which confirmed future risk of maltreatment investigations were classified as “substantiated maltreatment.” As noted in Chapter 2, a case file validation study using a sub-sample of OIS-2003 investigations found that several cases had been coded in this manner. In 2008, investigations with confirmed risk of future maltreatment (8,237 cases at a rate of 3.46 confirmed cases of risk per 1,000 children) combined with substantiated investigations (16.19 per 1,000 children) yield a rate of 19.65 investigations per 1,000 children where either maltreatment was substantiated, or future risk was confirmed. Similarly, the rate of cases with substantiated maltreatment or confirmed risk in Ontario was 20.50 per 1,000 children in 2013, 18.79 per 1,000 children in 2018, and 18.11 per 1,000 children in 2023.

Referral Source

Table 3-4a describes the sources of referral in 1998, 2003, 2008, 2013, 2018, and 2023. Each independent contact with the child welfare agency regarding a child (or children) was counted as a separate referral. The person who contacted the child welfare agency was identified as the referral source. For example, if a child disclosed an incident of abuse to a teacher at school, who made a report to child welfare services, the school was counted as a referral source. If both the teacher and the child’s parent called the child welfare agency, both would be counted as referral sources.

The OIS-2023 Maltreatment Assessment included 18 pre-coded referral source categories and an open “other” category. Table 3-4a combines these into three main categories; any non-professional referral, any professional referral, and other or anonymous referral sources.

FIGURE 3-2: Type of Investigation and Level of Substantiation in Ontario in 2023

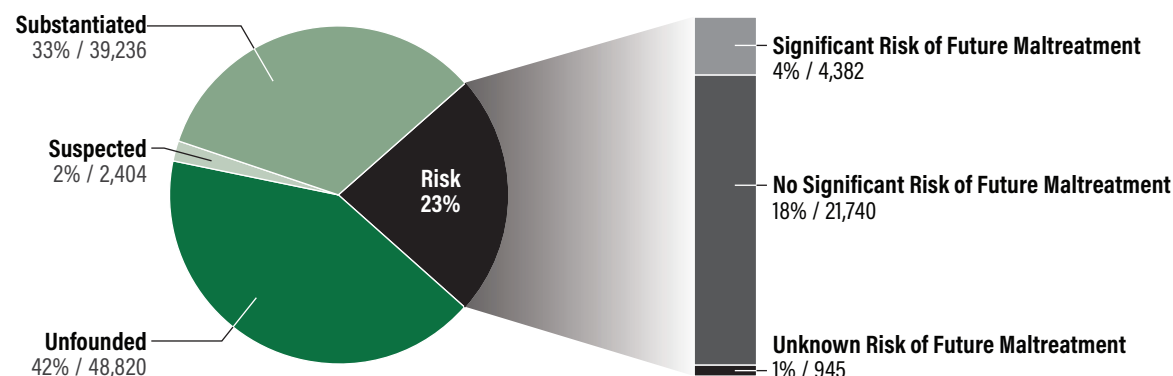


TABLE 3-3: Substantiated Maltreatment and Confirmed Risk of Maltreatment in Ontario in 1998, 2003, 2008, 2013, 2018, and 2023

	1998			2003				2008			2013			2018			2023		
Child Maltreatment Investigations	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	Maltreatment and Risk-Only Investigations	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Substantiated Maltreatment	23,145	9.82	36%	58,425	24.44	44%	Substantiated Maltreatment	38,571	16.19	30%	43,067	18.33	34%	36,066	15.27	24%	39,236	16.29	33%
							Risk of Future Maltreatment	8,237	3.46	6%	5,089	2.17	4%	8,309	3.52	6%	4,382	1.82***	4%
Total Substantiated Maltreatment	23,145	9.82	36%	58,425	24.44	44%	Total Substantiated Maltreatment and Risk of Future Maltreatment	46,808	19.65	36%	48,156	20.50	38%	44,375	18.79	30%	43,618	18.11	37%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 1,055 substantiated child maltreatment investigations in 1998, 3,193 substantiated child maltreatment investigations in 2003, 2,789 substantiated child maltreatment and substantiated future risk of maltreatment investigations in 2008, 2,073 substantiated child maltreatment and substantiated future risk of maltreatment investigations in 2013, 2,235 substantiated child maltreatment and substantiated future risk of maltreatment investigations in 2018, and 2,421 substantiated child maltreatment and substantiated future risk of maltreatment investigations in 2023.

Rate and percentage columns may not add to totals due to rounding.

*** Difference between 2018 and 2023 incidence rate is statistically significant ($p < .001$)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

Non-Professional Referral Sources:

Parent: This includes parents involved as a caregiver to the reported child, as well as non-custodial parents.

Child: A self-referral by any child listed on the Intake Information Section of the OIS-2023 Maltreatment Assessment.

Relative: Any relative of the child in question. Workers were asked to code "other" for situations in which a child was living with a foster parent and a relative of the foster parent reported maltreatment.

Neighbour/Friend: This category includes any neighbour or friend of the children or their family.

Professional Referral Sources:

Community, Health, or Social Services: This includes referrals from social assistance workers; crisis service/shelter workers; community recreation centre staff; community health physicians, nurses, or mental health professionals; or any community agency staff.

Hospital (Any Personnel): This includes referrals that originate from a hospital that are made by a doctor, nurse, or social worker rather than a family physician or nurse working in a family doctor's office in the community.

School: Any school personnel (teacher, principal, teacher's aide, school social worker, etc.).

Other Child Welfare Service: Includes referrals from mandated child welfare service providers from other jurisdictions or provinces.

Day Care Centre: Refers to a childcare or day care provider.

Police: Any member of a Police Force, including municipal, provincial/ territorial, or RCMP.

Anonymous: A caller who is not identified.

Other Referral Sources: Any referral source that does not fall into one of the pre-existing categories (e.g., legal or dental service provider).

TABLE 3-4A: Referral Source in Child Maltreatment Investigations in Ontario in 1998 and 2003 and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

	1998			2003			2008			2013			2018			2023		
Referral Source	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Any Non-Professional	18,493	7.85	29%	26,610	11.13	21%	29,722	12.49	23%	25,465	10.84	20%	31,911	13.51	22%	23,219	9.64***	20%
Any Professional	39,563	16.78	61%	90,685	37.93	71%	91,517	38.42	71%	93,467	39.78	75%	105,005	44.46	73%	90,113	37.42***	77%
Other/Anonymous	7,944	3.37	12%	13,377	5.60	10%	10,936	4.59	8%	9,104	3.87	7%	11,354	4.81	8%	6,482	2.69***	6%
Total Investigations	64,658	27.43	100%	128,108	53.59	100%	128,748	54.05	100%	125,281	53.32	100%	142,953	60.53	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 3,050 investigations in 1998, 7,172 investigations in 2003, 7,471 investigations in 2008, 5,265 investigations in 2013, 7,115 investigations in 2018, and 6,360 in 2023.

Columns do not add up to 100% because an investigation could have had more than one referral source.

*** Difference between 2018 and 2023 incidence rate is statistically significant (p<.001)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

TABLE 3-4B: Specific Referral Sources in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018 and 2023

	2018			2023		
Referral Source	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Non Professional						
Custodial or Non Custodial Parent	18,431	7.80	13%	11,878	4.93***	10%
Child (Subject of Referral)	1,509	0.64	1%	473	0.20***	0%
Relative	5,329	2.26	4%	4,630	1.92	4%
Neighbour/Friend	7,370	3.12	5%	6,189	2.57	5%
Professional						
Community, Health, or Social Services	13,440	5.69	9%	10,677	4.43*	9%
Hospital (Any Personnel)	7,982	3.38	6%	5,892	2.45*	5%
School	45,693	19.35	32%	35,609	14.79***	30%
Other Child Welfare Service	3,247	1.37	2%	3,451	1.43	3%
Day Care Centre	1,528	0.65	1%	1,637	0.68	1%
Police	36,184	15.32	25%	32,495	13.49	28%
Anonymous/Other						
Other	4,867	2.06	3%	628	0.26***	1%
Anonymous	6,550	2.77	5%	5,883	2.44***	5%
Total Investigations	142,953	60.53	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 5,265 investigations in 2013, 7,115 investigations in 2018, and 6,360 investigations in 2023.

Columns do not add up to 100% because an investigations could have had more than one referral source.

* Difference between 2018 and 2023 incidence rate is statistically significant (p<.05)

** Difference between 2018 and 2023 incidence rate is statistically significant (p<.01)

*** Difference between 2018 and 2023 incidence rate is statistically significant (p<.001)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

In 2023, 20 percent of investigations, or an estimated 23,219 investigations were referred by non-professional sources (rate of 9.64 investigations per 1,000 children), and 77 percent of investigations were referred by professionals (an estimated 90,113 investigations or 3742 investigations per 1,000 children). In six percent of investigations (2.69 investigations per 1,000 children) the referral source was either anonymous or categorized as an "other" source of referral.

The distribution of referral sources between professionals and non-professionals has remained relatively stable since 2003.

Table 3-4b presents specific non-professional and professional referral sources, as well as the anonymous and "other" categories, for all investigations conducted in 2023. Some specific referral sources have been collapsed into categories: custodial parents and non-custodial parents (*Custodial or Non-Custodial Parent*) and social assistance worker, crisis service/ shelter, community recreation centre, community health nurse, community physician, community mental health professional, and community agency (*Community, Health, or Social Services*). In 2023, the largest number of referrals came from schools; 30 percent of investigations or an estimated 35,609 investigations (rate of 14.79 investigations per 1,000 children). The second largest source of referral was police (an estimated 32,495 investigations or 28 percent of investigations). Custodial

or non-custodial parent was the largest non-professional referral source (10 percent of investigations or a rate of 4.93 investigations per 1,000 children). This is a similar pattern as in 2018, in which the largest number of professional referrals came from schools and police, and the largest number of investigations from non-professionals was from parents.

Rates of Ongoing Services, Placement, and Court

Three key service events can occur because of a child welfare investigation: a decision is made to close a case or to provide ongoing services, a child may be brought into out-of-home care, and an application can be made for a child welfare court order. While the OIS tracks any of these decisions made during the initial investigation, the study does not track events that occur after the initial investigation has closed or been transferred to ongoing services. Additional admissions to out-of-home care, for example, are likely to occur for cases kept open after the initial investigation. It should also be noted that investigation intervention statistics presented apply only to child welfare investigations initiated because of alleged maltreatment or risk of future maltreatment.

Ongoing Child Welfare Services

Investigating workers were asked whether the investigated case would remain open for further child welfare services after the initial investigation (see Table 3-5).

An estimated 20,235 investigations remained open for ongoing services in Ontario in 2023, a rate of 8.40 investigations per 1,000 children or 17 percent of all investigations. In an estimated 97,292 investigations, the case was closed following the initial investigation (a rate of 40.40 investigations per 1,000 children or 83 percent of all investigations). In 2018, 20 percent of cases were transferred for ongoing services and 80 percent were closed at initial investigation. The proportion of cases opened and closed at the conclusion of an investigation was identical in 2013 and 2008: 25 percent transferred for ongoing services; 75 percent closed at initial investigation. There was a statistically significant decline in the incidence of maltreatment-related investigations that were opened for ongoing child welfare services between 2018 and 2023, and the incidence of investigations transferred to ongoing services in 2023 (a rate of 8.40 investigations per 1,000 children) is comparable to the incidence in 1998 (a rate of 7.85 investigations per 1,000 children).

TABLE 3-5: Provision of Ongoing Services Following an Investigation in Child Maltreatment Investigations in Ontario in 1998 and 2003 and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

Provision of Ongoing Services	1998			2003			2008			2013			2018			2023		
	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Case to Stay Open for Ongoing Services	18,498	7.85	30%	30,994	12.96	24%	31,693	13.29	25%	30,836	13.12	25%	28,042	11.87	20%	20,235	8.40***	17%
Case to be Closed	43,489	18.45	70%	97,012	40.58	76%	97,030	40.73	75%	92,327	39.29	75%	114,911	48.65	80%	97,292	40.40	83%
Total Investigations	61,987	26.30	100%	128,006	53.54	100%	128,723	54.04	100%	123,163	52.42	100%	142,953	60.52	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,946 investigations in 1998, 7,168 investigations in 2003, 7,470 investigations in 2008, 5,193 investigations in 2013, 7,115 investigations in 2018, and 6,360 investigations in 2023.
Rate and percentage columns may not add to totals due to rounding.
*** Difference between 2018 and 2023 incidence rate is statistically significant (p<.001)
Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

Out-of-Home Placement

The OIS tracks placements in out-of-home care that occur at any time during the investigation. Investigating workers are asked to specify the type of placement. In cases where there may have been more than one placement, workers are asked

to indicate the setting where the child had spent the most time. The following placement classifications were used:

No Placement Required: No placement is required following the investigation.

Placement Considered: An out-of-home placement is still being considered, but the child remained at home at this point of the investigation.

Kinship out of care: An informal placement has been arranged within the family support network; the child welfare authority does not have temporary custody.

Customary care: A model of Indigenous child welfare service that is culturally relevant and incorporates the unique traditions and customs of each First Nation.

Kinship in care: A formal placement has been arranged within the family support network; the child welfare authority has temporary or full custody and is paying for the placement.

Foster care (non-kinship): Includes any family-based care, including foster homes, specialized treatment foster homes, and assessment homes.

Group home: Out-of-home placement required in a structured group living setting.

Residential/secure treatment: Placement required in a therapeutic residential treatment centre to address the needs of the child.

FIGURE 3-3: Rate of Transfers to Ongoing Services in Child Maltreatment-Related Investigations in 1993, 1998, 2003, 2008, 2013, 2018, and 2023 in Ontario

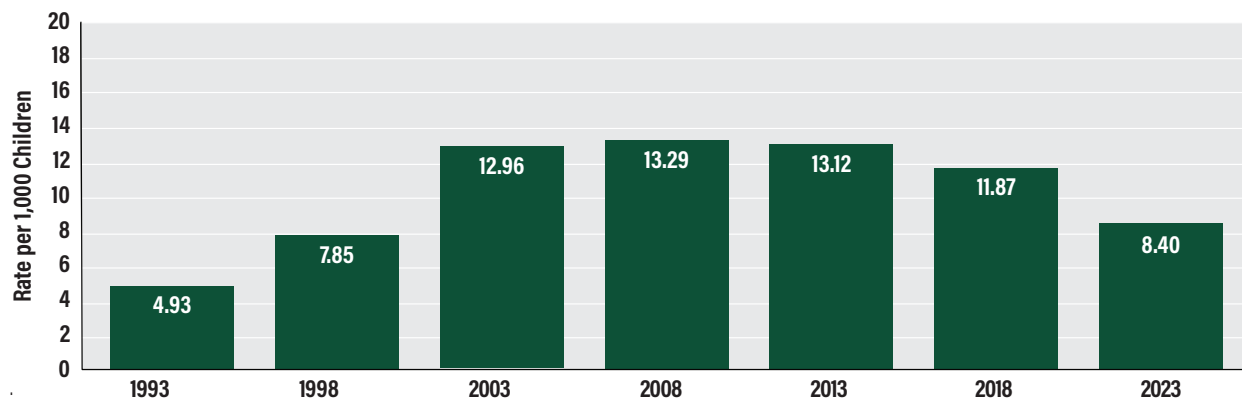


TABLE 3-6A: Placement in Child Maltreatment Investigations in Ontario in 1998 and 2003 and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

Placement Status	1998			2003			2008			2013			2018			2023		
	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Child Remained at Home	58,611	24.86	91%	121,109	50.66	95%	121,436	50.98	94%	121,020	51.51	97%	138,902	58.81	97%	113,705	47.21	97%
Child with Relative (Not a Formal Child Welfare Placement)	2,779	1.18	4%	2,748	1.15	2%	3,616	1.52	3%	1,874	0.80	1%	2,398	1.02	2%	2,381	0.99	2%
Foster Care (Includes Foster and Kinship Care)	2,416	1.02	4%	3,023	1.26	2%	3,004	1.26	2%	2,105	0.90	2%	1,479	0.63	1%	1,336	0.55	1%
Group Home/Residential Secure Treatment	824	0.35	1%	1,074	0.45	1%	692	0.29	1%	282	0.12	0%	174	0.07	0%	105	0.04	0%
Total Investigations	64,630	27.42	100%	127,955	53.52	100%	128,748	54.05	100%	125,281	53.32	100%	142,953	60.53	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 3,047 investigations in 1998, 7,164 investigations in 2003, 7,471 investigations in 2008, 5,265 investigations in 2013, 7,115 investigations in 2018, and 6,360 investigations in 2023.

Rate and percentage columns may not add to totals due to rounding.

*** Difference between 2018 and 2023 incidence rate is statistically significant ($p < .001$)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

FIGURE 3-4: Rate of Formal Placement in Child Maltreatment–Related Investigations in 1993, 1998, 2003, 2008, 2013, 2018, and 2023 in Ontario

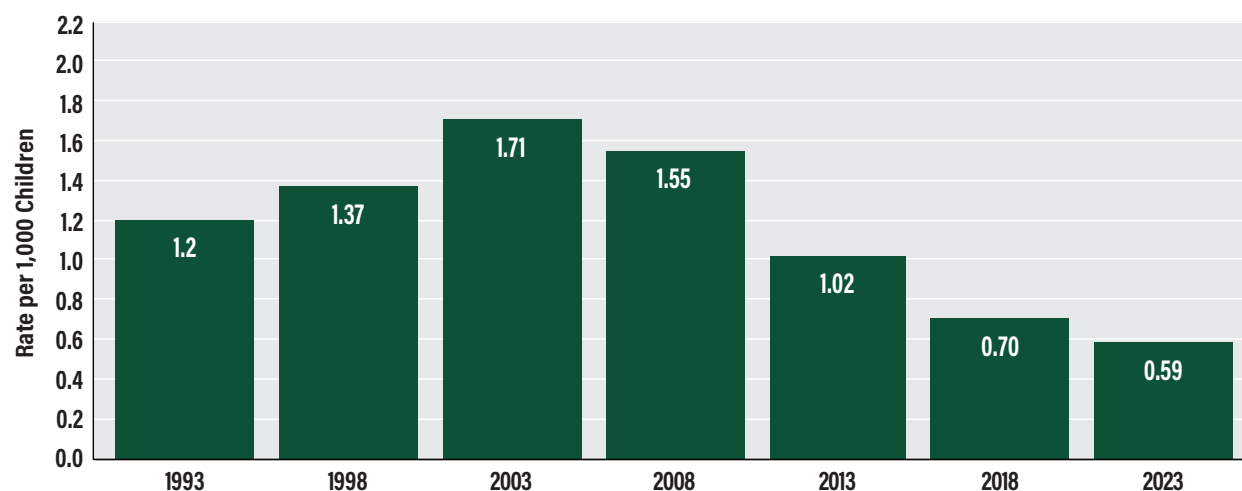


TABLE 3-6B: Placement in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Placement Status	2023		
	#	Rate per 1,000 Children	%
No Placement Required	113,104	46.96	96%
Placement Considered	601	0.25	1%
Kinship Out of Care	2,219	0.92	2%
Customary Care	—	—	0%
Kinship in Care	341	0.14	0%
Foster Care	996	0.41	1%
Group Home	—	—	0%
Residential/Secure Treatment	—	—	0%
Other	109	0.05	0%
Total Investigations	117,527	48.80	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 6,360 investigations in 2023. Columns may not add up to total because low frequency estimates are not reported but are included in total.
"—" Indicates that estimate was <100 investigations.

For the purposes of Table 3-6a, these placement categories were combined into four broader categories: child remained at home (no placement required and placement considered), informal kinship care (kinship out of care and customary care), foster care (kinship in care and non-family foster care), and group home/residential (group home and residential/secure treatment).

In 2023, the child remained at home in 97 percent of all investigations (an estimated 113,705 investigations or 47.21 investigations per 1,000 children). Three percent of investigations resulted in a change of residence for the child: two percent to informal kinship care (an estimated 2,381 investigations or 0.99 investigations per 1,000 children); one percent to foster care (an estimated 1,336 investigations or 0.55 investigations per 1,000 children); and less than one percent to residential/secure treatment or group homes (an estimated 105 investigations or 0.04 investigations per 1,000 children).

Placement rates (measured during the investigation) have remained relatively consistent across the past six cycles of the OIS, other than a statistically significant decrease in informal placements from 2008 to 2013.

Table 3-6b presents specific placements for all investigations conducted in 2023. The two most common placement types were kinship out of care (an estimated 2,219 investigations or 0.92 investigations per 1,000 children) and foster care (an estimated 996 investigations or 0.41 investigations per 1,000 children).

Residential/secure treatment placements were uncommon, as were customary care placements and group home placements. Placement was still being considered at the conclusion of the initial investigation in an estimated 601 investigations (rate of 0.25 investigations per 1,000 children or one percent of investigations).

Child Welfare Court Applications

Table 3-7 describes any applications made to child welfare court during the investigation period. Applications to child welfare court can be made for a number of reasons, including orders of supervision with the child remaining in the home, as well as out-of-home placement orders ranging from temporary to permanent. Although applications to court can be made during the investigation period, where possible, non-court ordered services should be offered before an application is made to court. Because the OIS can only track applications made during the investigation period, the OIS court application rate does not account for applications made at later points of service.

Investigating workers were asked about three possible statuses for court involvement during the initial investigation:

No Application: Court involvement was not considered.

Application Considered: The child welfare worker was considering whether to submit an application to child welfare court.

Application Made: An application to child welfare court was submitted.

TABLE 3-7: Applications to Child Welfare Court in Child Maltreatment Investigations in Ontario in 1998 and 2003 and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, 2018, and 2023

	1998			2003			2008			2013			2018			2023		
Previous Investigations	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
No Application to Court	61,700	26.17	96%	124,061	51.89	97%	125,197	52.56	97%	122,062	51.95	97%	140,602	59.53	98%	115,716	48.05	98%
Application Made	2,839	1.20	4%	3,780	1.58	3%	3,551	1.49	3%	3,220	1.37	3%	2,351	1.00	2%	1,811	0.75	2%
Total Investigations	64,539	27.38	100%	127,841	53.48	100%	128,748	54.05	100%	125,282	53.32	100%	142,953	60.53	100%	117,527	48.80***	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 3,045 investigations in 1998, 7,160 investigations in 2003, 7,471 investigations in 2008, 5,265 investigations in 2013, 7,115 investigations in 2018, and 6,360 investigations in 2023.

Rate and percentage columns may not add to totals due to rounding.

*** Difference between 2018 and 2023 incidence rate is statistically significant ($p < .001$)

Please note: The precision of the estimates for 2018 has been improved using different methodology based on calibration weights

Table 3-7 collapses “no court” and “court considered” into a single category (No Application to Court).

In the OIS-2023, two percent of all child investigations (an estimated 1,811 investigations or a rate of 0.75 investigations per 1,000 children) resulted in an application to child welfare court, either during or at the completion of the initial maltreatment investigation. This is less than the rate in the OIS-2018 (1.00 court applications per 1,000 children) and OIS-2013 (1.37 court applications per 1,000 children).

CHAPTER 4: CHARACTERISTICS OF MALTREATMENT

The OIS-2023 definition of child maltreatment includes 33 forms of maltreatment subsumed under five categories: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence (see Question 30: Maltreatment Codes in the OIS-2023 Guidebook in Appendix E).

Each investigation of maltreatment had a minimum of one and a maximum of three identified forms of maltreatment. In cases involving more than three forms of maltreatment, investigating workers were asked to select the three forms that best described the reason for investigation. More than one form of maltreatment was identified for 15 percent of substantiated child maltreatment investigations (see Table 4-2). The primary form of maltreatment was the form that best characterized the investigated maltreatment. In cases where there was more than one form of maltreatment, and one form of maltreatment was substantiated and one was not, the substantiated form was automatically selected as the primary form.

This chapter describes the characteristics of maltreatment in terms of nature and severity of harm and the duration of the maltreatment.

The estimates presented in this chapter are derived from child maltreatment investigations from a representative sample of child welfare agencies in 2023. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates do not include (1) incidents that were not reported to child welfare agencies, (2) reported cases that were screened out by child welfare agencies before being fully investigated, (3) new reports on cases already open by child welfare services, (4) cases that were investigated only by the police, and (5) cases that were only investigated because of concerns about future risk (see Chapter 2: Methods for a full description of the inclusion and exclusion criteria). Readers

are cautioned that the findings presented in this chapter are not directly comparable to findings presented in the OIS-2003, OIS-1998, and OIS-1993 reports (see Chapter 1).

Primary Categories of Maltreatment

Table 4-1 presents the estimates and incidence rates for the five primary categories of substantiated maltreatment in Ontario in 2023. The maltreatment typology in the OIS-2023 uses five major types of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence. Physical abuse was comprised of six forms: shake, push, grab or throw; hit with hand; punch kick or bite; hit with object; choking, poisoning, stabbing; and other physical abuse. Sexual abuse contained nine forms: penetration; attempted penetration; oral sex; fondling; sex talk or images; voyeurism; exhibitionism; exploitation; and other sexual abuse. Neglect was comprised of eight forms: failure to supervise, physical harm; failure to supervise, sexual abuse; permitting criminal behaviour; physical neglect; medical neglect (includes dental); failure to provide psychiatric or psychological treatment; abandonment; and educational neglect. Emotional maltreatment included seven forms: terrorizing or threat of violence; verbal abuse or belittling; isolation/confinement; inadequate nurturing or affection; exploiting or corrupting behaviour; alienating the other parent; and exposure to non-partner violence. Exposure to intimate partner violence was comprised of three forms: direct witness to physical violence; indirect exposure to physical violence; and exposure to emotional violence. See Question 30: Maltreatment Codes in the OIS-2023 Guidebook in Appendix E for specific definitions of each maltreatment form.

TABLE 4-1: Primary Category of Substantiated Maltreatment in Ontario in 2023

Primary Category of Maltreatment	#	Rate per 1,000 Children	%
Physical Abuse	5,473	2.01	13%
Sexual Abuse	1,272	0.47	3%
Neglect	10,756	3.94	26%
Emotional Maltreatment	4,464	1.64	11%
Exposure to Intimate Partner Violence	19,922	7.30	48%
Total Substantiated Investigations	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,321 substantiated investigations in 2023.
Rate and percentage columns may not add to totals due to rounding.

There were an estimated 41,887 substantiated child maltreatment investigations in Ontario in 2023 (15.36 investigations per 1,000 children). Exposure to intimate partner violence represents the largest proportion of substantiated maltreatment investigations. Nearly half (48 percent) of all substantiated investigations identified exposure to intimate partner violence as the primary form of maltreatment (an estimated 19,922 investigations or 7.30 investigations per 1,000 children). In 26 percent of substantiated investigations, neglect was identified as the overriding concern, an estimated 10,756 investigations (3.94 investigations per 1,000 children). In 13 percent of substantiated investigations, or an estimated 5,473 investigations, the primary form of maltreatment identified was physical abuse (2.01 investigations per 1,000 children). Emotional maltreatment was identified as the primary form of maltreatment in another 11 percent of substantiated investigations (an estimated 4,464 investigations

or 1.64 investigations per 1,000 children). In a small proportion of investigations (three percent), sexual abuse was identified as the primary maltreatment form (an estimated 1,272 investigations or 0.47 investigations per 1,000 children).

Single and Multiple Categories of Maltreatment

The OIS tracks up to three forms of maltreatment; while Table 4-1 describes the primary form of substantiated maltreatment, Table 4-2 describes cases of substantiated maltreatment involving multiple categories of maltreatment. In most cases (85 percent) only one form of substantiated maltreatment was documented; in the remaining 15 percent of substantiated investigations, multiple forms of substantiated maltreatment were documented.

Single Categories of Maltreatment: An estimated 35,620 substantiated investigations involved only one category of substantiated maltreatment (13.06 investigations per 1,000 children). Physical abuse was identified as the single category of maltreatment in 10 percent of investigations; two percent of investigations involved only sexual abuse; 22 percent involved neglect only; 8 percent involved only emotional maltreatment; and 42 percent involved allegations of exposure to intimate partner violence only.

Multiple Categories of Maltreatment: An estimated 6,267 investigations involved more than one category of substantiated maltreatment (2.30 investigations per 1,000 children). The most frequently identified combinations were neglect and exposure to intimate partner violence (an estimated 1,850 investigations or 0.68 investigations per 1,000 children), emotional maltreatment and exposure to intimate partner violence (an estimated 1,101 investigations or 0.40 investigations per 1,000 children), physical abuse and exposure to intimate partner violence (an estimated 953 investigations or 0.35 investigations per 1,000 children), and physical abuse and emotional maltreatment (an estimated 560 investigations or 0.21 investigations per 1,000 children).

TABLE 4-2: Single and Multiple Categories of Substantiated Child Maltreatment in Ontario in 2023

	#	Rate per 1,000 Children	%
Single Form of Substantiated Maltreatment			
Physical Abuse Only	4,036	1.48	10%
Sexual Abuse Only	967	0.35	2%
Neglect Only	9,416	3.45	23%
Emotional Maltreatment Only	3,533	1.30	8%
Exposure to Intimate Partner Violence Only	17,668	6.48	42%
Subtotal: Only One Form of Substantiated Maltreatment	35,620	13.06	85%
Multiple Categories of Substantiated Maltreatment			
Physical Abuse and Sexual Abuse	100	0.04	0%
Physical Abuse and Neglect	393	0.14	1%
Physical Abuse and Emotional Maltreatment	560	0.21	1%
Physical Abuse and Exposure to Intimate Partner Violence	953	0.35	2%
Sexual Abuse and Neglect	189	0.07	1%
Sexual Abuse and Emotional Maltreatment	—	—	0%
Sexual Abuse and Exposure to Intimate Partner Violence	—	—	0%
Neglect and Emotional Maltreatment	471	0.17	1%
Neglect and Exposure to Intimate Partner Violence	1,850	0.68	4%
Emotional Maltreatment and Exposure to Intimate Partner Violence	1,101	0.40	3%
Physical Abuse, Sexual Abuse, and Neglect	—	—	0%
Physical Abuse, Sexual Abuse, and Emotional Maltreatment	—	—	0%
Physical Abuse, Sexual Abuse, and Exposure to Intimate Partner Violence	0	0.00	0%
Physical Abuse, Neglect, and Emotional Maltreatment	—	—	0%
Physical Abuse, Neglect, and Exposure to Intimate Partner Violence	156	0.06	0%
Physical Abuse, Emotional Maltreatment, and Exposure to Intimate Partner Violence	163	0.06	0%
Sexual Abuse, Neglect, and Emotional Maltreatment	0	0.00	0%
Sexual Abuse, Neglect, and Exposure to Intimate Partner Violence	0	0.00	0%
Neglect, Emotional Maltreatment, and Exposure to Intimate Partner Violence	134	0.05	0%
Exposure to Intimate Partner Violence, Emotional Maltreatment and Sexual Abuse	—	—	0%
Exposure to Intimate Partner Violence, Sexual Abuse and Neglect	—	—	0%
Subtotal: Multiple Categories of Substantiated Maltreatment	6,267	2.30	15%
Total Substantiated Maltreatment	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 2,321 substantiated investigations in 2023.

Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.

“—” Indicates that estimate was <100 investigations.

Physical Harm

The OIS-2023 tracked physical harm identified by the investigating worker. Information on physical harm was collected using two measures: one describing severity of harm as measured by medical treatment needed and one describing the nature of harm.

Physical harm was identified in five percent of cases of substantiated maltreatment (Table 4-3). In two percent of substantiated investigations (an estimated 1,078 substantiated investigations, or 0.40 investigations per 1,000 children) physical harm was noted but no medical treatment was required. In a further three percent of substantiated investigations (an estimated 1,172 substantiated investigations, or 0.43 investigations per 1,000 children), harm was sufficiently severe to require treatment.

Physical Abuse: Physical harm was indicated in 22 percent of investigations where physical abuse was the primary substantiated maltreatment, an estimated 1,215 child investigations. In most investigations where physical harm was noted (938 substantiated physical abuse investigations), the harm was not severe enough to require treatment. In only a small proportion of investigations (277 substantiated physical abuse investigations), medical treatment was required. The fact that no physical harm was noted in 78 percent of physical abuse cases may seem surprising to some readers. It is important to understand that physical abuse may include caregiver behaviours that seriously endanger children, as well as those that do not involve documented injuries.

Sexual Abuse: Estimates of physical harm in substantiated sexual abuse investigations were too low to reliably report. Overall, physical harm was identified in four percent of investigations where sexual abuse was the primary substantiated concern.

Neglect: Physical harm was indicated in eight percent of investigations where neglect was the primary substantiated maltreatment. In almost all of substantiated neglect cases that involved physical harm, the investigating worker noted injuries severe enough to require medical treatment (estimated 797 substantiated neglect cases).

Emotional Maltreatment: Estimates of physical harm in substantiated emotional maltreatment investigations were too low to reliably report. Overall, physical harm was identified in one percent of investigations where emotional maltreatment was the primary substantiated concern.

Exposure to Intimate Partner Violence: Physical harm was identified in one percent of cases where exposure to intimate partner violence was the primary form of substantiated maltreatment (an estimated 124 substantiated exposure to intimate partner violence investigations).

TABLE 4-3: Physical Harm by Primary Category of Substantiated Child Maltreatment in Ontario in 2023

Physical Harm	Primary Category of Substantiated Maltreatment																	
	Physical Abuse			Sexual Abuse			Neglect			Emotional Maltreatment			Exposure to Intimate Partner Violence			Total		
	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Physical Harm, No Medical Treatment Required	938	0.40	17%	—	—	1%	—	—	0%	0	0.00	0%	—	—	0%	1,078	0.40	2%
Physical Harm, Medical Treatment Required	277	0.12	5%	—	—	3%	797	0.34	7%	—	—	1%	—	—	0%	1,172	0.43	3%
Sub-total: Any Physical Harm Documented	1,215	0.51	22%	—	—	4%	832	0.35	8%	—	—	1%	124	0.05	1%	2,250	0.82	5%
No Physical Harm Documented	4,258	1.80	78%	1,216	0.51	96%	9,924	4.20	92%	4,441	1.88	99%	19,798	8.38	99%	39,637	14.53	95%
Total Substantiated Investigations	5,473	2.32	100%	1,272	0.54	100%	10,756	4.55	100%	4,465	1.89	100%	19,922	8.43	100%	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 2,321 substantiated child maltreatment investigations in 2023.

Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.

— Indicates that estimate was <100 investigations.

Nature of Physical Harm

Investigating workers were asked to document the nature of physical harm. These ratings are based on the information routinely collected during the maltreatment investigation. While investigation protocols require careful examination of any physical injuries and may include a medical examination, it should be noted that children are not necessarily examined by a medical practitioner. Seven possible types of injury or health conditions were documented:

No Harm: There was no apparent evidence of physical harm to the child as a result of maltreatment.

Bruises/Cuts/Scrapes: The child suffered various physical hurts.

Burns and Scalds: The child suffered burns and scalds visible for at least 48 hours.

Broken Bones: The child suffered fractured bones.

Head Trauma: The child was a victim of head trauma (note that in shaken infant cases the major trauma is to the head not to the neck).

Fatality: The child died, and maltreatment was suspected during the investigation as the cause of death.

Other Health Conditions: The child suffered other physical health conditions, such as complications from untreated asthma, failure to thrive, or a sexually transmitted disease.

Table 4-4 presents six types of physical harm reported in the OIS-2023. Physical harm was documented in five percent of substantiated maltreatment investigations (2,250 investigations or 0.82 investigations per 1,000 children). Physical harm primarily involved bruises, cuts, and scrapes (three percent of substantiated maltreatment) and other health conditions (two percent of substantiated maltreatment). Because the OIS-2023 estimates are based on a very small number of cases involving physical harm, the estimates presented in Table 4-4 should be interpreted with caution.

Documented Emotional Harm

Considerable research indicates that child maltreatment can lead to emotional harm. Child welfare workers are often among the first to become aware of the emotional effects of maltreatment, either through their observations or through contact with allied professionals. However, the information collected in the OIS-2023 is limited to the initial assessment period and may, therefore, under count emotional harm. If the maltreatment was substantiated or suspected, workers were asked to indicate whether the child was showing signs of emotional harm (e.g., nightmares, bed wetting, or social withdrawal) following the maltreatment incident(s). These maltreatment-specific descriptions of emotional harm are not to be confused with the general child functioning ratings that are presented in Chapter 5. It is also important to note that while many victims may not show symptoms of emotional harm at the time of the investigation, the effects of the maltreatment may manifest later. Therefore, the emotional harm documented by the OIS underestimates the emotional effects of maltreatment.

Within each of the primary categories of maltreatment, Table 4-5 presents whether or not emotional harm was identified during the child maltreatment investigation. In order to rate the severity of emotional harm, workers indicated whether the child required treatment to manage the symptoms of emotional harm. Emotional harm was noted in 34 percent of all substantiated maltreatment investigations (an estimated 14,374 substantiated investigations or 5.27 investigations per 1,000 children). In 26 percent of substantiated investigations (an estimated 11,003 investigations or 4.03 investigations per 1,000 children), emotional harm was severe enough to require therapeutic treatment.

Physical Abuse: Emotional harm was noted in 40 percent of cases where physical abuse was the primary substantiated maltreatment. In 32 percent of substantiated physical abuse investigations, symptoms of emotional harm were severe enough to require treatment.

TABLE 4-4: Nature of Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2023

Nature of Physical Harm	Total		
	#	Rate per 1,000 Children	%
No Physical Harm	39,637	14.53	95%
Bruises, Cuts, and Scrapes	1,379	0.51	3%
Burns and Scalds	—	—	0%
Broken Bones	140	0.05	0%
Head Trauma	—	—	0%
Fatality	0	0.00	0%
Other Health Conditions	644	0.24	2%
At Least One Type of Physical Harm	2,250	0.82	5%
Total Substantiated Investigations	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,321 substantiated investigations in 2023.
Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total. Children may have experienced multiple types of harm. "—" Indicates that estimate was <100 investigations.

Sexual Abuse: Emotional harm was noted in more than half (60 percent) of investigations where sexual abuse was the primary substantiated concern. In 57 percent of substantiated sexual abuse investigations, the emotional harm was sufficiently severe to require treatment.

Neglect: Emotional harm was identified in 26 percent of investigations where neglect was the primary substantiated maltreatment. In 23 percent of substantiated neglect investigations, the emotional harm was sufficiently severe to require treatment.

Emotional Maltreatment: Emotional harm was identified in 56 percent of investigations where substantiated emotional maltreatment was the primary concern and was sufficiently severe to require treatment in 44 percent of substantiated emotional maltreatment investigations. While it may appear surprising to some readers that no emotional harm was

TABLE 4-5: Documented Emotional Harm by Primary Category of Substantiated Child Maltreatment in Ontario in 2023

	Primary Category of Substantiated Maltreatment																	
	Physical Abuse			Sexual Abuse			Neglect			Emotional Maltreatment			Exposure to Intimate Partner Violence			Total		
Physical Harm	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Emotional Harm, No Treatment Required	433	0.16	8%	—	—	3%	404	0.15	3%	510	0.19	12%	1,975	0.72	10%	3,371	1.24	8%
Emotional Harm, Treatment Required	1,739	0.64	32%	719	0.26	57%	2,426	0.89	23%	1,985	0.73	44%	4,134	1.52	21%	11,003	4.03	26%
Sub-total: Any Emotional Harm Documented	2,172	0.80	40%	768	0.28	60%	2,830	1.04	26%	2,495	0.91	56%	6,109	2.24	31%	14,374	5.27	34%
No Emotional Harm Documented	3,301	1.21	60%	504	0.18	40%	7,926	2.91	74%	1,969	0.72	44%	13,813	5.06	69%	27,513	10.09	66%
Total Substantiated Investigations	5,473	2.01	100%	1,272	0.47	100%	10,756	3.94	100%	4,464	1.64	100%	19,922	7.30	100%	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 2,321 substantiated child maltreatment investigations in 2023.

Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.

“—” Indicates that estimate was <100 investigations.

documented for such a large proportion of emotionally maltreated children, it is important to understand that the determination of emotional maltreatment includes parental behaviours that would be considered emotionally abusive or neglectful even though the child shows no symptoms of harm.

Exposure to Intimate Partner Violence: Emotional harm was identified in 31 percent of investigations where exposure to intimate partner violence was the primary substantiated maltreatment; in 26 percent of substantiated exposure to intimate partner violence investigations, harm was sufficiently severe to require treatment.

Duration of Maltreatment

Workers were asked to describe the duration of maltreatment by classifying suspected or substantiated investigations as single incident or multiple incident cases. Given the length restrictions for the OIS-2018 questionnaire, it was not possible to gather additional information on the frequency of maltreatment to distinguish between long-term situations with infrequent maltreatment and long-term situations with frequent maltreatment.

Table 4-6 shows that 32 percent of substantiated investigations (an estimated 13,320 child investigations, or 4.88 investigations per 1,000 children) involved single incidents of maltreatment and 68 percent involved multiple incidents of maltreatment (an estimated 28,567 child investigations, or 10.47 investigations per 1,000 children).

Physical abuse: Maltreatment was indicated as a single incident in 42 percent of substantiated physical abuse investigations, and multiple incidents in 58 percent of these investigations.

Sexual abuse: Maltreatment was indicated as a single incident in 38 percent of investigations in which sexual abuse was the primary substantiated concern, and multiple incidents in 62 percent of these investigations.

Neglect: Single incidents of neglect occurred in approximately 28 percent of investigations in which neglect was the primary form of substantiated maltreatment. Multiple incidents of neglect were noted in 72 percent of these investigations.

TABLE 4-6: Duration of Maltreatment by Primary Category of Substantiated Child Maltreatment in Ontario in 2023

	Primary Category of Substantiated Maltreatment																	
	Physical Abuse			Sexual Abuse			Neglect			Emotional Maltreatment			Exposure to Intimate Partner Violence			Total		
Duration of Maltreatment	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Single Incident	2,280	0.84	42%	485	0.18	38%	3,007	1.10	28%	1,105	0.41	25%	6,443	2.36	32%	13,320	4.88	32%
Multiple Incidents	3,194	1.17	58%	786	0.29	62%	7,749	2.84	72%	3,360	1.23	75%	13,478	4.94	68%	28,567	10.47	68%
Total Substantiated Investigations	5,474	2.01	100%	1,272	0.47	100%	10,756	3.94	100%	4,465	1.64	100%	19,922	7.30	100%	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,321 substantiated child maltreatment investigations in 2023.
Rate and percentage columns may not add to totals due to rounding.

Emotional maltreatment: Twenty-five percent of substantiated emotional maltreatment investigations involved single incidents of emotional maltreatment, and 75 percent involved multiple incidents.

Exposure to Intimate Partner Violence: Thirty-two percent of investigations in which exposure to intimate partner violence was the primary form of substantiated maltreatment involved single incidents, whereas 68 percent involved multiple incidents.

CHAPTER 5: CHARACTERISTICS OF CHILDREN AND FAMILIES

This chapter provides a description of substantiated maltreatment investigations in terms of the characteristics of the children, their caregivers, and their homes. The estimates presented in this chapter are weighted Ontario estimates derived from child maltreatment investigations conducted in 2023 in a sample of Ontario child welfare agencies. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates do not include (1) incidents that were not reported to child welfare agencies, (2) reported cases that were screened out by child welfare agencies before being fully investigated, (3) new reports on cases already open by child welfare agencies, (4) cases that were investigated only by the police, and (5) cases that were investigated because of concerns about future risk (see Chapter 2: Methods for a full description of the inclusion and exclusion criteria). Readers are cautioned that the findings presented in this chapter are not directly comparable to findings presented in the OIS-2003, OIS-1998, and OIS-1993 reports (see Chapter 1).

Age of Children in All Maltreatment-Related and Substantiated Maltreatment Investigations

Table 5-1a presents the children's age in all maltreatment-related investigations as well as in substantiated maltreatment investigations involving children aged less than one to 17 years. The highest incidence rate among all maltreatment-related investigations was for four- to seven-year-olds (55.78 investigations per 1,000 four- to seven-year-olds) and the lowest incidence rate was for 16- and 17-year-olds (26.17 investigations per 1,000 16- and 17-year-olds). There was a similar pattern for age groups with the highest and lowest incidence for substantiated maltreatment investigations.

TABLE 5-1A: Child Age in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations, and in Substantiated Child Maltreatment Investigations in Ontario in 2023

Child Age	Child Population in Ontario	All Investigations			Substantiated Maltreatment		
		#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
0-17 Years	2,727,480	125,879	46.15	100%	41,887	15.36	100%
0-3 Years	538,495	23,834	44.26	19%	8,135	15.11	19%
< 1 Year	126,945	5,827	45.90	5%	1,707	13.45	4%
1 Year	132,365	5,582	42.17	4%	2,151	16.25	5%
2 Years	137,180	6,469	47.16	5%	2,334	17.01	6%
3 Years	142,005	5,956	41.94	5%	1,943	13.68	5%
4-7 Years	595,985	33,247	55.78	26%	10,563	17.72	25%
4 Years	144,070	7,400	51.36	6%	2,330	16.17	6%
5 Years	149,775	8,996	60.06	7%	2,961	19.77	7%
6 Years	150,025	8,618	57.44	7%	2,708	18.05	6%
7 Years	152,115	8,233	54.12	7%	2,564	16.86	6%
8-11 Years	628,450	31,897	50.76	25%	10,741	17.09	26%
8 Years	155,310	8,773	56.49	7%	2,897	18.65	7%
9 Years	156,505	7,931	50.68	6%	2,962	18.93	7%
10 Years	156,830	7,155	45.62	6%	2,306	14.70	6%
11 Years	159,805	8,038	50.30	6%	2,576	16.12	6%
12-15 Years	645,400	28,549	44.23	23%	9,797	15.18	23%
12 Years	162,115	7,006	43.22	6%	2,522	15.56	6%
13 Years	163,510	7,392	45.21	6%	2,450	14.98	6%
14 Years	160,370	6,673	41.61	5%	2,622	16.35	6%
15 Years	159,405	7,478	46.91	6%	2,203	13.82	5%
16-17 Years	319,150	8,352	26.17	7%	2,651	8.31	6%
16 Years	159,375	4,839	30.36	4%	1,510	9.47	4%
17 Years	159,775	3,513	21.99	3%	1,141	7.14	3%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 6,799 child maltreatment-related investigations in 2023.

Based on a sample of 2,321 substantiated child maltreatment investigations in 2023.

Rate and percentage columns may not add to totals due to rounding.

Gender of Children in All Maltreatment-Related and Substantiated Maltreatment Investigations

Table 5-1b presents the children's gender in all maltreatment-related investigations and substantiated maltreatment investigations. The incidence of maltreatment-related investigations was slightly higher for males (48.01 investigations per 1,000 boys) compared to females (43.38 per 1,000 girls). The incidence of substantiated maltreatment investigations was very similar for males (15.67 investigations per 1,000 boys) and females (14.75 per 1,000 girls). The OIS-2023 data collection instrument included multiple gender categories. Rates per 1,000 children for other genders were not calculated as the 2021 Census gender categories are only published for 15- to 19-year-olds as an aggregate.

Documented Child Functioning Concerns

Child functioning concerns were documented based on a checklist of challenges that child welfare workers were likely to be aware of as a result of their investigations. The child functioning checklist (see Appendix D, OIS-2023 Maltreatment Assessment) was developed in consultation with child welfare workers and researchers to reflect the types of concerns that may be identified during an investigation. The checklist is not a validated measurement instrument for which population norms have been established. The checklist only documents problems that are known to investigating child welfare workers and, therefore, may undercount the occurrence of some child functioning problems. Investigating workers were asked to indicate problems that had been confirmed by a diagnosis, directly observed by the investigating worker or another worker, and/or disclosed by the parent or child, as well as issues that they suspected were problems but could not fully verify at

TABLE 5-1B: Child Gender in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations, and in Substantiated Child Maltreatment Investigations in Ontario in 2023

Child Gender	All Investigations			Substantiated Maltreatment		
	#	Rate per 1,000 Children	%	#	Rate per 1,000 Children	%
Female Cis	60,798	43.38	48%	20,673	14.75	49%
Male Cis	63,659	48.01	51%	20,773	15.67	50%
Gender Non-binary	491	N/A	0%	172	N/A	0%
Transgender	249	N/A	0%	-	N/A	0%
Transgender female	131	N/A	0%	-	N/A	0%
Transgender male	455	N/A	0%	125	N/A	0%
Another gender identity	-	N/A	0%	-	N/A	0%
Do not know	-	N/A	0%	0	N/A	0%
Total	125,879	46.15	100%	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,321 substantiated child maltreatment investigations in 2023.
Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.
2021 Census does not provide population estimates for gender younger than 15 years of age and only as an aggregate for 15-19 year olds. Therefore, no rates per 1,000 children are provided for this population.

the time of the investigation. The six-month period before the investigation was used as a reference point where applicable. Child functioning classifications that reflect physical, emotional, cognitive, and behavioural issues were documented with a checklist that included the following categories:

Positive toxicology at birth: When a toxicology screen for a newborn test positive for the presence of drugs or alcohol.

FASD: Birth defects, ranging from mild intellectual and behavioural difficulties to more profound problems in these areas related to in-utero exposure to alcohol by the biological mother.

Failure to meet developmental milestones: Children who are not meeting their developmental milestones because of non-organic reasons.

Intellectual/developmental disability: Characterized by delayed intellectual development, it is typically diagnosed when a child does not reach his or her developmental milestones at expected times. It includes speech and language, fine/gross motor skills, and/or personal and social skills (e.g., Down Syndrome, Autism Spectrum Disorder).

Attachment issues: The child does not have physical and emotional closeness to a mother or preferred caregiver. The child finds it difficult to seek comfort, support, nurturance, or protection from the caregiver; the child's distress is not ameliorated or is made worse by the caregiver's presence.

ADHD: ADHD is a persistent pattern of inattention and/or hyperactivity/impulsivity that occurs more frequently and more severely than is typically seen in children at comparable stages of development. Symptoms are frequent and severe enough to have a negative impact on the child's life at home, at school, or in the community.

Aggression/conduct issues: Aggressive behaviour directed at other children or adults (e.g., hitting, kicking, biting, fighting, bullying) or violence to property at home, at school, or in the community.

Physical disability: Physical disability is the existence of a long-lasting condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. This includes sensory disability conditions such as blindness, deafness, or a severe vision or hearing impairment that noticeably affects activities of daily living.

Academic/learning difficulties: Difficulties in school including those resulting from learning difficulties, special education needs, behaviour problems, social difficulties, and emotional or mental health concerns.

Depression/anxiety/withdrawal: Feelings of depression or anxiety that persist for most of the day, every day for two weeks or longer, and interfere with the child's ability to manage at home and at school.

Self-harming behaviour: Includes high-risk or life-threatening behaviour and physical mutilation or cutting.

Suicidal thoughts: The child has expressed thoughts of suicide, ranging from fleeting thoughts to a detailed plan.

Suicide attempts: The child has attempted to commit suicide.

Inappropriate sexual behaviour: Child displays inappropriate sexual behaviour, including age-inappropriate play with toys, self, or others; displaying explicit sexual acts; age-inappropriate sexually explicit drawings and/or descriptions; sophisticated or unusual sexual knowledge; or prostitution or seductive behaviour.

Running (multiple incidents): The child has run away from home (or other residence) on multiple occasions for at least one overnight period.

Alcohol abuse: Problematic consumption of alcohol (consider age, frequency, and severity).

Drug/solvent abuse: Includes prescription drugs, illegal drugs, and solvents.

Youth Criminal Justice Act involvement: Charges, incarceration, or alternative measures with the youth justice system.

Other: Any other conditions related to child functioning.

Table 5-2 reflects the types of problems associated with physical, emotional, and/or cognitive health, or with behaviour-specific concerns. In 42 percent of substantiated child maltreatment investigations (an estimated 17,689 child investigations or 6.49 investigations per 1,000 children), at least one child functioning concern was indicated by the investigating worker.

Academic or learning difficulties was the most frequently reported child functioning concern (20 percent of substantiated maltreatment investigations), and the second most common was depression/anxiety/withdrawal (17 percent of substantiated maltreatment investigations). Twelve percent of substantiated maltreatment investigations involved a child with an intellectual or developmental disability, as well as aggression or conduct issues. Ten percent involved a child with ADHD. In nine percent of substantiated maltreatment investigations, the worker indicated that the child failed to meet developmental milestones, and the worker noted attachment issues for the child in seven percent of these investigations. It is important to note that these ratings are based on the initial intake investigation and do not capture child functioning concerns that may become evident after that time.

TABLE 5-2: Child Functioning Concerns in Substantiated Child Maltreatment Investigations in Ontario in 2023

Child Functioning Concern	#	Rate per 1,000 Children	%
Positive Toxicology at Birth	516	0.19	1%
FASD	612	0.22	1%
Failure to Meet Developmental Milestones	3,798	1.39	9%
Intellectual/Developmental Disability	5,215	1.91	12%
Attachment Issues	2,944	1.08	7%
ADHD	4,202	1.54	10%
Aggression/Conduct Issues	5,058	1.85	12%
Physical Disability	730	0.27	2%
Academic/Learning Difficulties	8,218	3.01	20%
Depression/Anxiety/Withdrawal	7,178	2.63	17%
Self-harming Behaviour	1,850	0.68	4%
Suicidal Thoughts	1,655	0.61	4%
Suicide Attempts	582	0.21	1%
Inappropriate Sexual Behaviour	1,017	0.37	2%
Running (Multiple Incidents)	1,279	0.47	3%
Alcohol Abuse	662	0.24	2%
Drug/Solvent Abuse	1,267	0.46	3%
Youth Criminal Justice Act Involvement	614	0.23	1%
Other Functioning Concern	1,245	0.46	3%
At Least One Child Functioning Concern	17,689	6.49	42%
No Child Functioning Concern	24,198	8.87	58%
Total Substantiated Investigations	41,887	15.36	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,321 substantiated child maltreatment investigations in 2023.
Rate and percentage columns do not add to totals because investigating workers could identify more than one child functioning concern.

Primary Caregiver Age and Gender

For each investigated child, the investigating worker was asked to indicate who the primary caregiver was and to specify this caregiver's age and gender. Table 5-3 shows the age and gender distribution of primary caregivers. In 90 percent of substantiated investigations, the person considered to be the primary caregiver was female. Approximately half (52 percent) of substantiated investigations involved caregivers between the ages of 31 and 40. Caregivers who were under 22 were relatively rare (one percent), as were caregivers over 50 (five percent).

Primary Caregiver's Relationship to the Child

The OIS-2023 gathered information on up to two of the child's caregivers living in the home. For each listed caregiver, investigating workers were asked to choose the category that described the relationship between the caregiver and each child in the home. If recent household changes had occurred, investigating workers were asked to describe the situation at the time the referral was made.

The caregiver's relationship to the child was classified as one of the following: biological parent (mother or father), parent's partner, kin foster parent, non-kin foster parent, adoptive parent, grandparent, aunt/uncle, and other.

Table 5-4 describes the primary caregiver's relationship to the child in substantiated maltreatment investigations in Ontario in 2023. Ninety-four percent of substantiated investigations involved children whose primary caregiver was a biological parent.

Primary Caregiver Risk Factors

Concerns related to caregiver risk factors were reported by investigating workers using a checklist of nine items that were asked about each caregiver. Where applicable, the reference

TABLE 5-3: Age and Gender of Primary Caregiver in Substantiated Child Maltreatment Investigations in Ontario in 2023

Age of Primary Caregiver	Gender of Primary Caregiver	#	Rate per 1,000 Children	%
<16 years	Females	0	0.00	0%
	Males	0	0.00	0%
16-17 years	Females	—	—	0%
	Males	0	0.00	0%
18-21 years	Females	512	0.19	1%
	Males	—	—	0%
22-30 years	Females	7,115	2.61	17%
	Males	432	0.16	1%
31-40 years	Females	19,484	7.14	48%
	Males	1,765	0.65	4%
41-50 years	Females	8,024	2.94	20%
	Males	1,250	0.46	3%
51-60 years	Females	1,087	0.40	3%
	Males	537	0.20	1%
>60 years	Females	323	0.12	1%
	Males	—	—	0%
Total	Females	36,860	13.51	90%
	Males	4,098	1.50	10%
Total Substantiated Investigations		40,960	15.02	99%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,281 substantiated child maltreatment investigations in 2023. Rate and percentage columns do not add to totals because investigating workers could identify more than one child functioning concern.
"—" Indicates that estimate was <100 investigations.
This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver and for a sample of 6 substantiated investigations in which the youth was living independently. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., school, institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 807 and the estimated number of substantiated youth living independently investigations is 120.
The response options for primary caregiver gender included the following: Female Cis, Male Cis, Gender non-binary, Transgender, Transgender female, Transgender male, Two-spirit, Another gender identity, Do not know, and Prefer not to answer. In a sample of under 5 substantiated investigations, a gender category other than Female Cis or Male Cis was endorsed. Given this small number, data aggregation to a two-category gender variable for this table was necessary to protect the confidentiality of the caregiver.

TABLE 5-4: Primary Caregiver's Relationship to the Child in Substantiated Child Maltreatment Investigations in Ontario in 2023

Primary Caregiver's Relationship to the Child	#	Rate per 1,000 Children	%
Biological Mother	34,628	12.70	85%
Biological Father	3,616	1.33	9%
Parent's Partner	873	0.32	2%
Kin Foster Parent	184	0.07	0%
Non-kin Foster Parent	-	-	0%
Adoptive Parent	198	0.07	0%
Grandparent	952	0.35	2%
Aunt/Uncle	167	0.06	0%
Other	284	0.10	1%
Total Substantiated Investigations	40,960	15.02	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,321 substantiated child maltreatment investigations in 2023. Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.
"—" Indicates that estimate was <100 investigations.
This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver and for a sample of 6 substantiated investigations in which the youth was living independently. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., school, institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 807 and the estimated number of substantiated youth living independently investigations is 120.
Updated Nov 7 2024

point for identifying concerns about caregiver risk factors was the previous six months. The checklist is not a validated measurement instrument. The checklist only documents problems that are known to investigating child welfare workers.

The checklist included:

Alcohol abuse: Caregiver abuses alcohol.

Drug/solvent abuse: Abuse of prescription drugs, illegal drugs, or solvents.

Cognitive impairment: Caregiver has a cognitive impairment.

Mental health issues: Any mental health diagnosis or problem.

Physical health issues: Chronic illness, frequent hospitalizations, or physical disability.

Few social supports: Social isolation or lack of social supports.

Victim of intimate partner violence: During the past six months, the caregiver was a victim of intimate partner violence including physical, sexual, or verbal assault.

Perpetrator of intimate partner violence: During the past six months, the caregiver was a perpetrator of intimate partner violence including physical, sexual, or verbal assault.

History of foster care or group home: Caregiver was in foster care and/or group home care during his or her childhood.

Table 5-5 presents primary caregiver risk factors that were noted by investigating workers. At least one primary caregiver risk factor was identified in 81 percent of substantiated maltreatment investigations (an estimated 33,379 substantiated child investigations). The most frequently noted concerns were victim of intimate partner violence (56 percent), mental health issues (37 percent), few social supports (29 percent), alcohol abuse (13 percent), and perpetrator of intimate partner violence (13 percent).

Household Source of Income

Investigating workers were asked to choose the income source that best described the primary source of the household income. Income source was categorized by the investigating worker using nine possible classifications:

Full-time employment: Family income is derived from at least one permanent, full-time position.

Part-time (fewer than 30 hours/week): Family income is derived primarily from at least one part-time position.

Multiple jobs: Caregiver(s) has more than one part-time or temporary position.

Seasonal: Caregiver(s) works either full- or part-time positions for temporary periods of the year.

Employment insurance (EI): Caregiver(s) is temporarily unemployed and is receiving employment insurance benefits.

Social assistance: Caregiver(s) is currently receiving social assistance benefits.

Other benefit: Refers to other forms of benefits or pensions (e.g., family benefits, long-term disability insurance or child support payments).

None: Household has no source of legal income.

Unknown: Household source of income was not known.

In Table 5-6 the income sources are collapsed into full-time employment, part-time employment (which includes seasonal and multiple jobs), social assistance/employment insurance/other benefits, unknown, and none. Table 5-6 shows the source of income for the households of children with substantiated maltreatment as tracked by the OIS-2023. Fifty-two percent of investigations (or 21,166 substantiated maltreatment investigations) involved children in families that derived their

TABLE 5-5: Primary Caregiver Risk Factors in Substantiated Child Maltreatment Investigations in Ontario in 2023

Caregiver Risk Factors	#	Rate per 1,000 Children	%
Alcohol Abuse	5,310	1.95	13%
Drug/Solvent Abuse	4,920	1.80	12%
Cognitive Impairment	2,320	0.85	6%
Mental Health Issues	15,158	5.56	37%
Physical Health Issues	2,846	1.04	7%
Few Social Supports	11,976	4.39	29%
Victim of Intimate Partner Violence	23,002	8.43	56%
Perpetrator of Intimate Partner Violence	5,473	2.01	13%
History of Foster Care/Group Home	2,283	0.84	6%
At Least One Primary Caregiver Risk Factor	33,379	12.24	81%
Total Substantiated Investigations	40,960	15.02	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023

Based on a sample of 2,281 substantiated child maltreatment investigations in 2023.

Rate and percentage columns do not add to totals because investigating workers could identify more than one primary caregiver risk factor.

This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver and for a sample of 6 substantiated investigations in which the youth was living independently. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., school, institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 807 and the estimated number of substantiated youth living independently investigations is 120.

primary income from full-time employment. Thirty-one percent involved children whose families received social assistance/employment insurance/other benefits as their primary source of income (12,842 substantiated maltreatment investigations). Eight percent of families relied on part-time work, multiple jobs, or seasonal employment. In five percent of substantiated investigations, the source of income was unknown by the workers and there was no reliable source of income was reported in four percent of substantiated investigations.

TABLE 5-6: Household Source of Income in Substantiated Child Maltreatment Investigations in Ontario in 2023

Household Source of Income	#	Rate per 1,000 Children	%
Full-time Employment	21,166	7.76	52%
Part-time/Multiple Jobs/Seasonal Employment	3,111	1.14	8%
Benefits/EI/Social Assistance	12,842	4.71	31%
Unknown	2,103	0.77	5%
None	1,738	0.64	4%
Total Substantiated Investigations	40,960	15.02	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,287 substantiated child maltreatment investigations in 2018.
Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.
"—" Indicates that estimate was <100 investigations.
This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 807.

Housing Type

Table 5-7 presents housing type for substantiated maltreatment investigations. Investigating workers were asked to select the housing accommodation category that best described the investigated child's living situation.

The types of housing included:

- Own home:** A purchased house, townhouse, or condominium.
- Rental:** A private rental house, townhouse, or apartment.
- Public housing:** A unit in a public rental-housing complex (e.g., rent-subsidized, government-owned housing), or a house, townhouse, or apartment on a military base.

Band housing: Indigenous housing built, managed, and owned by the band.

Living with friends/family: Living with a friend or family member.

Hotel: An SRO (single room occupancy) hotel or motel accommodation.

Shelter: A homeless or family shelter.

Unknown: Housing accommodation is unknown.

Other: Any other form of shelter.

At the time of the study, 52 percent of all substantiated investigations involved children living in rental accommodations (37 percent in private rentals and 15 percent in public housing), 27 percent involved children living in purchased homes, five percent involved children living with friends or family, three percent involved children living in Band housing, two percent involved children living in shelters or hotels, and one percent involved children living in other accommodations. In eight percent of substantiated investigations, workers did not have enough information to describe the housing type (Table 5-7).

Family Moves

In addition to housing type, investigating workers were asked to indicate the number of household moves within the past year. Table 5-8 shows that majority of substantiated investigations involved families that had not moved in the previous twelve months (70 percent or 10.53 investigations per 1,000 children), whereas 15 percent had moved once (2.24 investigations per 1,000 children), and six percent had moved two or more times (0.91 investigations per 1,000 children). In nine percent of substantiated maltreatment investigations, whether the family had recently moved was unknown to the workers.

TABLE 5-7: Housing Type in Substantiated Child Maltreatment Investigations in Ontario in 2023

Household Source of Income	#	Rate per 1,000 Children	%
Own Home	11,181	4.10	27%
Rental Accommodation	15,357	5.63	37%
Public Housing	6,164	2.26	15%
Band Housing	1,349	0.49	3%
Shelter/Hotel	794	0.29	2%
Living with friends/family	2,169	0.80	5%
Other	604	-	1%
Unknown	3,462	1.27	8%
Total Substantiated Investigations	41,080	15.06	100%

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"—" Indicates that estimate was <100 investigations.
This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 807.

TABLE 5-8: Family Moves Within the Last Twelve Months in Substantiated Child Maltreatment Investigations in Ontario in 2023

Frequency of Family Moves	#	Rate per 1,000 Children	%
No Moves in Last Twelve Moves	28,710	10.53	70%
One Move	6,103	2.24	15%
Two or More Moves	2,475	0.91	6%
Unknown	3,791	1.39	9%
Total Substantiated Investigations	41,080	15.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,287 substantiated child maltreatment investigations in 2023.
Rate and percentage columns may not add to totals due to rounding.
This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 807.

Housing Safety

Exposure to unsafe housing conditions was measured by investigating workers who indicated the presence or absence of unsafe conditions in the home. Unsafe housing conditions were noted in nine percent of substantiated child maltreatment investigations (1.35 investigations per 1,000 children).

TABLE 5-9: Housing Safety in Substantiated Child Maltreatment Investigations in Ontario in 2023

Unsafe Housing Conditions	#	Rate per 1,000 Children	%
Yes	3,689	1.35	9%
No	35,543	13.03	87%
Unknown	1,848	0.68	4%
Total Substantiated Investigations	41,080	15.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2023
Based on a sample of 2,287 substantiated child maltreatment investigations in 2023.
Rate and percentage columns may not add to totals due to rounding.
This question was not applicable for a sample of 34 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details.
The estimated number of substantiated community caregiver investigations is 807.

Future Directions

The OIS-1993, 1998, 2003, 2008, 2013, 2018, and 2023 datasets provide a unique opportunity to examine changes in child maltreatment investigations across Ontario over the last three decades.

For updates on the OIS and for more detailed publications visit the Canadian Child Welfare Research Portal at cwrp.ca.

APPENDIX A: OIS-2023 SITE RESEARCHERS

OIS-2023 Site Researchers worked directly with the primary investigating worker across the 20 OIS agencies to complete the data collection instrument during a virtual Microsoft Teams meeting. Their enthusiasm and dedication to the study were critical to ensuring its success.

The following is a list of Site Researchers from the Factor-Inwentash Faculty of Social Work, University of Toronto, who participated in the OIS-2023.

Barbara Fallon
(Principal Investigator)

Tara Black
(Co-Manager)

Rachael Lefebvre
(Co-Manager)

Brennan Berardo

Danielle Billard

Krista Budau

Emmaline Houston

Nicolette Joh-Carnella

Bryn King

Michelle Lewis

Nico Trocmé

Data Verification and Cleaning

Data verification was completed by the Site Researchers and the Principal Investigator. Data cleaning for the OIS-2023 was completed with assistance from Joanne Daciuk.

Data Analysis

Assistance in developing the sampling design, weights, and confidence intervals was provided by Jean-Sébastien Provençal and Namita Chhabra.

APPENDIX B: OIS-2023 ADVISORY COMMITTEE

The OIS-2023 Advisory Committee was established to provide guidance and oversight to all phases of the research. An additional function of the Advisory Committee is to ensure that the OIS respects the principles of Indigenous Ownership of, Control over, Access to, and Possession of research (OCAP principles) to the greatest degree possible given that the OIS is a cyclical study which collects data on investigations involving Indigenous and non-Indigenous children.

The following is a list of current members of the OIS-2023 Advisory Committee.

Nicole Bonnie

Consultant,
Equity, Diversity, and Inclusion

Krista Budau

Director of Service,
Children's Aid Society of Algoma

Amber Crowe

Executive Director,
Dnaagdawenmag Binnoojiiyag Child & Family Services

Andrea Evans

Pediatrician,
Children's Hospital of Eastern Ontario

Keishia Facey

Interim Senior Manager of OVOV,
Ontario Association of Children's Aid Societies

Lorraine Hill

Legacy Systems Lead,
Association of Native Child and Family Well-Being Agencies
of Ontario

Mark Kartusch

Director of Development and Special Projects,
Dnaagdawenmag Binnoojiiyag Child & Family Services

Altaf Kassam

Director of Information Management & Privacy,
Children's Aid Society of Toronto

Micheal Miller

Executive Director,
Association of Native Child and Family Well-Being Agencies
of Ontario

Brenda Moody

Director, Strategic Data Intelligence
Peel Children's Aid Society

Henry Parada

Professor,
School of Social Work at Toronto Metropolitan University

Vania Patrick-Drakes

Interim Manager of OVOV,
Ontario Association of Children's Aid Societies

Jolanta Rasteniene

Manager, Accountability & Analytics
Peel Children's Aid Society

Jeffrey Schiffer

Chief Impact Officer,
Children's Aid Foundation

Kate Schumaker

Director of Quality, Strategy and Planning,
Catholic Children's Aid Society of Toronto

Jill Stoddart

Executive Director,
Family and Children's Services Foundation

Leyco Wilson

Supervisor of Quality Improvement and Evaluation,
Family and Children's Services of the Waterloo Region

APPENDIX C: GLOSSARY OF TERMS

The following is an explanatory list of terms used throughout the Ontario Incidence Study of Reported Child Abuse and Neglect 2023 (OIS-2023) Report.

Age Group: The age range of children included in the OIS-2023 sample. All data are presented for children between newborn and 17 years of age, with the exception of the data presented in Chapter 3 which presents data for children between newborn and 15 years of age.

Annual Incidence: The number of child maltreatment investigations per 1,000 children in a given year.

Case Duplication: Children who are subject of an investigation more than once in a calendar year are counted in most child welfare statistics as separate “cases” or “investigations.” As a count of children, these statistics are therefore duplicated.

Case Openings: Cases that appear on agency/office statistics as openings. Openings do not include referrals that have been screened-out.

Categories of Maltreatment: The five key classification categories under which the 33 forms of maltreatment were subsumed: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to intimate partner violence.

Child: The OIS-2023 defined child as age newborn to 17 inclusive.

Child Investigations: Case openings that meet the OIS-2023 inclusion criteria (see Figure 1-1).

Child Welfare Agency: Refers to child protection services and other related services. The focus of the OIS-2023 is on services that address alleged child abuse and neglect. The names designating such services vary by jurisdiction.

Childhood Prevalence: The proportion of people maltreated at any point during their childhood. The OIS-2023 does not measure prevalence of maltreatment.

Community Caregiver: Child welfare agencies in Ontario usually open cases under the name of a family (e.g., one or more parent). In certain cases, child welfare agencies do not open cases under the name of a family, but rather the case is opened under the name of a “community caregiver.” This occurs when the alleged perpetrator is someone providing care to a child in an out-of-home setting (e.g., institutional caregiver). For instance, if an allegation is made against a caregiver at a day care, school, or group home, the case may be classified as a “community caregiver” investigation. In these investigations, the investigating child welfare worker typically has little contact with the child’s family, but rather focuses on the alleged perpetrator who is a community member. For this reason, information on the primary caregivers and the households of children involved in “community caregiver” investigations was not collected.

Definitional Framework: The OIS-2023 provides an estimate of the number of cases of alleged child maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence) reported to and investigated by Ontario child welfare services in 2023 (screened-out reports are not included). The estimates are broken down by three levels of substantiation (substantiated, suspected, and unfounded). Cases opened more than once during the year are counted as separate investigations.

Differential or Alternate Response Models: A newer model of service delivery in child welfare in which a range of potential response options are customized to meet the diverse needs of families reported to child welfare. Typically involves multiple “streams” or “tracks” of service delivery. Less urgent cases are shifted to a “community” track where the focus of intervention is on coordinating services and resources to meet the short- and long-term needs of families.

Forms of Maltreatment: Specific types of maltreatment (e.g., hit with an object, sexual exploitation, or direct witness to physical violence) that are classified under the five OIS-2023 Categories of Maltreatment. The OIS-2023 captured 33 forms of maltreatment.

Indigenous Peoples: A collective name for the original peoples of North America and their descendants (often ‘Aboriginal peoples’ is also used). The Canadian constitution recognizes three groups of Indigenous peoples: Indians (commonly referred to as First Nations), Inuit, and Métis. These are three distinct peoples with unique histories, languages, cultural practices, and spiritual beliefs.

Level of Identification and Substantiation: There are four key levels in the case identification process: detection, reporting, investigation, and substantiation.

Detection is the first stage in the case identification process. This refers to the process of a professional or community member detecting a maltreatment-related concern for a child. Little is known about the relationship between detected and undetected cases.

Reporting suspected child maltreatment is required by law in Ontario. The OIS-2023 does not document unreported cases.

Investigated cases are subject to various screening practices, which vary across agencies. The OIS-2023 did not track screened-out cases, nor did it track new incidents of maltreatment on already opened cases.

Substantiation distinguishes between cases where maltreatment is confirmed following an investigation, and cases where maltreatment is not confirmed. The OIS-2023 uses a three-tiered classification system, in which a *suspected* level provides an important clinical distinction for cases where maltreatment is suspected to have occurred by the investigating worker, but cannot be substantiated.

Maltreatment Investigation: Investigations of situations where there are concerns that a child may have already been abused or neglected.

Maltreatment-related Investigation: Investigations of situations where there are concerns that a child may have already been abused or neglected as well as investigations of situations where the concern is the risk the child will be maltreated in the future.

Multi-stage Sampling Design: A research design in which several systematic steps are taken in drawing the final sample to be studied. The OIS-2023 sample was drawn in three stages. First, a stratified random sample of child welfare agencies was selected from across Ontario. Second, families investigated by child welfare agencies were selected (all cases in small and medium sized agencies, a random sample in large agencies). Finally, investigated children in each family were identified for inclusion in the sample (non-investigated siblings were excluded).

Non-protection Cases: Cases open for child welfare services for reasons other than suspected maltreatment or risk of future maltreatment (e.g., prevention services, services for young pregnant women, etc.).

Reporting Year: The year in which child maltreatment-related cases were opened. The reporting year for the OIS-2023 is 2023.

Risk of Future Maltreatment: No specific form of maltreatment alleged or suspected. However, based on the circumstances, a child is at risk for maltreatment in the future due to a milieu of risk factors. For example, a child living with a caregiver who abuses substances may be deemed at risk of future maltreatment even if no form of maltreatment has been alleged.

Risk of Harm: Placing a child at risk of harm implies that a specific action (or inaction) occurred that seriously endangered the safety of the child. Placing a child at risk of harm is considered maltreatment.

Screened out: Referrals to child welfare agencies that are not opened for an investigation.

Unit of Analysis: In the case of the OIS-2023, the unit of analysis is a child maltreatment-related investigation.

Unit of Service: When a referral is made alleging maltreatment, the child welfare agency will open an investigation if the case is not screened out. In Ontario, when an investigation is opened, it is opened under an entire family (a new investigation is opened for the entire family regardless of how many children have been allegedly maltreated).

APPENDIX D: OIS-2023 MALTREATMENT ASSESSMENT

The OIS-2023 Maltreatment Assessment Consists of:

- » Intake Information Section;
- » Household Information Section; and
- » Child Information Section



Intake Information

Household Information

Child Information

Comments

Intake Information

01. Date case opened (YYYY-MM-DD)

2023-10-01

02. Source of allegation/referral

Check all that apply

☐ Custodial parent

☐ Non-custodial parent

☐ Child (subject of referral)

☐ Relative

☐ Neighbour/friend

☐ Social assistance worker

☐ Crisis service/shelter

☐ Community/recreation centre

☐ Hospital (any personnel)

☐ Community health nurse

☐ Community physician

☐ Community mental health professional

☐ School

☐ Other child welfare service

☐ Day care centre

☐ Police

☐ Community agency

☐ Anonymous

☐ Other

03. Please describe the nature of the referral, including alleged maltreatment and injury (if applicable)

Results of investigation

04. Which approach to the investigation was used?

05. Caregiver(s) in the home (child's/children's primary residence)

☐ No caregiver investigated

☐ No secondary caregiver in the home

☐ Community caregiver

☐ Youth living independently

Primary caregiver

a) Gender

b) Age

Secondary caregiver in the home at time of referral

a) Gender

b) Age

06. Children (under 19) in the home at time of referral and caregiver's relationship to them

a) First initial only of child	b) Age of child	c) Gender of child	d) Primary caregiver's relationship to child	e) Secondary caregiver's relationship to child	f) Subject of referral	g) Was child investigated?
---	--------------------------	-----------------------------	---	---	---------------------------------	-------------------------------------

Child 1 ☒ Investigate

 Add Child

08. Caregiver(s) outside the home

Check all that apply

☐ None

☐ Father

☐ Mother

☐ Grandparent

☐ Other

 Save

Next 



Intake Information

Household Information

Child Information

Comments

Household Information**Primary/Secondary caregiver****Gender** : Unknown**Age** : Unknown**A09. Primary income****A10. Ethno-Racial or Indigeneity****If Indigenous,****a) On/Off reserve****b) Indigenous Status**

First Nations Status Eligibility

Did you engage with the family's band?

☐ Yes☐ No

At what stage of the investigation was the band contacted?

Please tell us about the Band engagement

If Black,

Did you have an Anti-Black Racism consultation?

☐ Yes☐ No

Please check all that apply:

☐ African (Nigerian, Somali, Ethiopian)☐ Caribbean (Jamaican, Haitian, Trinidadian)☐ European (British, French, Portuguese, Spanish)☐ North American (American, Canada)☐ South and Central American (Brazilian, Panamanian)☐ Don't know**If Latin American,**

Please check all that apply:

☐ Caribbean (Cuban, Haitian)☐ Central American (Honduran, Mexican)☐ European (British, French, Portuguese, Spanish)☐ North American☐ South American☐ Don't know

A11. Has this caregiver moved to Canada within the last 5 years? ☐ Yes ☐ No ☐ Unknown

Are they an asylum seeker/refugee? ☐ Yes ☐ No

A12. Primary language

A13. Caregiver response to investigation

A14. Caregiver risk factors within the past 6 months

Please complete all risk factors (a to i)

	Confirmed	Suspected	No	Unknown
a) Alcohol abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) Drug/solvent abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Cognitive impairment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Mental health issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Physical health issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) Few social supports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Victim of intimate partner violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Perpetrator of intimate partner violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) History of foster care/group home	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please select all drug abuse categories that apply

- ☐ Cannabis (e.g., marijuana, hashish, hash oil)
- ☐ Opiates and Opioids and morphine derivatives (e.g., codeine, fentanyl, heroine, morphine, opium, oxycodone)
- ☐ Depressants (e.g., barbiturates, benzodiazepines such as Valium, Ativan)
- ☐ Stimulants (e.g., cocaine, amphetamines, methamphetamines)
- ☐ Hallucinogens (e.g., acid (LSD), PCP)
- ☐ Solvents/Inhalants (e.g., glues, paint thinner, paint, gasoline, aerosol sprays)
- ☐ Unknown

15. Child custody dispute (i.e., court application made or pending) ☐ Yes ☐ No ☐ Unknown

16. Type of housing

17. Number of moves in past year

18. Home overcrowded ☐ Yes ☐ No ☐ Unknown

19. Are there unsafe housing conditions? ☐ Yes ☐ No ☐ Unknown

Briefly describe the unsafe housing conditions

20. In the last 6 months, the household has struggled to pay for:

a) Food ☐ Yes ☐ No ☐ Unknown

Was the family provided with any financial/material assistance? ☐ Yes ☐ No

b) Housing ☐ Yes ☐ No ☐ Unknown

c) Utilities ☐ Yes ☐ No ☐ Unknown

d) Telephone/Cell phone ☐ Yes ☐ No ☐ Unknown

e) Transportation ☐ Yes ☐ No ☐ Unknown

f) Medical care (includes dental and mental health) ☐ Yes ☐ No ☐ Unknown

21. Has this case been previously opened for investigation?

a) How long since the case was closed?

22. Case will stay open for on-going child welfare services ☐ Yes ☐ No

23. Referral(s) for any family member

a) Referral(s) made for any family member to an internal or external service(s) ☐ Yes ☐ No

If YES, Please specify the type of referral(s) made

Check all that apply

- | | |
|--|--|
| <input type="checkbox"/> Parent education or support services | <input type="checkbox"/> Child victim support services |
| <input type="checkbox"/> Family or parent counselling | <input type="checkbox"/> Recreational services |
| <input type="checkbox"/> Drug/alcohol counselling or treatment | <input type="checkbox"/> Special education placement |
| <input type="checkbox"/> Psychiatric/mental health services | <input type="checkbox"/> Medical or dental services |
| <input type="checkbox"/> Intimate partner violence services | <input type="checkbox"/> Child or day care |
| <input type="checkbox"/> Welfare or social assistance | <input type="checkbox"/> Speech/language services |
| <input type="checkbox"/> Food bank | <input type="checkbox"/> Cultural services |
| <input type="checkbox"/> Shelter services | <input type="checkbox"/> Immigration services |
| <input type="checkbox"/> Housing | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> Legal | |

If YES, What was specifically done with respect to the referral(s)?

Check all that apply

- ☐ Suggested they should get services
- ☐ Provided them with names and numbers of service providers
- ☐ Assisted them with completing/filing the application
- ☐ Made appointment for them
- ☐ Accompanied them to the appointment
- ☐ Followed-up with family to see if the service was provided
- ☐ Followed-up with internal/external service(s) to confirm if the service was provided

If NO, please specify the reason(s)

Check all that apply

- ☐ Already receiving services – not within the child welfare agency
- ☐ Already receiving services – file is transferred to ongoing services
- ☐ Service not available in the area
- ☐ Ineligible for service
- ☐ Services could not be financed
- ☐ Service determined not to be needed
- ☐ Refusal of services
- ☐ There is an extensive waitlist for services
- ☐ No culturally appropriate services

 Save

 Previous

Next 



Intake Information

Household Information

Child Information

Comments



Child Information

Child 1

First initial

X

24. Gender



Child sexual orientation



25. Age

26. Ethno-racial or
Indigeneity

27. Indigenous Status



28. Child functioning

Please complete all child functioning issues (a to s)

	Confirmed	Suspected	No	Unknown
a) Positive toxicology at birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) FASD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Failure to meet developmental milestones	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Intellectual/developmental disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Attachment issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) ADHD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Aggression/conduct issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Physical disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Academic/learning difficulties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Confirmed	Suspected	No	Unknown
j) Depression/anxiety/withdrawal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- | | | | | |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| k) Self-harming behaviour | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| l) Suicidal thoughts | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| m) Suicide attempts | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| n) Inappropriate sexual behaviour | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| o) Running (multiple incidents) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| p) Alcohol abuse | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| q) Drug/solvent abuse | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| r) Youth Criminal Justice Act involvement | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| s) Other <input type="text"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Please select all drug abuse categories that apply

- ☐ Cannabis (e.g., marijuana, hashish, hash oil)
- ☐ Opiates and Opioids and morphine derivatives (e.g., codeine, fentanyl, heroine, morphine, opium, oxycodone)
- ☐ Depressants (e.g., barbiturates, benzodiazepines such as Valium, Ativan)
- ☐ Stimulants (e.g., cocaine, amphetamines, methamphetamines)
- ☐ Hallucinogens (e.g., acid (LSD), PCP)
- ☐ Solvents/Inhalants (e.g., glues, paint thinner, paint, gasoline, aerosol sprays)
- ☐ Unknown

29. TYPE OF INVESTIGATION

☐ Investigated incident of maltreatment

☐ Risk investigation only

Maltreatment codes

Please use these maltreatment codes to answer Question 30. Questions 30 to 37 apply to the maltreatment of a child.

Physical abuse	Sexual abuse	Neglect	Emotional maltreatment	Exposure to Intimate Partner Violence
01 Shake, push, grab or throw		02 Hit with hand		03 Punch, kick or bite
04 Hit with object		05 Choking, poisoning, stabbing		06 Other physical abuse

30. Maltreatment codes – Enter primary form of maltreatment first

	1st Code	2nd Code	3rd Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
31. Alleged perpetrator			
Primary caregiver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary caregiver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other perpetrator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Relationship <input type="text"/>			
b. Age <input type="text"/>			
c. Gender <input type="text"/>			
32. Substantiation	<input type="text"/>	<input type="text"/>	<input type="text"/>
a) Was the report a fabricated referral? (by referral source)	<input type="text"/>	<input type="text"/>	<input type="text"/>
33. Was maltreatment a form of punishment?	<input type="text"/>	<input type="text"/>	<input type="text"/>
34. Duration of maltreatment	<input type="text"/>	<input type="text"/>	<input type="text"/>
35. Police involvement	<input type="text"/>	<input type="text"/>	<input type="text"/>

36. Is mental or emotional harm evident (as a result of the substantiated or suspected maltreatment)? ☐ Yes ☐ No

a) Child requires therapeutic treatment ☐ Yes ☐ No

37. Physical harm

a) Is physical harm evident? ☐ Yes ☐ No

b) Types of physical harm

Check all that apply

☐ Bruises, cuts or scrapes

☐ Broken bones

☐ Burns and scalds

☐ Head trauma

☐ Fatal

☐ Health condition : Please specify

c) Was medical treatment required? ☐ Yes ☐ No

38. Is there a significant risk of future maltreatment? ☐ Yes ☐ No ☐ Unknown

39. Was this child a previous victim of maltreatment? ☐ Yes ☐ No ☐ Unknown

40. Placement

a) Placement during investigation ☐ Yes ☐ No ☐ Considered

b) Placement type

c) Estimate the time it takes to travel between the child's residence and their placement

d) Did the child reunify during the investigation? ☐ Yes ☐ No

41. Child welfare court application? ☐ Yes ☐ No ☐ Considered

a) Referral to mediation/alternative dispute resolution (ADR) ☐ Yes ☐ No

42. Caregiver(s) used spanking in the last 6 months



Intake Information

Household Information

Child Information

Comments



Comments and Other Information (Not Required)

43. If you are unable to complete an investigation for any child please explain why

44. Intake information

45. Household information

46. Child information

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APPENDIX E: OIS-2023 GUIDEBOOK

THE ONTARIO INCIDENCE STUDY OF REPORTED CHILD ABUSE AND NEGLECT (OIS)

Background

The Ontario Incidence Study of Reported Child Abuse and Neglect 2023 (OIS-2023) is the seventh provincial study of reported child abuse and neglect investigations in Ontario. Results from the previous six cycles of the OIS have been widely disseminated in conferences, reports, books, and journal articles (see Canadian Child Welfare Research Portal, cwrp.ca).

The OIS-2023 is funded by the Ministry of Children, Community and Social Services of Ontario. Significant in-kind support is provided by child welfare agency managers, supervisors, front-line workers, information technology personnel, and other staff. The project is led by Professor Barbara Fallon and managed by a team of researchers at the University of Toronto's (U of T) Factor-Inwentash Faculty of Social Work.

If you ever have any questions or comments about the study, please do not hesitate to contact your Site Researcher.

Objectives

The primary objective of the *OIS-2023* is to provide reliable estimates of the scope and characteristics of reported child abuse and neglect in Ontario in 2023. Specifically, the study is designed to:

- » determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, exposure to intimate partner violence, and risk of maltreatment, as well as multiple forms of maltreatment;
- » investigate the severity of maltreatment as measured by forms of maltreatment, duration, and physical and emotional harm;
- » examine selected determinants of health that may be associated with maltreatment;
- » monitor short-term investigation outcomes, including substantiation rates, out-of-home placements, use of child welfare court, and criminal prosecution;
- » compare 1993, 1998, 2003, 2008, 2013, 2018, and 2023 rates of substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence; severity of maltreatment; and short-term investigation outcomes.

Sample

In smaller agencies, information will be collected on all child maltreatment-related investigations opened during the three-month period between October 1, 2023 and December 31, 2023. In larger agencies, a random sample of 250 investigations will be selected for inclusion in the study.

OIS Maltreatment-Related Assessment

The *OIS Maltreatment-Related Assessment* is an instrument designed to capture standardized information from child welfare investigators on the results of their investigations. The instrument consists of four sections (Intake Information, Household Information, Child Information, and a Comments Section) and will be completed electronically using a secure, web-based delivery system.

The Child Information section will need to be completed for each investigated child. Children living in the household who are not the subject of an investigation should be listed in the Intake Information section, although Child Information sections will not be completed for them. The instrument takes approximately eight minutes to complete, depending on the number of children investigated in the household.

The *OIS Maltreatment-Related Assessment* examines a range of family, child, and case status variables. These variables include source of referral, caregiver demographics, household composition measures, key caregiver functioning issues, and housing and home safety measures. It also includes outcomes of the investigation on a child-specific basis, including up to three forms of maltreatment, nature of harm, duration of maltreatment, identity of alleged perpetrator, placement in care, and child welfare court involvement.

Data Collection

Data collection will take place between December 2023 and May 2024. All workers involved in the study will meet directly with a Site Researcher over Microsoft Teams to complete the online data collection instrument together.

Confidentiality

Confidentiality will be maintained at all times during data collection and analysis.

Similar to the previous cycle (OIS-2018), the OIS-2023 will use a secure, web-based delivery system for the OIS Maltreatment-Related Assessment. Each Site Researcher will have access to the secure system with a username and a password. This website allows Site Researchers to access, complete, and track online forms. The Site Researchers will log into the system to access a worker's data collection instruments and then share their screens over Microsoft Teams so that the workers can complete their data collection instruments with the Site Researcher.

To guarantee client confidentiality, data will be treated as confidential and security measures will be consistent with U of T Data Security Standards for Personally Identifiable and Other Confidential Data in Research. Confidentiality of case information and participants, including workers and agencies/offices, are maintained throughout the study process. The website incorporates a data collection tracking system to support data collection activities that will be conducted by the research team.

Data collected through the OIS website will be stored on a secure server at U of T in a secure setting and accessed through secure logins and connections. The data will be archived on the same server. Data are not stored on local computers. Programming and research staff are required

to save their work on the protected server and must sign agreements that they will not bring data out of the secure server environment.

Access to data is severely limited. This is not a public database. Only those U of T research personnel working on the OIS-2023 will have access to the data through a password protected and secure log in. A research ID number will be assigned to each case for the purpose of data management and will not be able to be linked to any other database containing identifying or near-identifying information.

The final report will contain only provincial estimates of child abuse and neglect and will not identify any participating agency/office. **No participating agencies/sites or workers are identified in any of the study reports.**

Completing the OIS Maltreatment-Related Assessment

The OIS Maltreatment-Related Assessment should be completed by the investigating worker when he or she is writing the first major assessment of the investigation. In most jurisdictions, this report is required within 45 days of the date the case was opened.

It is essential that **all items in the OIS Maltreatment-Related Assessment** applicable to the specific investigation are completed. Use the "unknown" response if you are unsure. If the categories provided do not adequately describe a case, provide additional information in the Comments section. If you have any questions during the study, please contact your Site Researcher.

Definitions: *Intake Information* Section

If you have a unique circumstance that does not seem to fit the categories provided in the *Intake Information* section, write a note in the *Comments* section under "Intake information".

Question 1: Date Case Opened

This refers to the date the case was opened/re-opened. This information is pre-populated.

Question 2: Source of Allegation/Referral

Select all sources of referral that are applicable for each case. This refers to **separate and independent contacts** with the child welfare agency/office. If a young person tells a school principal of abuse and/or neglect, and the school principal reports this to the child welfare authority, you would select the option for this referral as "School." There was only one contact and referral in this case. If a second source (neighbour) contacted the child welfare authority and also reported a concern for this child, then you would also select the option for "Neighbour/friend."

- » **Custodial parent:** Includes parent(s) identified in Question 5: Caregiver(s) in the home.
- » **Non-custodial parent:** Contact from an estranged spouse (e.g., individual reporting the parenting practices of his or her former spouse).
- » **Child (subject of referral):** A self-referral by any child listed in the *Intake Information* section of the OIS *Maltreatment-Related Assessment*.

- » **Relative:** Any relative of the child who is the subject of referral. If the child lives with foster parents, and a relative of the foster parents reports maltreatment, specify under "Other."

Neighbour/friend: Includes any neighbour or friend of the child(ren) or his or her family.

- » **Social assistance worker:** Refers to a social assistance worker involved with the household.
- » **Crisis service/shelter:** Includes any shelter or crisis service for domestic violence or homelessness.
- » **Community/recreation centre:** Refers to any form of recreation and community activity programs (e.g., organized sports leagues or Boys and Girls Clubs).
- » **Hospital (any personnel):** Referral originates from a hospital and is made by a doctor, nurse, or social worker rather than a family physician or nurse working in a family doctor's office in the community.
- » **Community health nurse:** Includes nurses involved in services such as family support, family visitation programs, and community medical outreach.
- » **Community physician:** A report from any family physician with a single or ongoing contact with the child and/or family.
- » **Community mental health professional:** Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside a school/hospital/child welfare/*Youth Criminal Justice Act* (YCJA) setting.
- » **School:** Any school personnel (teacher, principal, teacher's aide, school social worker etc.).

- » **Other child welfare service:** Includes referrals from mandated child welfare service providers from other jurisdictions or provinces.

- » **Day care centre:** Refers to a child care or day care provider.
- » **Police:** Any member of a police force, including municipal or provincial/territorial police, or RCMP.
- » **Community agency:** Any other community agency/office or service.
- » **Anonymous:** A referral source who does not identify him- or herself.
- » **Other:** Specify the source of referral in the section provided (e.g., foster parent, store clerk, etc.).

Question 3: Please Describe Referral, Including Alleged Maltreatment, Injury, Risk of Maltreatment (if Applicable), and Results of Investigation

Provide a short description of the referral, including, as appropriate, the investigated maltreatment or the reason for a risk assessment, and major investigation results (e.g., type of maltreatment, substantiation, injuries). Please note in the text if the child's sexual orientation or gender identity was a contributing factor for the investigated parent-teen conflict.

Question 4: Which Approach to the Investigation Was Used?

Identify the nature of the approach used during the course of the investigation:

- » **A customized or alternate response** investigation refers to a less intrusive, more flexible assessment approach that focuses on identifying the strengths and needs of

the family, and coordinating a range of both formal and informal supports to meet those needs. This approach is typically used for lower-risk cases.

- » A **traditional child protection investigation** refers to the approach that most closely resembles a forensic child protection investigation and often focuses on gathering evidence in a structured and legally defensible manner. It is typically used for higher-risk cases or those investigations conducted jointly with the police.

Question 5: Caregiver(s) in the Home

Describe up to two caregivers in the home. Only caregiver(s) in the child's primary residence should be noted in this section. If both caregivers are equally engaged in parenting, identify the caregiver you have had most contact with as the primary caregiver. Provide each caregiver's gender and age category. Options include cisgender female or male, gender non-binary, transgender woman or man, and two spirit. If the caregiver does not identify as the options provided, please select another gender identity and indicate their identity in question 45 in the *Comments* section. Alternatively, if you are unsure about their gender identity, select "do not know."

If there was **only one caregiver in the home** at the time of the referral, check "no secondary caregiver in the home."

If there were no caregivers investigated, check "no caregiver investigated" and select the appropriate situation, either **a community caregiver investigation** (for investigations only involving a community caregiver, such as a teacher or athletic coach), or the **youth is living independently** (for investigations where the youth is living without a caregiver).

Question 6: List All Children in the Home (<18 Years)

Include biological, step-, adoptive and foster children.

- a. **First initial only of child:** List a pseudonym first letter for *all children (<18 years) in the home at time of referral*.
- b. **Age of child:** Indicate the age of each child living in the home at the time of the referral.
- c. **Gender of child:** Indicate the gender of each child living in the home at the time of the referral.
- d. **Primary caregiver's relationship to child:** Indicate the primary caregiver's relationship to each child.
- e. **Secondary caregiver's relationship to child:** Indicate the secondary caregiver's relationship to each child (if applicable). Describe the secondary caregiver only if the caregiver is in the home.
- f. **Subject of referral:** Indicate which children were noted in the initial referral.
- g. **Was child investigated?:** Indicate whether the child was the focus of an investigation by indicating whether they were *investigated or not investigated*.

Question 8: Caregiver(s) Outside the Home

Identify any other caregivers living outside the home who provide care to any of the children in the household, including a separated parent who has any access to the children. Check all that apply.

Definitions: Household Information Section

The *Household Information* section focuses on the immediate household of the child(ren) who have been the subject of an investigation of an event or incident of maltreatment or for whom the risk of future maltreatment was assessed. The household is made up of all adults and children living at the

address of the investigation at the time of the referral. Provide information for the primary caregiver and the secondary caregiver if there are two adults/caregivers living in the household (the same caregivers identified in the *Intake Information* section).

If you have a unique circumstance that does not seem to fit the categories provided in the *Household Information* section, write a note in the *Comments* section under "Household information."

Questions A9–A14 pertain to the primary caregiver in the household. If there was a secondary caregiver in the household at the time of referral, you will need to complete questions B9–B14 for the secondary caregiver.

Question 9: Primary Income

We are interested in estimating the primary source of the caregiver's income. Choose the category that best describes the caregiver's source of income. **Note that this is a caregiver-specific question** and does not refer to a combined income from the primary and secondary caregiver.

- » **Full time:** Individual is employed in a permanent, full-time position.
- » **Part time (fewer than 30 hours/week):** Refers to a single part-time position.
- » **Multiple jobs:** Caregiver has more than one part-time or temporary position.
- » **Seasonal:** This indicates that the caregiver works at either full- or part-time positions for temporary periods of the year.
- » **Employment insurance:** Caregiver is temporarily unemployed and receiving employment insurance benefits.
- » **Social assistance:** Caregiver is currently receiving social assistance benefits.

- » **Other benefit:** Refers to other forms of benefits or pensions (e.g., family benefits, long-term disability insurance, child support payments).
- » **None:** Caregiver has no source of legal income. If drugs, prostitution, or other illegal activities are apparent, specify in the *Comments* section under "Household information."
- » **Unknown:** You do not know the caregiver's source of income.

Question 10: Ethno-Racial or Indigeneity Group

Examining the ethno-racial or indigeneity background can provide valuable information regarding differential access to child welfare services. Given the sensitivity of this question, this information will never be published out of context. This section uses a checklist of ethno-racial and Indigeneity categories used by Statistics Canada in the 2021 Census.

Endorse the ethno-racial or Indigeneity category that best describes the caregiver. Select "Other" if you wish to identify multiple ethno-racial groups, and specify in the space provided.

If Indigenous

- a. **On/off reserve:** Identify if the caregiver is residing "on" or "off" reserve.
- b. **Indigenous status:** First Nations status (caregiver has formal Indian or treaty status, that is registered with Crown-Indigenous Relations and Northern Affairs Canada [formerly INAC]), **First Nations non-status, Métis, Inuit**, or **Other** (specify and use the *Comments* section if necessary).

If, First Nations status or First Nations non-status, please indicate whether there was engagement with the First Nations Band, at which point the Band was contacted, and the nature of the engagement.

If Black

Identify the specific ethno-racial group of the caregiver and indicate whether there was an Anti-Black racism consultation.

If Latin American

Identify the specific ethno-racial group of the caregiver.

Question 11: Has This Caregiver Moved to Canada Within the Last 5 Years?

Identify whether or not the caregiver moved to Canada within the last five years. If you do not know this information, select "Unknown." If yes is selected, indicate whether they are an asylum seeker/refugee.

Question 12: Primary Language

Identify the primary language of the caregiver: English, French, or Other. If Other, please specify in the space provided. If bilingual, choose the primary language spoken in the home.

Question 13: Contact With Caregiver in Response to Investigation

Would you describe the caregiver as being overall cooperative or non-cooperative with the child welfare investigation? Check "Not contacted" in the case that you had no contact with the caregiver.

Question 14: Caregiver Risk Factors

These questions pertain to the primary caregiver and/or the secondary caregiver, and are to be rated as "Confirmed," "Suspected," "No," or "Unknown." Choose "Confirmed" if the risk factor has been **diagnosed, observed** by you or another worker or clinician (e.g., physician, mental health professional), or **disclosed** by the caregiver. "Suspected" means that, in your

clinical opinion, there is reason to suspect that the condition may be present, but it has not been diagnosed, observed, or disclosed. Choose "No" if you do not believe there is a problem and "Unknown" if you are unsure or have not attempted to determine if there was such a caregiver risk factor. Where applicable, use the **past six months** as a reference point.

- » **Alcohol abuse:** Caregiver abuses alcohol.
- » **Drug/solvent abuse:** Abuse of prescription drugs, illegal drugs, or solvents.*
- » **Cognitive impairment:** Caregiver has a cognitive impairment.
- » **Mental health issues:** Any mental health diagnosis or problem.
- » **Physical health issues:** Chronic illness, frequent hospitalizations, or physical disability.
- » **Few social supports:** Social isolation or lack of social supports.
- » **Victim of intimate partner violence:** During the past six months the caregiver was a victim of intimate partner violence, including physical, sexual, or verbal assault.
- » **Perpetrator of intimate partner violence:** During the past six months the caregiver was a perpetrator of intimate partner violence.
- » **History of foster care/group home:** Indicate if this caregiver was in foster care and/or group home care during his or her childhood.

***If "Confirmed" or "Suspected" is chosen for "Drug/solvent abuse," please specify the drug abuse categories:**

- » Cannabis (e.g., marijuana, hashish, hash oil)

- » Opiates, Opioids, and morphine derivatives (e.g., codeine, fentanyl, heroine, morphine, opium, oxycodone)
- » Depressants (e.g., barbiturates, benzodiazepines such as Valium, Ativan)
- » Stimulants (e.g., cocaine, amphetamines, methamphetamines, Ritalin)
- » Hallucinogens (e.g., acid, LSD, PCP)
- » Solvents/Inhalants (e.g., glue, paint thinner, paint, gasoline, aerosol sprays)

Question 15: Child Custody Dispute

Specify if there is an ongoing child custody/access dispute at this time (**court application has been made or is pending**).

Question 16: Housing

Indicate the housing category that best describes the living situation of this household at the time of referral.

- » **Own home:** A purchased house, condominium, or townhouse.
- » **Rental:** A private rental house, townhouse, or apartment.
- » **Public housing:** A unit in a public rental-housing complex (i.e., rent subsidized, government-owned housing), or a house, townhouse, or apartment on a military base. Exclude Band housing in a First Nations community.
- » **Band housing:** Indigenous housing built, managed, and owned by the band.
- » **Living with friends/family:** Living with a friend or family member.

- » **Hotel:** An SRO (single room occupancy) hotel or motel accommodation.
- » **Shelter:** A homeless or family shelter.
- » **Unknown:** Housing accommodation is unknown.
- » **Other:** Specify any other form of shelter.

Question 17: Number of Moves in Past Year

Based on your knowledge of the household, indicate the number of household moves within the **past 12 months**.

Question 18: Home Overcrowded

Indicate if the household is overcrowded in your clinical opinion.

Question 19: Housing Safety

- a. Are there unsafe housing conditions?** Indicate if there were unsafe housing conditions at the time of referral. Examples include mold, broken glass, inadequate heating, accessible drugs or drug paraphernalia, poisons or chemicals, and fire or electrical hazards.

Question 20: In the Last 6 Months, the Household Has Struggled to Pay for:

- a. Food:** Indicate if the household struggled to pay for food at any time in the last 6 months.
- b. Housing:** Indicate if the household struggled to pay for housing at any time in the last 6 months.
- c. Utilities:** Indicate if the household struggled to pay for utilities at any time in the last 6 months (e.g., heating, electricity).

- d. Telephone/cell phone:** Indicate if the household struggled to pay for a telephone or cell phone bill at any time in the last 6 months.
- e. Transportation:** Indicate if the household struggled to pay for transportation related expenses (e.g., transit pass, car insurance) at any time in the last 6 months.
- f. Medical care (includes dental and mental health):** Indicate if the household struggled to pay for medical care at any time in the last 6 months.

If yes to any of the above, indicate whether the family was provided with any financial/material assistance by the agency.

Question 21: Case Previously Opened for Investigation

Case previously opened for investigation: Has this family been previously investigated by a child welfare agency/office? Respond if there is documentation, or if you are aware that there has been a previous investigation. Estimate the number of previous investigations. This would relate to investigations for any of the children identified as living in the home (listed in the *Intake Information section*).

- a. How long since the case was closed?** How many months between the date the case was last closed and this current investigation's opening date? Please round the length of time to the nearest month and select the appropriate category.

Question 22: Case Will Stay Open for Ongoing Child Welfare Services

At the time you are completing the *OIS Maltreatment-Related Assessment*, do you plan to keep the case open to provide ongoing child welfare services?

Question 23: Referral(s) for Any Family Member

- a.** Indicate whether a referral(s) has been made for any family member to an internal (provided by your agency/office) or external service(s) (other agencies/services).

If "no" is chosen, please specify the reasons (check all that apply):

- » **Already receiving services – not within the child welfare agency:** Family member(s) is currently receiving services external to the child welfare agency and so referring to further services is unnecessary.
- » **Already receiving services – file transferred to ongoing services:** Family member(s) has been transferred to ongoing child welfare services.
- » **Service not available in the area:** Relevant services are not available within a reasonable distance of travel.
- » **Ineligible for service:** Family member(s) is ineligible for relevant service (e.g., child does not meet age criterion for a particular service).
- » **Services could not be financed:** Family does not have the financial means to enroll family member(s) in the service.
- » **Service determined not to be needed:** Following your clinical assessment of the family, you determined services were not necessary for any family member.
- » **Refusal of services: You attempted to refer the family to services, but they refused** to move forward with enrolling in or seeking out services.
- » **There is an extensive waitlist for services: Based on your knowledge of an** extensive waitlist for the appropriate service, you decided not to make a referral.

- » No culturally appropriate services: Culturally appropriate services are not available within a reasonable distance of travel.

If “yes” is chosen, please specify the type of referral(s) made (check all that apply):

- » **Parent education or support services:** Any program/ service designed to offer support or education to parents (e.g., parenting instruction course, home-visiting program, Parents Anonymous, Parent Support Association).
- » **Family or parent counselling:** Any type of family or parent counselling (e.g., couples or family therapy).
- » **Drug/alcohol counselling or treatment:** Addiction program (any substance) for caregiver(s) or child(ren).
- » **Psychiatric/mental health services:** Child(ren) or caregiver(s) referral to mental health or psychiatric services (e.g., trauma, high-risk behaviour or intervention).
- » **Intimate partner violence services:** Referral for services/counselling regarding intimate partner violence, abusive relationships, or the effects of witnessing violence.
- » **Welfare or social assistance:** Referral for social assistance to address financial concerns of the household.
- » **Food bank:** Referral to any food bank.
- » **Shelter services:** Referral for services regarding intimate partner violence or homelessness.
- » **Housing:** Referral to a social service organization that helps individuals access housing (e.g., housing help centre).
- » **Legal:** Referral to any legal services (e.g., police, legal aid, lawyer, family court).

- » **Child victim support services:** Referral to a victim support service (e.g., sexual abuse disclosure group).
- » **Special education placement:** Referral to any specialized school program to meet a child's educational, emotional, or behavioural needs.
- » **Recreational services:** Referral to a community recreational program (e.g., organized sports leagues, community recreation, Boys and Girls Clubs).
- » **Medical or dental services:** Referral to any specialized service to address the child's immediate medical or dental health needs.
- » **Speech/language:** Referral to speech/language services (e.g., speech/language specialist).
- » **Child or day care:** Referral to any paid child or day care services, including staff-run and in-home services.
- » **Cultural services:** Referral to services to help children or families strengthen their cultural heritage.
- » **Immigration services:** Referral to any refugee or immigration service.
- » **Other:** Indicate and specify any other child- or family-focused referral.

If “yes” is chosen, indicate what was specifically done with respect to the referral (check all that apply):

- » **Suggested they should get services:** You described relevant services to the family member(s) and suggested that they enroll.
- » **Provided them with names and numbers of service providers:** You gave the family member(s) names and contact information of potentially relevant service providers.

- » **Assisted them with completing/filling application:** You helped the family member(s) to apply for services.
- » **Made appointment for that person:** You contacted the service provider directly and made an appointment for the family member(s).
- » **Accompanied them to the appointment:** You went with the family member(s) to the relevant service provider.
- » **Followed-up with family to see if the service was provided:** Following what you estimated to be the service provision period, you contacted the family member(s) to see if the service was provided.
- » **Followed-up with internal/ external service(s) to confirm if the service was provided:** Following what you estimated to be the service provision period, you contacted the service provider(s) to see if the service was provided.

Definitions: Child Information Section

Question 24: Child Gender

The gender of the child for whom the *Child Information* section is being completed will be automatically populated from the information you provided in the *Intake Information* section.

For children over the age of 10, please indicate the child's sexual orientation.

Question 25: Child Age

The age of the child for which the *Child Information* section is being completed will be automatically populated from the information you provided in the *Intake Information* section.

Question 26: Child Ethno-Racial Group

Examining the ethno-racial background can provide valuable information regarding differential access to child welfare services. Given the sensitivity of this question, this information will never be published out of context. This section uses a checklist of ethno-racial categories used by Statistics Canada in the 2021 Census.

Select the ethno-racial category that best describes the child. Select "Other" if you wish to identify multiple ethno-racial groups, and specify in the space provided.

Question 27: Child Indigenous Status

If the child is Indigenous, indicate the Indigenous status of the child for which the *Child Information* section is being completed: **First Nations status** (child has formal Indian or treaty status, that is, is registered with Crown-Indigenous Relations and Northern Affairs Canada [formerly INAC]), **First Nations non-status, Métis, Inuit**, or **Other** (specify and use the *Comments* section if necessary).

Question 28: Child Functioning

This section focuses on issues related to a child's level of functioning. Select "Confirmed" if the problem has been **diagnosed, observed** by you or another worker or clinician (e.g., physician, mental health professional), or **disclosed** by the caregiver or child. Suspected means that, in your clinical opinion, there is reason to suspect that the condition may be present, but it has not been diagnosed, observed, or disclosed. Select "No" if you do not believe there is a problem and "Unknown" if you are unsure or have not attempted to determine if there was such a child functioning issue. Where appropriate, use the **past six months** as a reference point.

- » **Positive toxicology at birth:** When a toxicology screen for a newborn tests positive for the presence of drugs or alcohol.

- » **FASD:** Birth defects, ranging from mild intellectual and behavioural difficulties to more profound problems in these areas related to in utero exposure to alcohol abuse by the biological mother.

- » **Failure to meet developmental milestones:** Children who are not meeting their developmental milestones because of a non-organic reason.

- » **Intellectual/developmental disability:** Characterized by delayed intellectual development, it is typically diagnosed when a child does not reach his or her developmental milestones at expected times. It includes speech and language, fine/gross motor skills, and/or personal and social skills (e.g., Down syndrome, Autism Spectrum Disorder).

- » **Attachment issues:** The child does not have physical and emotional closeness to a mother or preferred caregiver. The child finds it difficult to seek comfort, support, nurturance, or protection from the caregiver; the child's distress is not ameliorated or is made worse by the caregiver's presence.

- » **ADHD:** ADHD is a persistent pattern of inattention and/or hyperactivity/impulsivity that occurs more frequently and more severely than is typically seen in children at comparable stages of development. Symptoms are frequent and severe enough to have a negative impact on the child's life at home, at school, or in the community.

- » **Aggression/conduct issues:** Aggressive behaviour directed at other children or adults (e.g., hitting, kicking, biting, fighting, bullying) or violence to property at home, at school, or in the community.

- » **Physical disability:** Physical disability is the existence of a long-lasting condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. This includes sensory

disability conditions such as blindness, deafness, or a severe vision or hearing impairment that noticeably affects activities of daily living.

- » **Academic/learning difficulties:** Difficulties in school including those resulting from learning difficulties, special education needs, behaviour problems, social difficulties, and emotional or mental health concerns.

- » **Depression/anxiety/withdrawal:** Feelings of depression or anxiety that persist for most of the day, every day for two weeks or longer, and interfere with the child's ability to manage at home and at school.

- » **Self-harming behaviour:** Includes high-risk or life-threatening behaviour and physical mutilation or cutting.

- » **Suicidal thoughts:** The child has expressed thoughts of suicide, ranging from fleeting thoughts to a detailed plan.

- » **Suicide attempts:** The child has attempted to commit suicide.

- » **Inappropriate sexual behaviour:** Child displays inappropriate sexual behaviour, including age-inappropriate play with toys, self, or others; displaying explicit sexual acts; age-inappropriate sexually explicit drawings and/or descriptions; sophisticated or unusual sexual knowledge; or prostitution or seductive behaviour.

- » **Running (multiple incidents):** The child has run away from home (or other residence) on multiple occasions for at least one overnight period.

- » **Alcohol abuse:** Problematic consumption of alcohol (consider age, frequency, and severity).

- » **Drug/solvent abuse:** Include prescription drugs, illegal drugs, and solvents.

- » **Youth Criminal Justice Act involvement:** Charges, incarceration, or alternative measures with the youth justice system.
- » **Other:** Specify any other conditions related to child functioning; your responses will be coded and aggregated.

Question 29: Type of Investigation

Indicate the type of investigation conducted: *investigated incident of maltreatment or risk investigation only*.

An *investigated incident of maltreatment* includes situations where (1) maltreatment was alleged by the referral source, or (2) you suspected an event of maltreatment during the course of the investigation.

A *risk investigation only* includes situations where there were no specific allegations or suspicions of maltreatment during the course of the investigation and, at its conclusion, the focus of your investigation was the assessment of future risk of maltreatment (e.g., include referrals for parent-teen conflict; child behaviour problems; caregiver behaviour such as substance abuse). Investigations for risk may focus on risk of several types of maltreatment (e.g., parent's drinking places child at risk for physical abuse and neglect, but no specific allegation has been made and no specific incident is suspected during the investigation).

Please note: all **injury** investigations are investigated incident of maltreatment investigations.

Question 30: Maltreatment Codes

The maltreatment typology in the *OIS-2018* uses five major types of maltreatment: *Physical Abuse*, *Sexual Abuse*, *Neglect*, *Emotional Maltreatment*, and *Exposure to Intimate Partner Violence*. These categories are comparable to those used in the previous cycles of the Ontario Incidence Study. Rate cases **on the basis of your clinical opinion**, not on provincial or agency/office-specific definitions.

Enter the applicable maltreatment code numbers from the list provided under the five major types of maltreatment (1–33) in the boxes under Question 30. Enter in the first box the maltreatment code that **best characterizes** the investigated maltreatment. If there are multiple types of investigated maltreatment (e.g., physical abuse *and* neglect), choose one maltreatment code within each typology that best describes the investigated maltreatment. **All major forms** of alleged, suspected or investigated maltreatment should be noted in the maltreatment code box **regardless of the outcome of the investigation**.

Physical Abuse

The child was physically harmed or could have suffered physical harm as a result of the behaviour of the person looking after the child. Include any alleged physical assault, including abusive incidents involving some form of punishment. If several forms of physical abuse are involved, please **identify the most harmful form**.

- 1. Shake, push, grab or throw:** Include pulling or dragging a child as well as shaking an infant.
- 2. Hit with hand:** Include slapping and spanking, but not punching.
- 3. Punch, kick or bite:** Include as well any hitting with parts of the body other than the hand (e.g., elbow or head).
- 4. Hit with object:** Include hitting with a stick, a belt, or other object, and throwing an object at a child, but do not include stabbing with a knife.
- 5. Choking, poisoning, stabbing:** Include any other form of physical abuse, including choking, strangling, stabbing, burning, shooting, poisoning, and the abusive use of restraints.
- 6. Other physical abuse:** Other or unspecified physical abuse.

Sexual Abuse

The child has been sexually molested or sexually exploited. This includes oral, vaginal, or anal sexual activity; attempted sexual activity; sexual touching or fondling; exposure; voyeurism; involvement in prostitution or pornography; and verbal sexual harassment. If several forms of sexual activity are involved, please **identify the most intrusive form**. Include both intra-familial and extra-familial sexual abuse, as well as sexual abuse involving an older child or youth perpetrator.

- 7. Penetration:** Penile, digital, or object penetration of vagina or anus.
- 8. Attempted penetration:** Attempted penile, digital, or object penetration of vagina or anus.
- 9. Oral sex:** Oral contact with genitals either by perpetrator or by the child.
- 10. Fondling:** Touching or fondling genitals for sexual purposes.
- 11. Sex talk or images:** Verbal or written proposition, encouragement, or suggestion of a sexual nature (include face to face, phone, written, and Internet contact, as well as exposing the child to pornographic material).
- 12. Voyeurism:** Include activities where the alleged perpetrator observes the child for the perpetrator's sexual gratification. Use the "Exploitation" code if voyeurism includes pornographic activities.
- 13. Exhibitionism:** Include activities where the perpetrator is alleged to have exhibited himself or herself for his or her own sexual gratification.
- 14. Exploitation:** Include situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.

- 15. Other sexual abuse:** Other or unspecified sexual abuse.

Neglect

The child has suffered harm or the child's safety or development has been endangered as a result of a failure to provide for or protect the child.

- 16. Failure to supervise: physical harm:** The child suffered physical harm or is at risk of suffering physical harm because of the caregiver's failure to supervise or protect the child adequately. Failure to supervise includes situations where a child is harmed or endangered as a result of a caregiver's actions (e.g., drunk driving with a child, or engaging in dangerous criminal activities with a child).
- 17. Failure to supervise: sexual abuse:** The child has been or is at substantial risk of being sexually molested or sexually exploited, and the caregiver knows or should have known of the possibility of sexual molestation and failed to protect the child adequately.
- 18. Permitting criminal behaviour:** A child has committed a criminal offence (e.g., theft, vandalism, or assault) because of the caregiver's failure or inability to supervise the child adequately.
- 19. Physical neglect:** The child has suffered or is at substantial risk of suffering physical harm caused by the caregiver's failure to care and provide for the child adequately. This includes inadequate nutrition/clothing and unhygienic, dangerous living conditions. There must be evidence or suspicion that the caregiver is at least partially responsible for the situation.
- 20. Medical neglect (includes dental):** The child requires medical treatment to cure, prevent, or alleviate physical harm or suffering and the child's caregiver does not provide, or refuses, or is unavailable or unable to consent to the treatment. This includes dental services when funding is available.

- 21. Failure to provide psychological treatment:** The child is suffering from either emotional harm demonstrated by severe anxiety, depression, withdrawal, or self-destructive or aggressive behaviour, or a mental, emotional, or developmental condition that could seriously impair the child's development, and the child's caregiver does not provide, refuses to provide, or is unavailable or unable to consent to treatment to remedy or alleviate the harm. This category includes failing to provide treatment for school-related problems such as learning and behaviour problems, as well as treatment for infant development problems such as non-organic failure to thrive. A parent awaiting service should not be included in this category.
- 22. Abandonment:** The child's parent has died or is unable to exercise custodial rights and has not made adequate provisions for care and custody, or the child is in a placement and parent refuses/is unable to take custody.
- 23. Educational neglect:** Caregivers knowingly permit chronic truancy (5+ days a month), fail to enroll the child, or repeatedly keep the child at home.

Emotional Maltreatment

The child has suffered, or is at substantial risk of suffering, emotional harm at the hands of the person looking after the child.

- 24. Terrorizing or threat of violence:** A climate of fear, placing the child in unpredictable or chaotic circumstances, bullying or frightening a child, or making threats of violence against the child or the child's loved ones or objects.
- 25. Verbal abuse or belittling:** Non-physical forms of overtly hostile or rejecting treatment. Shaming or ridiculing the child, or belittling and degrading the child.

- 26. Isolation/confinement:** Adult cuts the child off from normal social experiences, prevents friendships, or makes the child believe that he or she is alone in the world. Includes locking a child in a room, or isolating the child from the normal household routines.
- 27. Inadequate nurturing or affection:** Through acts of omission, does not provide adequate nurturing or affection. Being detached and uninvolved or failing to express affection, caring, and love and interacting only when absolutely necessary.
- 28. Exploiting or corrupting behaviour:** The adult permits or encourages the child to engage in destructive, criminal, antisocial, or deviant behaviour.
- 29. Alienating the other parent:** Parent's behaviour signals to the child that it is not acceptable to have a loving relationship with the other parent or one parent actively isolates the other parent from the child. (E.g., the parent gets angry with the child when he/she spends time with the other parent; the parent limits contact between the child and the other parent; the parent inappropriately confides in the child about matters regarding the parents' relationship, financial situation, etc.)

Exposure to Intimate Partner Violence

The child has been exposed to violence between two intimate partners, at least one of which is the child's caregiver. If several forms of exposure to intimate partner violence are involved, please identify the most severe form of exposure.

- 30. Direct witness to physical violence:** The child is physically present and witnesses the violence between intimate partners.
- 31. Indirect exposure to physical violence:** The child overhears but does not see the violence between intimate partners; the child sees some of the immediate

consequences of the assault (e.g., injuries to the mother); or the child is told or overhears conversations about the assault.

- 32. Exposure to emotional violence:** Includes situations in which the child is exposed directly or indirectly to emotional violence between intimate partners. Includes witnessing or overhearing emotional abuse of one partner by the other.

- 33. Exposure to non-partner physical violence:** The child has been exposed to violence occurring between a caregiver and another person who is not the spouse/partner of the caregiver (e.g., between a caregiver and a neighbour, grandparent, aunt, or uncle).

Question 31: Alleged Perpetrator

This section relates to the individual(s) who is alleged, suspected, or guilty of maltreatment toward the child. Select the appropriate perpetrator for each form of identified maltreatment as the primary caregiver, secondary caregiver, or "Other perpetrator." Note that different people can be responsible for different forms of maltreatment (e.g., common-law partner abuses child, and primary caregiver neglects the child). If there are multiple perpetrators for one form of abuse or neglect, identify all that apply (e.g., a mother and father may be alleged perpetrators of neglect). Identify the alleged perpetrator regardless of the level of substantiation at this point of the investigation.

If Other Perpetrator

If Other alleged perpetrator is selected, please specify:

- a. Relationship:** Indicate the relationship of this "Other" alleged perpetrator to the child (e.g., brother, uncle, grandmother, teacher, doctor, stranger, classmate, neighbour, family friend).

- b. Age:** Indicate the age category of this alleged perpetrator. Age is essential information used to distinguish between child, youth, and adult perpetrators.

- c. Sex:** Indicate the sex of this alleged perpetrator.

Question 32: Substantiation

Indicate the level of substantiation at this point in your investigation. Each column reflects a separate form of investigated maltreatment. Therefore, indicate the substantiation outcome for each separate form of investigated maltreatment.

- » **Substantiated:** An allegation of maltreatment is considered substantiated if the balance of evidence indicates that abuse or neglect has occurred.
- » **Suspected:** An allegation of maltreatment is suspected if you do not have enough evidence to substantiate maltreatment, but you also are not sure that maltreatment can be ruled out.
- » **Unfounded:** An allegation of maltreatment is unfounded if the balance of evidence indicates that abuse or neglect has not occurred.

If the maltreatment was unfounded, answer 32 a).

- a. Was the unfounded report a fabricated referral?** Identify if this case was intentionally reported while knowing the allegation was unfounded. This could apply to conflictual relationships (e.g., custody dispute between parents, disagreements between relatives, disputes between neighbours).

Question 33: Was Maltreatment a Form of Punishment?

Indicate if the alleged maltreatment was a form of punishment for the child for each maltreatment code listed.

Question 34: Duration of Maltreatment

Indicate the duration of maltreatment, as it is known at this point in time in your investigation for each maltreatment code listed. This can include a single incident or multiple incidents.

Question 35: Police Involvement

Indicate the level of police involvement for each maltreatment code listed. If a police investigation is ongoing and a decision to lay charges has not yet been made, select the "Investigation" item.

Question 36: If Any Maltreatment Is Substantiated or Suspected, Is Mental or Emotional Harm Evident?

Indicate whether the child is showing signs of mental or emotional harm (e.g., nightmares, bed-wetting, or social withdrawal) following the maltreatment incident(s).

- a. If yes, child requires therapeutic treatment:** Indicate whether the child requires treatment to manage the symptoms of mental or emotional harm.

Question 37: Physical Harm

- a. Is physical harm evident?** Indicate if there is physical harm to the child. Identify physical harm even in accidental injury cases where maltreatment is unfounded, but the injury triggered the investigation.

If there is physical harm to the child, answer 37 b) and c).

- b. Types of physical harm:** Please check all types of physical harm that apply.
- » **Bruises/cuts/scrapes:** The child suffered various physical hurts visible for at least 48 hours.
 - » **Broken bones:** The child suffered fractured bones.
 - » **Burns and scalds:** The child suffered burns and scalds visible for at least 48 hours.
 - » **Head trauma:** The child was a victim of head trauma (note that in shaken-infant cases the major trauma is to the head, not to the neck).
 - » **Fatal:** Child has died; maltreatment was suspected during the investigation as the cause of death. Include cases where maltreatment was eventually unfounded.
 - » **Health condition:** Physical health conditions, such as untreated asthma, failure to thrive, or sexually transmitted infections (STIs).
- c. Was medical treatment required?** In order to help us rate the severity of any documented physical harm, indicate whether medical treatment was required as a result of the physical injury or harm.

Question 38: Is There a Significant Risk of Future Maltreatment?

Indicate, based on your clinical judgment, if there is a significant risk of future maltreatment.

Question 39: Previous Victimization

Was this child a previous victim of maltreatment: Please indicate whether the **individual child in question** has even been a victim of maltreatment prior to this investigation. Use "Unknown" if you are unaware of maltreatment history.

Question 40: Placement

- a. Placement during investigation:** Indicate whether an out-of-home placement was made during the investigation.

If there was a placement made during the investigation, answer 40 b) and c).

- b. Placement type:** Check one category related to the placement of the child. If the child is already living in an alternative living situation (emergency foster home, receiving home), indicate the setting where the child has spent the most time.
- » **Kinship out of care:** An informal placement has been arranged within the family support network; the child welfare authority does not have temporary custody.
 - » **Customary care:** Customary care is a model of Indigenous child welfare service that is culturally relevant and incorporates the unique traditions and customs of each First Nation.
 - » **Kinship in care:** A formal placement has been arranged within the family support network; the child welfare authority has temporary or full custody and is paying for the placement.
 - » **Foster care (non-kinship):** Include any family-based care, including foster homes, specialized treatment foster homes, and assessment homes.

- » **Group home:** All types of group homes, including those operating under a staff or parent model.
 - » **Residential/secure treatment:** A 24-hour residential treatment program for several children that provides room and board, intensive awake night supervision, and treatment services.
 - » **Other:** Specify any other placement type.
- c. Estimate the time it takes to travel between the child's residence and their placement:** Indicate the time it takes for travel by car between the child's primary residence and their placement.
- d. Did the child reunify?** Indicate whether the child's original caregiver resumed caregiving responsibilities over the course of the investigation.

Question 41: Child Welfare Court Application

Indicate whether a child welfare court application has been made. If investigation is not completed, answer to the best of your knowledge at this time.

- a. Referral to mediation/alternative dispute resolution:** Indicate whether a referral was made to mediation, family group conferencing, an Indigenous circle, or any other alternative dispute resolution (ADR) process designed to avoid adversarial court proceedings.

Question 42: Caregiver(S) Used Spanking in the Last 6 Months

Indicate if caregiver(s) used spanking in the last 6 months. Use "Suspected" if spanking could not be confirmed or ruled out. Use "Unknown" if you are unaware of caregiver(s) using spanking.

Definitions: *Comments and Other Information*

The *Comments* section provides space for additional comments about an investigation and for situations where an investigation or/assessment was unable to be completed for children indicated in 6a).

Frequently Asked Questions

1. For what cases should I complete an *OIS Maltreatment-Related Assessment*?

The Site Researcher will establish a process in your agency/office to identify to workers the openings or investigations included in the sample for the *OIS-2023*. Workers will be informed via email if any of their investigations will be included in the *OIS* sample.

2. When should I complete the *OIS Maltreatment-Related Assessment*?

Complete the *OIS Maltreatment-Related Assessment* at the same time that you prepare the report for your agency/office that documents the conclusions of the investigation (usually within 45~days of a case being opened for investigation).

3. Who should complete the *OIS Maltreatment-Related Assessment* if more than one person works on the investigation?

The *OIS Maltreatment-Related Assessment* should be completed by the worker who conducts the intake assessment and prepares the assessment or investigation

report. If several workers investigate a case, the worker with primary responsibility for the case should complete the *OIS Maltreatment-Related Assessment*.

4. What should I do if more than one child is investigated?

The *OIS Maltreatment-Related Assessment* primarily focuses on the household; however, the *Child Information* section is specific to the individual child being investigated. **A Child Information section will need to be completed for each child investigated for an incident of maltreatment or for whom you assessed the risk of future maltreatment.** If you had no maltreatment concern about a child in the home, and you did not conduct a risk assessment, then do not complete a *Child Information* section for that child.

5. Is this information confidential?

The information you provide is confidential. Access to data is severely limited. Data collected through the *OIS* website will be stored on a secure server at U of T in a secure setting and accessed through secure logins and connections. The final report will contain only provincial estimates of child abuse and neglect and will not identify any participating agency/office. **No participating agencies/sites or workers are identified in any of the study reports.** Please refer to the section above on confidentiality.

APPENDIX F: DESCRIPTION OF THE ESTIMATION PROCEDURES

Weighting

The data collected for the OIS-2023 were weighted in order to derive provincial, annual incidence estimates. Design weights were applied to each case selected in each sampled agency during the three-month case selection period. In order to increase the precision and accuracy of estimates for the overall agency volume for 2023, calibration factors based on known numbers of investigations were applied. This section provides a detailed description of the weighting procedures utilized for the OIS-2023. Please note *Table F-1* below for notation used.

TABLE F-1: Notation

h	stratum
i	agency
j	month
k	case
N_h	number of agencies in stratum h
n_h	number of selected agencies in stratum h
M_{hi}	number of months in the calendar year ($M_{hi} = 12$)
m_{hi}	number of selected months in the calendar year ($m_{hi} = 3$)
R_{hij}	number of cases in month j of agency i of stratum h
r_{hij}	number of selected cases in month j of agency i of stratum h
s_h	the sample of agencies in stratum h
s_{hi}	the sample of months for agency i in stratum h
s_{hij}	the sample of cases for month j of agency i in stratum h
y_{hijk}	the value of the variable of interest for case k of month j of agency i of stratum h

Design Weights

A design weight was assigned to each selected case of each sampled agency for the three months.

The design weight for case k in month j of agency i of stratum h is given by $d_{hijk} = \frac{N_h}{n_h} \frac{M_{hi}}{m_{hi}} \frac{R_{hij}}{r_{hij}}$.

Note that $\frac{M_{hi}}{m_{hi}} = 4$ for all strata h and selected agencies $i \in s_h$.

The Design-Based Estimator

The design-based estimator of the total $Y = \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk}$ is given by the following expression:

$$\hat{Y} = \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk}$$

The design-based variance of this estimator can be shown to be the following:

$$\begin{aligned} & \text{Var} \left(\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk} \right) \\ &= \sum_h N_h (N_h - n_h) \frac{S_h^2}{n_h} + \sum_h \frac{N_h}{n_h} \sum_{i \in U_h} M_{hi} (M_{hi} - m_{hi}) \frac{S_{hi}^2}{m_{hi}} + \sum_h \frac{N_h}{n_h} \sum_{i \in U_h} \frac{M_{hi}}{m_{hi}} \sum_{j \in U_{hi}} R_{hij} (R_{hij} - r_{hij}) \frac{S_{hij}^2}{r_{hij}} \\ & \text{where } S_{hij}^2 = \frac{1}{R_{hij} - 1} \sum_{k \in U_{hij}} (y_{hijk} - \bar{Y}_{hij})^2 \quad \text{with } \bar{Y}_{hij} = \frac{1}{R_{hij}} \sum_{k \in U_{hij}} y_{hijk} = \frac{Y_{hij}}{R_{hij}} \\ & \quad S_{hi}^2 = \frac{1}{M_{hi} - 1} \sum_{j \in U_{hi}} (Y_{hij} - \bar{Y}_{hi})^2 \quad \text{with } \bar{Y}_{hi} = \frac{1}{M_{hi}} \sum_{j \in U_{hi}} Y_{hij} = \frac{Y_{hi}}{M_{hi}} \\ & \quad S_h^2 = \frac{1}{N_h - 1} \sum_{i \in U_h} (Y_{hi} - \bar{Y}_h)^2 \quad \text{with } \bar{Y}_h = \frac{1}{N_h} \sum_{i \in U_h} Y_{hi} \end{aligned}$$

There are three terms in the variance formula that are important to consider for variance estimation:

S_{hij}^2 is the variance of the case values y_{hijk} within month j of agency i since \bar{Y}_{hij} is their population mean.

S_{hi}^2 is the variance of the monthly totals Y_{hij} in the calendar year of agency i if these totals were known for every month in the calendar year. Note that \bar{Y}_{hi} is simply the calendar year mean of these totals for agency i .

S_h^2 is the variance of the totals Y_{hi} over all agencies in stratum h if these totals were known for every agency i in the population. Note that \bar{Y}_h is simply the mean of these totals over all agencies in stratum h .

To obtain an estimate of this variance, each of the terms S_{hij}^2 , S_{hi}^2 and S_h^2 are replaced by their corresponding design-based estimates.

$$\begin{aligned}\hat{S}_{hij}^2 &= \frac{1}{r_{hij} - 1} \sum_{k \in S_{hij}} (y_{hijk} - \hat{Y}_{hij})^2 \quad \text{with} \quad \hat{Y}_{hij} = \frac{1}{r_{hij}} \sum_{k \in S_{hij}} y_{hijk} \\ \hat{S}_{hi}^2 &= \frac{1}{m_{hi} - 1} \sum_{j \in S_{hi}} (\hat{Y}_{hij} - \hat{Y}_{hi})^2 \quad \text{with} \quad \hat{Y}_{hij} = R_{hij} \hat{Y}_{hi} \quad \text{and} \quad \hat{Y}_{hi} = \frac{1}{m_{hi}} \sum_{j \in S_{hi}} \hat{Y}_{hij} \\ \hat{S}_h^2 &= \frac{1}{n_h - 1} \sum_{i \in S_h} (\hat{Y}_{hi} - \hat{Y}_h)^2 \quad \text{with} \quad \hat{Y}_{hi} = M_{hi} \hat{Y}_h \quad \text{and} \quad \hat{Y}_h = \frac{1}{n_h} \sum_{i \in S_h} \hat{Y}_{hi}\end{aligned}$$

Estimated design-based totals \hat{Y}_{hij} and \hat{Y}_{hi} are produced before calculating their respective means \hat{Y}_{hij} and \hat{Y}_h in the two terms \hat{S}_{hi}^2 and \hat{S}_h^2 . The resulting design-based formula for the estimated variance is the following:

$$\begin{aligned}Var(\hat{Y}) &= \sum_h N_h (N_h - n_h) \frac{\hat{S}_h^2}{n_h} + \sum_h \frac{N_h}{n_h} \sum_{i \in U_h} M_{hi} (M_{hi} - m_{hi}) \frac{\hat{S}_{hi}^2}{m_{hi}} + \sum_h \frac{N_h}{n_h} \sum_{i \in U_h} \frac{M_{hi}}{m_{hi}} \sum_{j \in U_{hi}} R_{hij} (R_{hij} - r_{hij}) \frac{\hat{S}_{hij}^2}{r_{hij}} \\ \text{where} \quad \hat{S}_{hij}^2 &= \frac{1}{r_{hij} - 1} \sum_{k \in S_{hij}} (y_{hijk} - \hat{Y}_{hij})^2 \quad \text{with} \quad \hat{Y}_{hij} = \frac{1}{r_{hij}} \sum_{k \in S_{hij}} y_{hijk} \\ \hat{S}_{hi}^2 &= \frac{1}{m_{hi} - 1} \sum_{j \in S_{hi}} (\hat{Y}_{hij} - \hat{Y}_{hi})^2 \quad \text{with} \quad \hat{Y}_{hij} = R_{hij} \hat{Y}_{hi} \quad \text{and} \quad \hat{Y}_{hi} = \frac{1}{m_{hi}} \sum_{j \in S_{hi}} \hat{Y}_{hij} \\ \hat{S}_h^2 &= \frac{1}{n_h - 1} \sum_{i \in S_h} (\hat{Y}_{hi} - \hat{Y}_h)^2 \quad \text{with} \quad \hat{Y}_{hi} = M_{hi} \hat{Y}_h \quad \text{and} \quad \hat{Y}_h = \frac{1}{n_h} \sum_{i \in S_h} \hat{Y}_{hi}\end{aligned}$$

Calibration Weights

Given that the total number of cases R_h for the entire year across all agencies in stratum h is known, this number can be calibrated. The design-based estimate of R_h is given by the following expression:

$$\hat{R}_h = \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} = \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} \frac{N_h}{n_h} \frac{M_{hi}}{m_{hi}} \frac{R_{hij}}{r_{hij}}$$

In general, \hat{R}_h will not equal R_h , this calibration equation is determined to obtain calibration weights $w_{hijk} = d_{hijk} g_{hijk}$ that satisfy the following:

$$\sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} = R_h$$

The terms g_{hijk} are the adjustment factors or g-weights. It is shown below that these are all the same and equal to R_h / \hat{R}_h . It is clear from the general form of the calibration equation that the auxiliary variable in this case is simply $x_{hijk} = 1$. From the general form of the calibration weights, for each selected case $k \in s_{hij}$ the following is obtained:

$$\begin{aligned}
 w_{hijk} &= d_{hijk} g_{hijk} \\
 &= d_{hijk} \left\{ 1 + (R_h - \hat{R}_h) \left(\sum_{i \in s_h} \sum_{j \in s_{hi}} \sum_{k \in s_{hij}} \frac{N_h}{n_h} \frac{M_{hi}}{m_{hi}} \frac{R_{hij}}{r_{hij}} x_{hijk} \right)^{-1} x_{hijk} \right\} \\
 &= d_{hijk} \left\{ 1 + (R_h - \hat{R}_h) \left(\sum_{i \in s_h} \sum_{j \in s_{hi}} \sum_{k \in s_{hij}} \frac{N_h}{n_h} \frac{M_{hi}}{m_{hi}} \frac{R_{hij}}{r_{hij}} \right)^{-1} \right\} \text{ since } x_{hijk} = 1 \\
 &= d_{hijk} \left\{ 1 + (R_h - \hat{R}_h) (\hat{R}_h)^{-1} \right\} \text{ by definition of } \hat{R}_h \\
 &= d_{hijk} \left\{ \frac{R_h}{\hat{R}_h} \right\}
 \end{aligned}$$

This means $g_{hijk} = R_h / \hat{R}_h$ for each selected case $k \in s_{hij}$. The adjustment factor is the same for every selected case in every month of every selected agency of stratum h .

The Calibration Estimator

The calibration equation is used in the derivation of the properties of the calibration estimator. A linear relationship is assumed between the variable of interest and the auxiliary variable.

$$y_{hijk} = x_{hijk} B_h + e_{hijk} \text{ for each } j \text{ and } k \text{ within a given } h$$

This linear relationship is not necessarily a model. Even though B_h is unknown, it can be regarded as a constant within each stratum h . Therefore, the residuals e_{hijk} are implicitly defined by the above representation through the difference $e_{hijk} = y_{hijk} - x_{hijk} B_h$. We do not need to know these residuals. We just need to know how to estimate them later when we consider the estimated variance of our calibration estimator.

The calibration estimator of the total $Y = \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk}$ is given by the following expression:

$$\begin{aligned}
\hat{Y}_C &= \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} y_{hijk} \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} y_{hijk} \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} (x_{hijk} B_h + e_{hijk}) \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} (B_h + e_{hijk}) \\
&= \sum_h B_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} + \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} e_{hijk} \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} e_{hijk}
\end{aligned}$$

The calibration equation in the above derivation is utilized for the estimator to reflect the calibration property. At this point, $\sum_h B_h R_h$ is a constant since each B_h is constant (although unknown) and R_h is constant and known. The variability in the estimator comes from the second term. This term can be further expanded to examine its properties:

$$\begin{aligned}
& \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} e_{hijk} \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} \left(1 + \left(\frac{R_h - \hat{R}_h}{\hat{R}_h} \right) \right) e_{hijk} \quad \text{since } w_{hijk} = d_{hijk} g_{hijk} = d_{hijk} \frac{\hat{R}_h}{\hat{R}_h} \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} + \sum_h \left(\frac{R_h - \hat{R}_h}{\hat{R}_h} \right) \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} + \sum_h \left(\frac{R_h - \hat{R}_h}{\hat{R}_h} \right) \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} (y_{hijk} - x_{hijk} B_h) \quad \text{since } e_{hijk} = y_{hijk} - x_{hijk} B_h \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} + \sum_h \left(\frac{R_h - \hat{R}_h}{\hat{R}_h} \right) \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} (y_{hijk} - B_h) \quad \text{since } x_{hijk} = 1 \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} \\
&\quad + \sum_h (R_h - \hat{R}_h) \left(\frac{1}{\hat{R}_h} \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk} - \frac{1}{\hat{R}_h} \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} B_h \right) \\
&= \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} + \sum_h (R_h - \hat{R}_h) (\hat{B}_h - B_h) \\
&\quad \text{since } \hat{R}_h = \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} \\
&\quad \text{and } \hat{B}_h = \left(\sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} x_{hijk} \right)^{-1} \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk} = \frac{1}{\hat{R}_h} \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk}
\end{aligned}$$

Using this last expression, the estimator \hat{Y} is as follows:

$$\begin{aligned}
\hat{Y}_C &= \sum_h B_h R_h + \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} w_{hijk} e_{hijk} \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} + \sum_h (R_h - \hat{R}_h) (\hat{B}_h - B_h)
\end{aligned}$$

The following observations can be made:

- » The first term $\sum_h B_h R_h$ is constant, so it has no variability due to sampling.

- » The middle term, $\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$, has a form similar to the design-based estimator with e_{hijk} replacing y_{hijk} .
- » The last term, $\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)$, is a sum over the strata of the product of two random variables $(R_h - \hat{R}_h)$ and $(\hat{B}_h - B_h)$. Notably, \hat{R}_h is unbiased for R_h while \hat{B}_h is approximately unbiased for B_h . Therefore, the random variable $(R_h - \hat{R}_h)(\hat{B}_h - B_h)$ will have an expected value close to 0 and the sum $\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)$ will also be close to 0. Furthermore, the random variable $\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)$ will be of lower order (or relatively smaller) than the middle term $\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$ when the sample sizes are sufficiently large.

An approximation to the expected value of the variance is examined.

$$\begin{aligned}
E(\hat{Y}_C) &= E\left(\sum_h B_h R_h + \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk} + \sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + E\left(\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}\right) + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} e_{hijk} + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} (y_{hijk} - B_h) + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} (y_{hijk} - B_h) + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk} - \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} B_h + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk} - \sum_h B_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} 1 + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h B_h R_h + \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk} - \sum_h B_h R_h + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right) \\
&= \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk} + E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right)
\end{aligned}$$

This shows that \hat{Y}_C is approximately unbiased for the population total $Y = \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk}$, where the bias is given by the expression $E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right)$. It is expected that this bias is close to 0 or relatively small in large samples. Therefore, this last term can be in the estimator \hat{Y}_C and work with its linearized form \hat{Y}_{Clim} given by the following expression:

$$\hat{Y}_{Clin} = \sum_h B_h R_h + \sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$$

The properties of estimator \hat{Y}_{Clin} should be similar to the properties of estimator \hat{Y}_C . \hat{Y}_{Clin} is unbiased for $Y = \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk}$ while \hat{Y}_C has a bias close to 0. It is expected that the variance of \hat{Y}_{Clin} is close to the variance of \hat{Y}_C . Since the first term is constant, the variance of \hat{Y}_{Clin} is simply the variance of $\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$. Thus overall: $Var(\hat{Y}_C) \cong Var(\hat{Y}_{Clin}) = Var\left(\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}\right)$. The variance of \hat{Y}_{Clin} has a familiar design-based look since the formula has the design weights instead of the calibration weights. We simply use e_{hijk} instead of y_{hijk} in the formula shown earlier for the variance of a 3-stage design under simple random sampling at each stage. The terms e_{hijk} are unknown but can be estimated from the sample.

To obtain the variance estimation, the following approach was applied.

In each stratum h , estimate B_h by \hat{B}_h was given by the following expression.

$$\hat{B}_h = \left(\sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} x_{hijk} \right)^{-1} \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk} = \frac{1}{\hat{R}_h} \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} y_{hijk}$$

In each stratum h , the following estimates of e_{hijk} for all units (cases) k were calculated:

$$\hat{e}_{hijk} = y_{hijk} - x_{hijk} \hat{B}_h$$

In each stratum h , product u_{hijk} for all units (cases) k was calculated:

$$u_{hijk} = g_{hijk} \hat{e}_{hijk} = \frac{R_h}{\hat{R}_h} \hat{e}_{hijk}$$

Now replace y_{hijk} by u_{hijk} in the design-based formula for the estimated variance. Calculate the corresponding components keeping in mind the ideas described earlier on their interpretation. At the end, you will get the required estimate for the variance of the calibration estimator.

To obtain the domain estimation of a total, first, y_{hijk} is replaced by a new domain dependent variable $y_{(d)hijk}$ with the following definition over all units (cases) in the sample.

$$y_{(d)hijk} = \begin{cases} y_{hijk} & \text{if } k \in U_d \\ 0 & \text{if } k \notin U_d \end{cases}$$

Then continue as before to produce the point estimate and the variance estimate.

Sample Error Estimation

The following is a description of the method employed to develop the sampling error estimation for the OIS-2023, as well as the variance estimates and confidence intervals for the OIS-2023 estimates. Variance estimates are provided for select tables in this report.

A multi-stage sampling design was used, first to select a representative sample of 20 child welfare agencies across Ontario, and then to sample cases within these agencies. The OIS-2023 estimates are based on a relatively large sample of 6,799 child maltreatment-related investigations; sampling error is primarily driven by the variability between the 20 participating agencies. The size of this sample ensures that estimates for figures such as the overall rate of reported maltreatment,

substantiation rate, and major categories of maltreatment have a reasonable margin of error. However, the margin of error increases for estimates involving less frequent events.

Sampling error estimates were calculated to reflect the fact that the survey population had been randomly selected from across the province. Standard error estimates were calculated for select variables at the $p < 0.05$ level. Appendix F tables provide the margin of error for selected OIS-2023 estimates. For example, the estimated number of child maltreatment investigations in Ontario is 117,527. The lower 95 per cent confidence interval is 114,408 child investigations and the upper confidence interval is 120,646 child investigations. This means that there is a 95 per cent chance that the true number of investigations is between 114,408 and 120,646.

Most coefficients of variation were in the acceptable and reliable level, with the exception of low frequency events. Estimates that

should be interpreted with caution include informal kinship care (18.10). There were estimates that had CVs over 33 that should be interpreted with extreme caution (e.g., placement in group home/residential secure treatment estimates).

The error estimates do not account for any errors in determining the design and calibration weights, nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from agency to agency. The error estimates also cannot account for any variations due to seasonal effects. The accuracy of these annual estimates depends on the extent to which the sampling period is representative of the whole year.

The following are select variance estimates and confidence intervals for OIS-2023 variables of interest. Each table reports the estimate, standard error, coefficient of variation, lower and upper confidence intervals.

TABLE F3-1A: Number and Rate of Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Number of Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Number of Investigations	117,527	1,591	1.35	114,408	120,646
Rate per 1,000 children	48.80	0.66		47.51	50.09

TABLE F3-2: Age of Children in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Child Age Group	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
<1 year	5,827	366.96	6.30	5,108	6,546
Rate per 1,000 children	45.90	2.89		40.23	51.57
1-3 years	18,007	716.54	3.98	16,603	19,412
Rate per 1,000 children	43.75	1.74		40.34	47.16
4-7 years	33,247	580.98	1.75	32,109	34,386
Rate per 1,000 children	55.78	0.97		53.87	57.69
8-11 years	31,897	697.98	2.19	30,529	33,265
Rate per 1,000 children	50.76	1.11		48.58	52.94
12-15 years	28,549	663.29	2.32	27,249	29,849
Rate per 1,000 children	44.23	1.03		42.21	46.24

TABLE F3-3: Substantiation Decisions in Ontario in 2018

Maltreatment and Risk Only Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Substantiated Maltreatment	39,236	1,282.18	3.27	36,723	41,749
Rate per 1,000 children	16.29	0.53		15.25	17.34
Risk of Future Maltreatment	4,382	521.79	11.91	3,359	5,405
Rate per 1,000 children	1.82	0.22		1.39	2.24

TABLE F3-4A: Referral Source in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Referral Source	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Any Non-Professional	23,219	989.45	4.26	21,280	25,158
Rate per 1,000 children	9.64	0.41		8.84	10.45
Any Professional	90,113	1,764.94	1.96	86,654	93,573
Rate per 1,000 children	37.42	0.73		35.98	38.85
Other/Anonymous	6,482	631.88	9.75	5,244	7,721
Rate per 1,000 children	2.69	0.26		2.18	3.21

TABLE F3-5: Provision of Ongoing Services Following an Investigation in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Provision of Ongoing Services	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Case to Stay Open for Ongoing Services	20,235	1,311.16	6.48	17,665	22,805
Rate per 1,000 children	8.40	0.54		7.34	9.47
Case to be Closed	97,292	1,330.98	1.37	94,683	99,901
Rate per 1,000 children	40.40	0.55		39.31	41.48

TABLE F3-6A: Placement in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Placement Status	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Remained at Home	113,705	1,712.05	1.51	110,349	117,060
Rate per 1,000 children	4721	0.71		45.82	48.61
Informal kinship care	2,272	411.21	18.10	1,466	3,078
Rate per 1,000 children	0.94	0.17		0.61	1.28
Foster Care	1,336	192.30	14.39	959	1,713
Rate per 1,000 children	0.55	0.08		0.40	0.71
Group Home/Residential Secure Treatment	105	42.80	40.69	21	189
Rate per 1,000 children	0.04	0.02		0.01	0.08
Other	109	49.59	45.35	12	207
Rate per 1,000 children	0.05	0.02		0.01	0.09

TABLE F3-7: Applications to Child Welfare Court in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2023

Application to Child Welfare Court	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Application to Court	115,717	1,656.76	1.43	112,469	118,964
Rate per 1,000 children	48.05	0.69		46.70	49.40
Application Made	1,811	281.85	15.57	1,258	2,363
Rate per 1,000 children	0.75	0.12		0.52	0.98

