

Ontario Incidence Study of Reported Child Abuse and Neglect-2003 (OIS 2003)

Major Findings

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■ ACKNOWLEDGEMENTS

The Ontario Incidence Study of Reported Child Abuse and Neglect: 2002 (OIS-2003) is the result of a collaborative effort involving a province-wide team of child welfare workers, managers and researchers. In order to ensure coordination with its parent study, the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003), data collection for the OIS-2003 began on October 1, 2003. Despite increased demands on the Ontario child welfare system, front-line workers from across the province – with strong support from supervisors, clerical staff, and managers – rose to the challenge of completing the data collection instrument. The OIS-2003 response rate was well over 90%. Data collection instruments were completed with diligence and thoughtfulness. The OIS-2003 is first and foremost a study conducted for and by front-line workers from across the province.

The *OIS-2003* was conducted by a large team of researchers who demonstrated an exceptional ability to keep focused on the objectives of this collective effort while bringing to bear their own expertise. In addition to the report authors, special acknowledgement should go to site-based researchers who played a critical role in presenting the study and generating support while maintaining high standards for case selection. These researchers are Corbin Shangreux, Daniel Moore, Heidi Kiang, Katharine Dill, Marlyn Bennett, Theresa Knott, Valerie Gaston, Victor Montgomery, Richard De Marco, Maria Mulloy, and Lil Tonmyr (see Appendix A for institutional affiliations).

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■ DEDICATION

This report is dedicated to the children and families who are served by Ontario child welfare workers. It is our sincere hope that the study contributes to improving the well-being of these children and families.

In memory of Dan Offord, who was committed to reducing the burden of suffering of children and their families.

■ EXECUTIVE SUMMARY OIS-2003

The Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-2003) is the third provincial study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by Ontario child welfare services. The OIS-2003 tracked 7,172 child maltreatment investigations conducted in a representative sample of 16 Child Welfare Service Areas across Ontario in the fall of 2003. Child welfare workers completed a three-page standardized data collection form. Weighted provincial annual estimates were derived based on these investigations. The following considerations should be noted in interpreting OIS statistics:

- the study is limited to reports investigated by child welfare services and do not include reports that were screened out, cases that were only investigated by the police and cases that were never reported;
- the study is based on the assessments provided by the investigating child welfare workers and were not independently verified;
- because the study is not designed to conduct regional comparisons, variations in rates of investigated maltreatment across Ontario cannot be examined;
- all estimates are weighted annual estimates for 2003 presented either as a count of child maltreatment investigations (e.g., 12,300 child maltreatment investigations) or as the annual incidence rate (e.g., 3.1 per 1,000 children); and,
- there are many reasons explaining the overall increase in rates of investigated or substantiated maltreatment from 1998 and 2003, including changes in reporting or investigation practices.

Investigated and substantiated maltreatment

An estimated 128,108 child investigations were conducted in the Ontario. Forty-four percent of these investigations were substantiated, involving an estimated 58,425 child investigation, an incidence rate of 24.44 substantiated investigations per 1,000 children. In a further 10% of investigations there was insufficient evidence to substantiate maltreatment, however, maltreatment remained suspected by the investigating worker. Forty-six percent of investigations were unsubstantiated.¹

¹ This rate of unsubstantiated cases is similar to or lower than rates reported in most jurisdictions and reflects laws that require the public and professionals to report all cases where they suspect maltreatment may have occurred. Most unsubstantiated cases are indeed reports made in good faith, only 5% of reports tracked by OIS-2003 were considered to have been made with malicious intent. (see Table 8-2(a) in *OIS-2003 Major Findings Report*.)

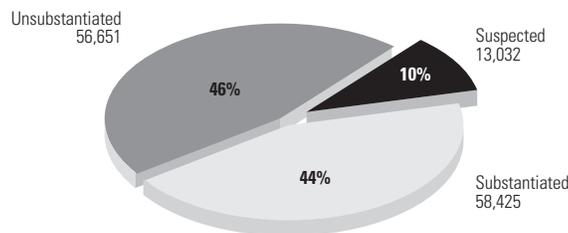
Table 1
Child Maltreatment Investigations by Level of Substantiation in Ontario in 2003*

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Child Investigations*	58,425	13,032	56,651	128,108
Incidence per 1,000 Children	24.44	5.45	23.70	53.59
Row Percentage	44%	10%	46%	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 7,172 child maltreatment investigations.

Figure 1
Child Maltreatment Investigations by Level of Substantiation in Ontario in 2003
OIS estimates based on a sample of 7,172 child maltreatment investigations



Source: Table 3-1

Categories of Maltreatment

Table 2 presents the primary categories of substantiated maltreatment in Ontario in 2003. Exposure to domestic violence was the most frequently substantiated category of maltreatment, nearly a third (32%) of all substantiated investigations involved exposure to domestic violence (an estimated 18,518 substantiated investigations, a rate of 7.75 per 1,000 children). Neglect was the second most common form of substantiated maltreatment in Ontario. Twenty-seven percent of all substantiated investigations involved neglect as the primary category of maltreatment, an estimated 15,660 neglect investigations at a rate of 6.55 substantiated investigations per 1,000 children. Physical Abuse followed closely, (an estimated 14,054 substantiated investigations, a rate of 5.88 per 1,000 children). Emotional maltreatment was the primary category of substantiated maltreatment in 15% of cases (an estimated 8,703 substantiated investigations, a rate of 3.64 per 1,000 children) while sexual abuse cases represented only 3% of all substantiated investigations (an estimated 1,490 substantiated investigations, a rate of 0.62 per 1,000 children).

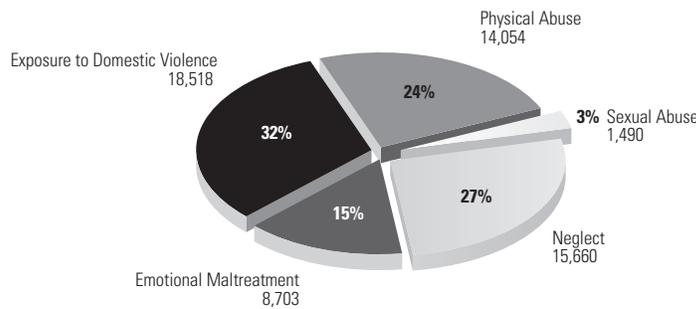
Table 2
Primary Category of Substantiated Child Maltreatment in Ontario in 2003*

	Primary Category of Substantiated Maltreatment					Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence	
Substantiated Child Investigations*	14,054	1,490	15,660	8,703	18,518	58,425
Incidence per 1,000 Children	5.88	0.62	6.55	3.64	7.75	24.44
Row Percentage	24%	3%	27%	15%	32%	101%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations.
** Rows add up to 101% because of rounding.

Figure 2
Primary Category of Substantiated Child Maltreatment in Ontario in 2003
OIS estimates based on a sample of 3,193 substantiated child maltreatment investigations



Source: Table 3-3

1993-1998-2003 Comparison

The rate of substantiated maltreatment in the OIS sample has increased 320%. This increase in documented maltreatment may be explained by improved and expanded reporting and investigation procedures such as (1) changes in case substantiation practices, (2) more systematic identification of victimized siblings, and (3) greater awareness of emotional maltreatment and exposure to domestic violence.

Figure 3
Incidence of Child Maltreatment Investigations in Ontario in 1993, 1998 and 2003



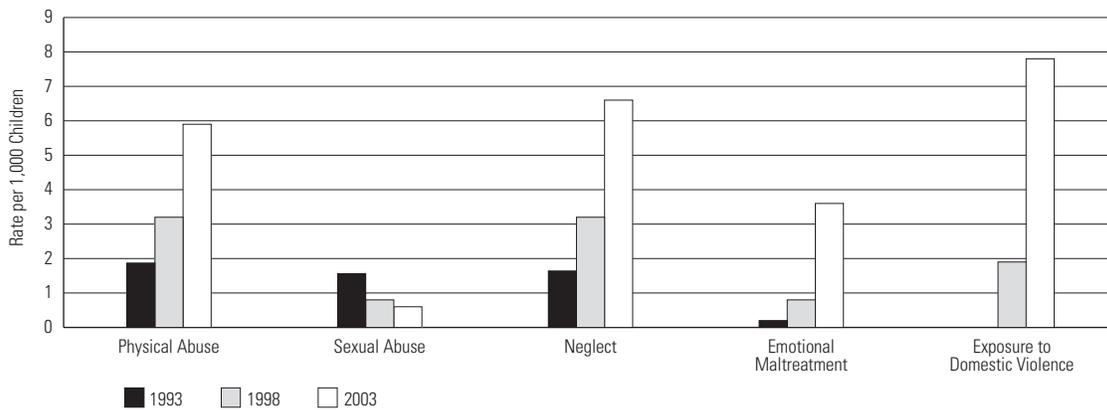
Source: Table 9-1

Part of the increase in substantiated cases seems to reflect a shift in the way child welfare workers classify cases, with a much smaller proportion of cases being classified as suspected, 10% in 2003 compared to 22% in 1998. The introduction of structured assessment tools and new competency-based training programs may account for part of this shift.

Better identification of victimized siblings is a second factor explaining the overall increase in substantiated child maltreatment investigations. The average number of investigated children per family has increased from 1.36 to 1.71 (see Table 9-2 in *OIS-2003 Major Findings Report*). As a result the number of investigated children has increased at a faster rate than the number of investigated families, which have increased 57.3% from an estimated 47,581 investigated families in 1998 to 74,857 in 2003.

The third and most important factor driving the increase in maltreatment cases is the dramatic increase of cases of exposure to domestic violence and emotional maltreatment (Figure 4). The rate of exposure to domestic violence has increased 319% from 1.85 substantiated cases per thousand to 7.75 and the rate of emotional maltreatment has increased 359% from 0.79 substantiated cases per thousand to 3.64. In 1998 these two forms of maltreatment accounted for 27% of substantiated cases. By 2003 they have come to account for 47% of cases. These differences reflect a shift in awareness with respect to the impact of emotional maltreatment and exposure to domestic violence on children. Increases in physical abuse and neglect were also evident, although the rate of increase was slower than for emotional maltreatment and exposure to domestic violence.

Figure 4
Incidence of Categories of Substantiated Maltreatment in Ontario in 1993, 1998 and 2003

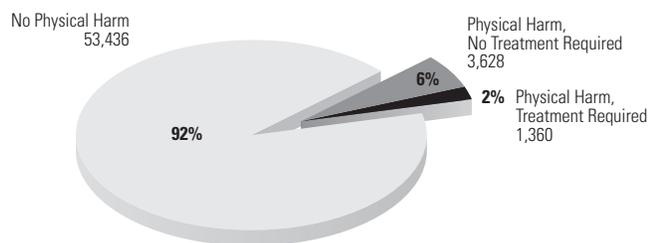


Source: Figure 9-2

Physical and Emotional Harm

Physical harm was identified in 8% of cases of substantiated maltreatment (Figure 5). In 6% of cases (an estimated 3,628 substantiated investigations) harm was noted but no treatment was considered to be required. In a further 2% of cases (an estimated 1,360 child investigations), harm was sufficiently severe to require medical treatment.

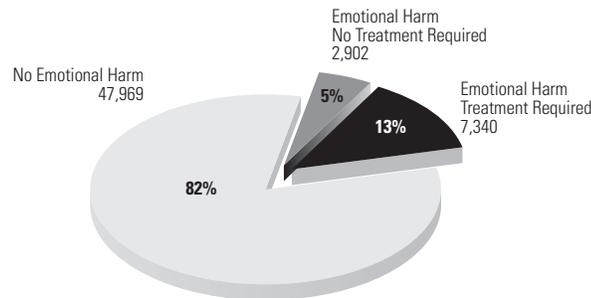
Figure 5
Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2003



Source: Table 4-1(a)

Information on emotional harm was collected using a series of questions asking child welfare workers to describe emotional harm that had occurred after the maltreatment incidents. Workers were asked to indicate whether the child was showing signs of mental or emotional harm (e.g., nightmares, bed wetting or social withdrawal). In order to rate the severity of mental/emotional harm, workers indicated whether therapeutic treatment was required in response to the mental or emotional distress shown by the child. Emotional harm was noted in 18% of all substantiated maltreatment investigations, involving an estimated 10,242 substantiated investigations. In 13% of substantiated cases symptoms were severe enough to require treatment (Figure 6).

Figure 6
Emotional Harm in Substantiated Child Maltreatment in Ontario in 2003



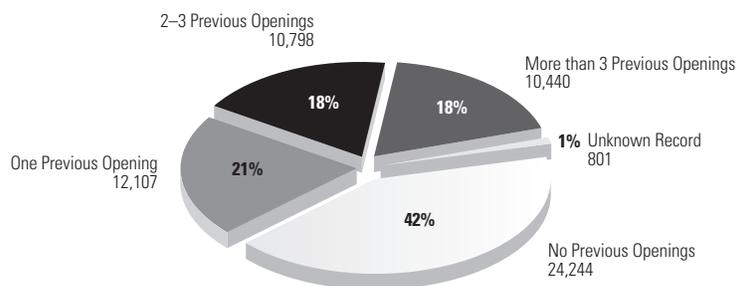
Source: Table 4-2

Service Dispositions

Service dispositions documented by the OIS-2003 include: (1) previous child welfare contact (2) provision of ongoing child welfare services; and (3) placement of children in out-of-home care. OIS service disposition statistics should be interpreted with care, however, because they track only case events that occurred during the initial child welfare investigation. Additional referrals for services and admissions to out-of-home care are likely to occur for cases kept open after the initial investigation.

Fifty-seven percent of substantiated investigations (an estimated 33,345 children) had had at least one previous case opening. Eighteen percent had more than three previous case openings (Figure 7).

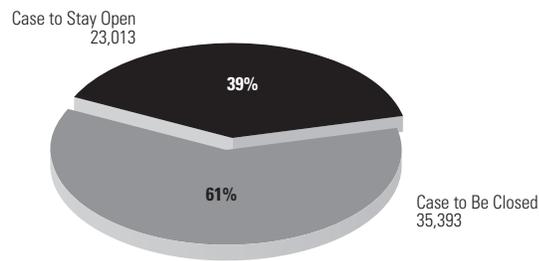
Figure 7
Previous Openings in Substantiated Child Maltreatment Investigations in Ontario in 2003



Source: Table 5-1(a)

An estimated 23,013 (39%) substantiated child maltreatment investigations were identified as remaining open for on-going services while an estimated 35,393 (61%) substantiated investigations were closed following investigation.

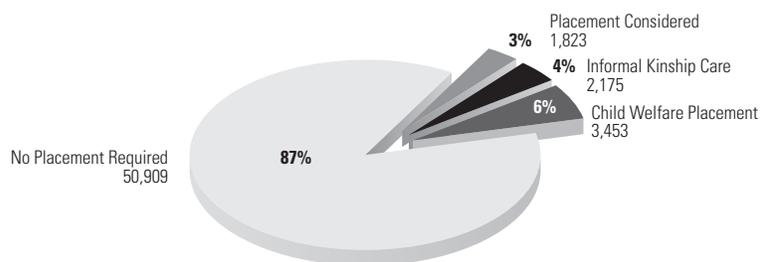
Figure 8
On-going Services in Cases of Substantiated Child Maltreatment Investigations in Ontario in 2003



Source: Table 5-2

Admissions to out-of-home care at any time during the investigation were tracked. Six percent of all substantiated child maltreatment investigations (an estimated 3,453) led to a child being placed in formal child welfare care. Four percent were placed in other family foster care during the initial investigation. Less than 1% of children with substantiated maltreatment investigations were placed in each of the three other placement settings (kinship foster care, group home or residential/secure treatment). An additional 4% of substantiated maltreatment investigations resulted in children being placed in informal kinship care, while placement was considered in a further 3% of substantiated child maltreatment investigations. In total, 10% percent of children experienced a change of residence during or at the conclusion of the initial substantiated maltreatment investigation. (Figure 9)

Figure 9
Placement in Out of Home Care in Substantiated Child Maltreatment Investigations in Ontario in 2003



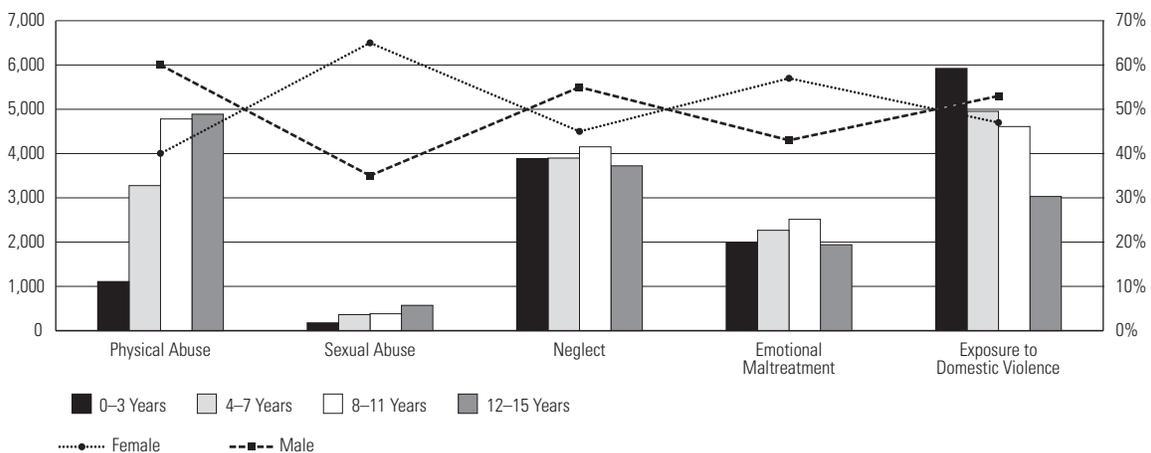
Source: Table 5-4

Child Characteristics

Figure 10 presents the age and sex of children by the primary category of substantiated maltreatment. While overall 47% of victims were girls, girls were a larger proportion of victims in cases of sexual abuse (65%) and emotional maltreatment (57%), whereas boys were more often victims in cases of physical abuse (60%), and neglect (55%).

There was relatively little variation in the age distribution of children in cases of emotional maltreatment and neglect. Older children were more often identified as victims of physical abuse and sexual abuse (69% of physical abuse victims and 64% of sexual abuse victims were between the ages of 8 and 15), whereas younger children were more often identified in cases of exposure to domestic violence (59% were 7 or under).

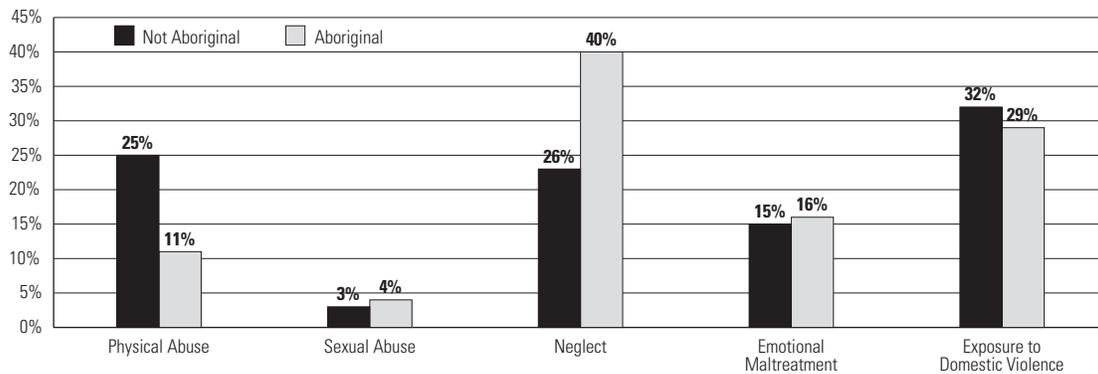
Figure 10
Age and Sex of Victims of Substantiated Child Maltreatment in Ontario in 2003



Source: Table 6-2

Aboriginal heritage was documented by the OIS-2003 in an effort to better understand some of the factors that bring children from these communities into contact with the child welfare system. Five percent of substantiated cases, an estimated 2,892 substantiated maltreatment investigations, involved children of Aboriginal heritage. Neglect was the most commonly noted primary form of substantiated maltreatment for Aboriginal children (40%). Exposure to domestic violence accounted for 29% of all cases of substantiated maltreatment for Aboriginal children. A smaller proportion of substantiated cases of physical abuse were noted among Aboriginal than Non-Aboriginal children. The most commonly noted primary form of substantiated maltreatment among Non-Aboriginal children was exposure to domestic violence (32%). Twenty-six percent and 25% of substantiated cases involving non-Aboriginal children were for neglect and physical abuse, respectively. Similar proportions of emotional maltreatment and sexual abuse were evident for Aboriginal and Non-Aboriginal children (Figure 11).

Figure 11
Primary Forms of Substantiated Maltreatment of Aboriginal and Non-Aboriginal Children in Ontario in 2003

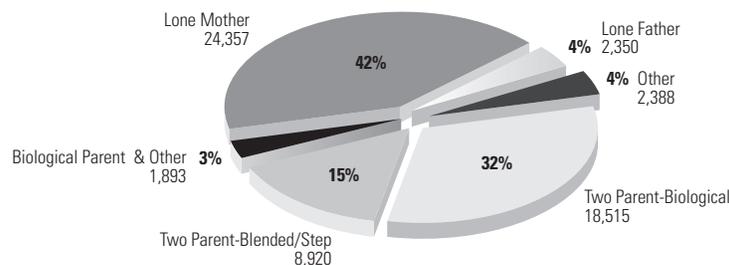


Source: Table 5-4

Household Characteristics

Thirty-two percent of substantiated investigations involved children who lived with their two biological parents, and 15% lived in a two-parent blended family in which one of the caregivers was a step-parent, a common-law partner, or an adoptive parent who was not the biological parent of at least one of the children in the family. Three percent of substantiated child investigations involved a biological parent living with another adult who also acted as a caregiver to the child (i.e., grandparent, aunt/uncle). Forty-six percent involved children who lived in a family led by a lone parent: 42% by a female parent and 4% by a male parent.

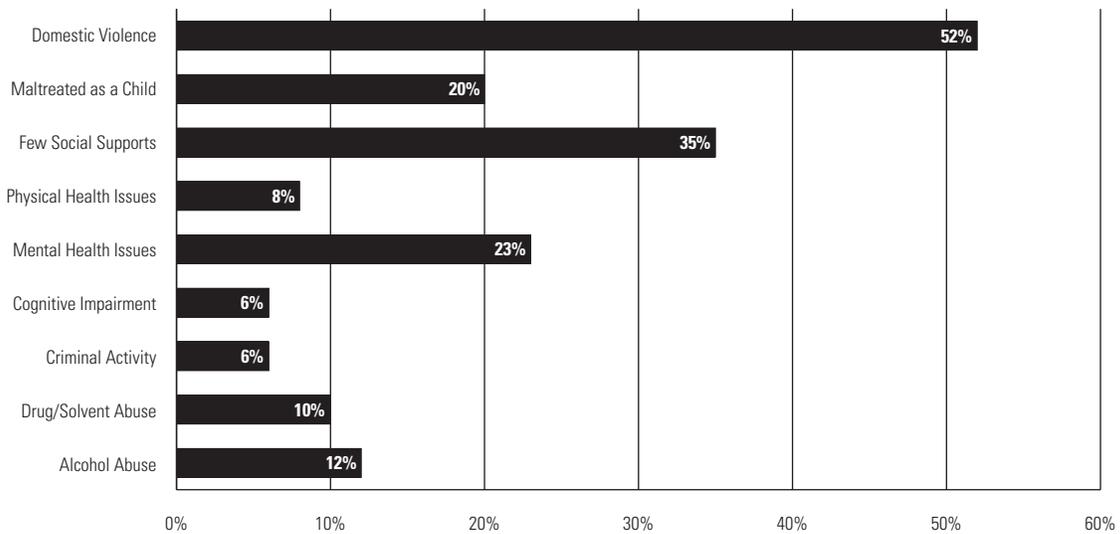
Figure 12
Parents of Victims of Substantiated Child Maltreatment in Ontario in 2003



Source: Table 7-1

A number of potential caregiver risk factors were tracked by the OIS-2003 by having participating child welfare workers complete a simple checklist of caregiver concerns that they had noted during the investigation. For 95% of substantiated cases, at least one female caregiver resided in the home. The three most frequently noted problems for mothers and other female caregivers were domestic violence (52%), lack of social supports (35%) and mental health issues (23%) (Figure 13a).

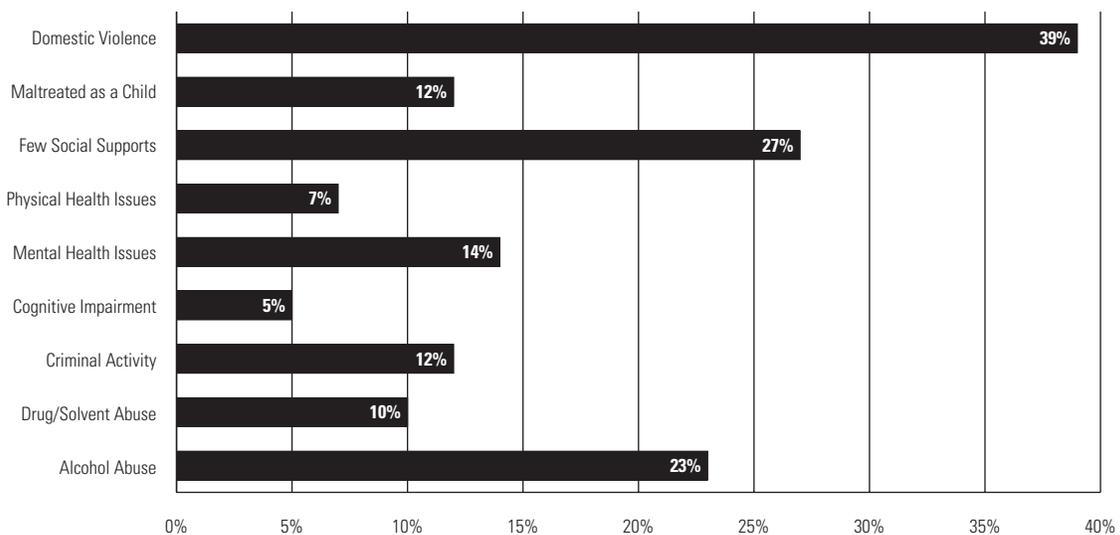
Figure 13a
Maternal Risk Factors for Victims of Substantiated Maltreatment in Ontario in 2003



Source: Table 7-9(a)

At least one male caregiver was in the home in 45% of cases of substantiated maltreatment. For fathers and other male caregivers the most frequently noted problems were domestic violence (39%), lack of social supports (27%) and alcohol abuse (23%), with mental health issues (14%) childhood maltreatment history (12%), and criminal activity (12%) noted in similar proportions (Figure 13b).

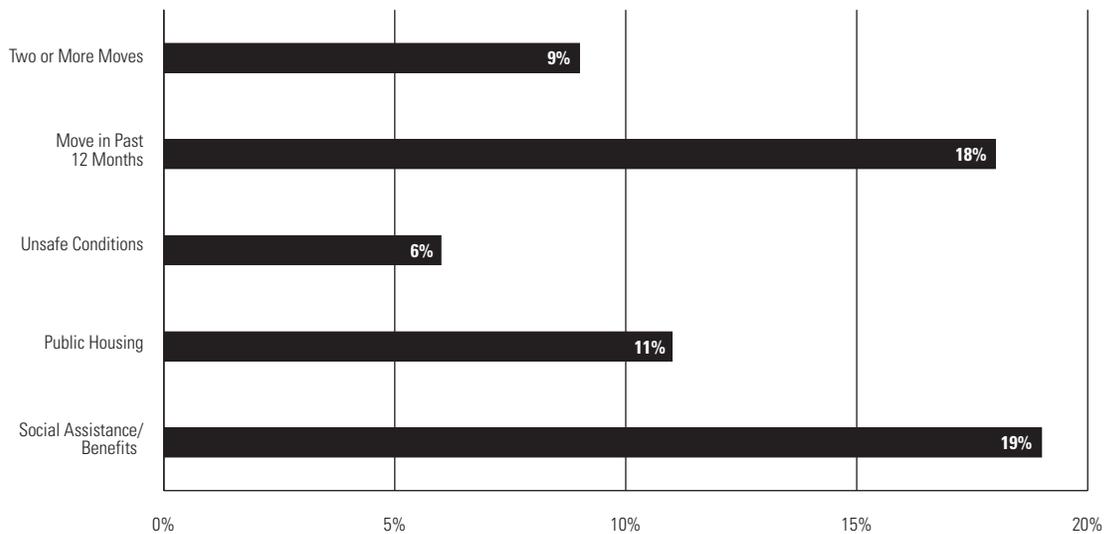
Figure 13b
Paternal Risk Factors for Victims of Substantiated Maltreatment in Ontario in 2003



Source: Table 7-9(b)

Household risk factors tracked by the OIS-2003 included housing and source of income.² Nineteen percent of households depended on social assistance or other benefits as their major source of income. Eleven percent lived in public housing, 6% were considered to be living in unsafe conditions, 18% had moved at least once in the past 12 months, 9% moved two or more times (Figure 14).

Figure 14
Household Risk Factors for Victims of Substantiated Maltreatment in Ontario in 2003



Source: Table 7-5, Table 7-6, Table 7-7, Table 7-8

Future Directions

The *OIS-2003 Major Findings Report* provides a second glance at the dramatic changes in child welfare services that have taken place across Ontario since 1993. In a period of ten years the number of investigations of suspected child abuse and neglect has almost tripled. While service providers across the province are keenly aware of the increase in the demand for child welfare services, the OIS-2003 provides a unique opportunity to examine these changes at the provincial level and to analyze them in far more detail than is possible using current provincial administrative information systems.

² A direct measure of poverty could not be tracked because most child welfare workers were unable to estimate family income.

The OIS-1993, OIS-1998 and OIS-2003 datasets will provide researchers across the province with the opportunity to examine in more detail the factors underlying the changes in reported and substantiated maltreatment. Given the changes in the types of maltreatment being reported, it will be particularly important to examine the 1998-2003 changes within each category of maltreatment, as well as changes occurring at the level of specific sub-forms of maltreatment. It will also be important to conduct analyses of trends specific to different age groups as well as to specific populations, such as children from Aboriginal backgrounds.

The preliminary analyses of the important changes that have occurred from 1993, 1998 and 2003 demonstrate the critical importance of public health datasets like the OIS. Findings from the previous two province-wide studies have already contributed to important policy changes in a number of jurisdictions across Ontario. The 2003 study provides the first opportunity to compare three points in time of provincial child welfare data. Plans are being developed for the fourth national cycle of the OIS to be conducted in 2008.

In addition to providing a periodic provincial data collection system, the OIS also supports Provincial efforts to better integrate their administrative information systems. With better-integrated information systems, jurisdictions across the province will be in a better position to learn from the diverse policies and programs that have been developed.

■ 1. INTRODUCTION

The following report presents the major descriptive findings from the *2003 Ontario Incidence Study of Reported Child Abuse and Neglect* (OIS-2003). The OIS-2003 is the third provincial study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by child welfare services in Ontario. The estimates presented in this report are based on information collected from child welfare investigators on a representative sample of over 7,172 child welfare investigations conducted across Ontario in 2003. The *OIS-2003 Major Findings Report* also includes selected comparisons with estimates from the 1993 and 1998 cycle of the study (Chapter 9).

This introduction presents the rationale and objectives of the study, provides an overview of the child welfare system in Ontario, describes the definitional framework used for the study, and outlines the organization of the report.

Background

In Ontario, child abuse and neglect statistics are kept by each child welfare agency and are not systematically aggregated and reported at the provincial level. Due to differences in information systems used by each agency and different procedures for counting cases, there has not been a history of aggregate provincial statistics. Furthermore, the amount of information collected is limited and varies from jurisdiction to jurisdiction.³

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 that was reported to, and investigated by, the child welfare system. The OIS-1993 was designed by Nico Trocmé and was partially based on the design of the U.S. National Incidence Studies.⁴ 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. In 2003 the Ontario Ministry for Children and Youth Services provided funding to augment the Public Health Agency of Canada's funding for the Ontario sample of the Canadian Incidence Study of Reported Child Abuse and Neglect. This additional funding allowed an enhanced sample sufficient to develop provincial estimates of investigated child abuse and neglect in Ontario in 2003.

3 Many information systems continue to lack the capacity to report the most basic information such as rates of substantiation and rates of injuries.

4 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.

Findings from the OIS-1993 and OIS-1998 have provided much needed information to service providers, policy makers and researchers seeking to better understand the children and families coming into contact with the child welfare system. The studies drew attention to the large number of neglect and emotional maltreatment cases that had not been previously identified as service priorities. A number of jurisdictions have used findings from the study to assist them in better adapting child welfare policies to address the array of difficulties faced by victims of maltreatment and their families.

Building on the success of the OIS-1993 and 1998, the OIS-2003 is an updated profile of maltreated children across Ontario and it provides an opportunity to examine changes in the profile of children and families reported to child welfare services (see Chapter 9 for comparisons between the OIS-1993, OIS-1998 and the findings of the OIS-2003).

Funding

The OIS-2003 is funded in part by the Public Health Agency of Canada, the Ontario Ministry of Children and Youth Services and by Bell Canada, through the Bell Canada Child Welfare Research Unit at the Faculty of Social Work, University of Toronto. Funding from the Public Health Agency of Canada was provided to gather information from a nationally representative sample of 63 child welfare service areas (CWSAs), including 8 from Ontario. An additional 8 CWSAs were funded by the provincial ministry. A child welfare service area is a geographic or administrative area served by a distinct child welfare office. In Ontario, a child welfare service area refers to a child welfare agency, often known as a Children's Aid Society.⁵

These same survey instrument and case selection procedures were applied in all sites.

In addition to direct funds received from federal and provincial sources, all participating agencies and offices contributed significant in-kind support, which included not only the time required for child welfare workers to attend training sessions, complete forms, and respond to additional information requests, but also coordinating support from team administrative staff, supervisors, and managers and data specialists.

Objectives and Scope of the OIS

The primary objective of the OIS-2003 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2003. A second objective of

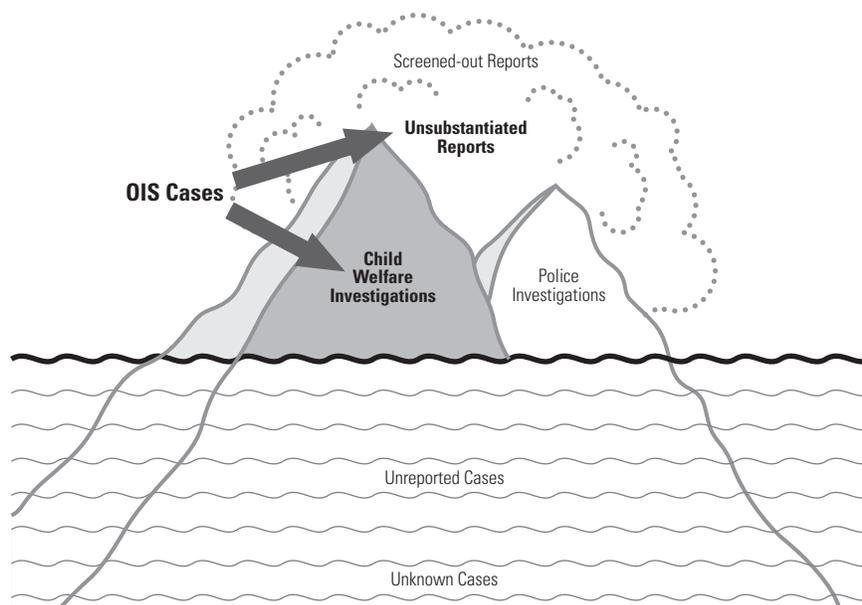
⁵ In some cases several agencies serve the same geographic area on the basis of children's religious or Aboriginal status. In such instances, all child welfare agencies sharing the same geographic boundaries are counted as a single child welfare service area. In the OIS-2003 there were 18 agencies that participated. These 18 agencies covered 16 CWSAs.

this project is to compare findings over time. As in the previous cycles of the *OIS*, cases tracked by the OIS-2003 study include substantiated, suspected and unsubstantiated investigations of reported child abuse and neglect, but do not include reports that are screened out before investigation or cases that are investigated only by the police (Figure 1-1). The OIS-2003 is not designed to document unreported cases (see Definitional Framework, Table 1-2 for a detailed presentation of the scope of the study).

Specifically, the OIS-2003 is designed to:

1. determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic 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, use of child welfare court, and criminal prosecution, and
5. compare 1993, 1998 and 2003 rates of substantiated physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence; the severity of maltreatment and short-term investigation outcomes.

Figure 1-1
Scope of the Ontario Incidence Study of Reported Child Abuse and Neglect, 2003



Child Welfare Services in Ontario

Child welfare legislation and services are organized at the provincial level. Child protection is a mandatory service, directed by provincial child protection statutes. Although all child welfare systems share certain basic characteristics organized around investigating reports of alleged maltreatment, providing various types of counseling and supervision, and looking after children in out-of-home care, there is considerable variation in the organization of these service delivery systems.

In Ontario, the *Child and Family Services Act* (CFSA) is the legislation promoting the best interests and protection of children. Alleged maltreatment is reported directly to a local Children's Aid Society or Child and Family Service Agency, a private non-profit organization funded by the provincial Ministry of Children and Youth Services. There are 53 agencies in Ontario that provide child protection services, and several of these agencies provide services to specific communities based on religious affiliation or aboriginal heritage. Children's aid societies are run and operated by a board of directors elected from the local community. The autonomous private service delivery supports the development of strong community links with innovative programs that reflect local needs.

For Aboriginal people in Ontario, the organization of child welfare services falls under provincial statute and regulation, although funding for on-reserve services is provided by the federal government under the *Indian Act*.⁶ The structure of Aboriginal child welfare services is changing rapidly. A growing number of services are being provided either by fully mandated Aboriginal agencies or by Aboriginal counseling services that work in conjunction with mandated services to reach Aboriginal families living on or off reserve.⁷

Definitional Framework for the OIS-2003

Statistics on child abuse and neglect are collected and reported in very different ways.⁸ Confusion can easily arise because of variations in the way a particular statistic is calculated. The following discussion and framework are provided to assist readers in interpreting the statistics included in this report.

Child abuse and neglect statistics can be misinterpreted because of two types of problems: confusion about the definitions of child abuse and neglect used, and misunderstanding of the case selection and reporting methods used. Definitional differences can have considerable impact on reported rates. For

6 *Indian Act*, R.S.C., 1985, CI-5, s.81.

7 Blackstock, C. (2003) First nations Child and Family Services: Restoring Peace and harmony in First Nations Communities. In Kufeldt, K. and McKenzie B. (Eds.). *Child Welfare: Connecting Research, Policy and Practice*. Waterloo: Wilfrid Laurier Press. pp. 331–343.

8 Trocmé N., McPhee D., et al. (1994) *Ontario incidence study of reported child abuse and neglect*. Toronto: Institute for the Prevention of Child Abuse.

Table 1-1
Child Protection Agencies in Ontario

Aboriginal Child and Family Services (Kenora)	Durham Children's Aid Society
Catholic Children's Aid Society of Hamilton	Family & Children's Services Niagara
Catholic Children's Aid Society of Toronto	Family & Children's Services of Renfrew County
Chatham-Kent Integrated Children's Service	Family and Children Services of St. Thomas and Elgin County
Child and Family Services of Timmins and District	Family and Children's Service of the Waterloo Region
Children's Aid Society for the Districts of Nipissing and Parry Sound	Family and Children's Services of Guelph & Wellington County
Children's Aid Society of Algoma	Family, Youth and Child Services of Muskoka
Children's Aid Society of Brant	Halton Children's Aid Society
Children's Aid Society of Haldimand & Norfolk	Hastings Children's Aid society
Children's Aid Society of Hamilton	Huron-Perth Children's Aid Society
Children's Aid Society of London and Middlesex	Jewish Family and Child Service of Toronto
Children's Aid Society of Northumberland	Kawartha-Haliburton Children's Aid Society
Children's Aid Society of Ottawa	Kenora-Patricia Child & Family Services
Children's Aid Society of Owen Sound and the County of Grey	Lennox & Addington Family & Children's Services
Children's Aid Society of Oxford County	Native Child and Family Services of Toronto
Children's Aid Society of the City of Kingston & County of Frontenac	Payukotayno: James and Hudson Bay Family Services
Children's Aid Society of the County of Bruce	Peel Children's Aid Society
Children's Aid Society of the County of Lanark and the Town of Smiths Falls	Rainy River Family and Children's Services
Children's Aid Society of the County of Simcoe	Sarnia-Lambton Children's Aid Society
Children's Aid Society of the District of Thunder Bay	Service Familiaux Jeanne Sauvé Family Services
Children's Aid Society of the Districts of Sudbury and Manitoulin	Services à l'enfance et à la famille du Timiskaming Child and Family Services
Children's Aid Society of Toronto	Services aux enfants et adultes de Prescott-Russell Services to Children and Adults
Children's Aid Society the County of Prince Edward	Stormont, Dundas and Glengarry Children's Aid Society
Children's Aid Society, City of Brockville & Counties of Leeds & Grenville	Tikinagan Child and Family Services Inc.
Dilico Ojibway Child and Family Services	Weechi-it-te-win Family Services Inc.
Dufferin Child and Family Services	Windsor-Essex Children's Aid Society
	York Region Children's Aid Society

example, in the U.S. *National Incidence Study of Child Abuse and Neglect-3 (1996)*, estimates of the number of physically neglected children were four times higher when the definition of physical neglect was expanded beyond the Evidence of Harm standard to include cases in which there was substantial risk of harm (Endangerment Standard).⁹ Similarly, estimates of the prevalence of child sexual abuse doubled when acts of exposure were included in the cross-Canada sexual abuse survey conducted for the federal Committee on Sexual Offences Against Children and Youths.¹⁰

Unfortunately, there is no consensus about definitions of child maltreatment. Definitions have been shown to vary on the basis of differences in legal mandates, professional practices, and social and cultural values. This lack of standards in defining child abuse and neglect has been repeatedly identified as a major obstacle in the development of child maltreatment research and practice.¹¹ Ontario has taken steps toward setting more explicit criteria for defining abuse and neglect, although the establishment of completely standardized definitions is constrained by the fact that, in practice, judgments about child maltreatment are shaped by a complex array of changing professional standards and community values.

Beyond differences between research and legal definitions, child welfare agencies and practitioners develop their own standards that do not necessarily reflect governing legislation. Furthermore, even within agencies there is evidence that, in practice, standards are influenced by factors such as neighbourhood characteristics.¹²

A second source of variation in maltreatment rates arises from differences in the way statistics are collected and reported. Child maltreatment statistics can end up measuring very different things, depending on who collects them and how they are collected. Some rates refer to the number of reported incidents; others refer only to allegations that have been substantiated by a thorough investigation. Some rates are based on annual incidence counts, whereas others measure childhood prevalence. These differences limit direct comparison of maltreatment statistics derived from different data sources. However, unlike the more intractable definitional problems, these issues can be resolved by clearly specifying case selection methods. Table 1-2 summarizes the challenges in comparing child maltreatment statistics by considering how they are affected by different case selection methods.

9 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.

10 Government of Canada. (1984) *Sexual offences against children: Report of the committee on sexual offences against children and youths* (vols 1 & 2). Ottawa: Canadian Government Publishing Centre.

11 National Research Council. (1993) *Understanding child abuse and neglect*. Washington, DC: National Academy Press.

12 Shor, R. (2000). Child Maltreatment: Differences in perceptions between low income and middle income neighbourhoods. *British Journal of Social Work*; 30, 165–178.

Table 1-2
Ontario Incidence Study of Reported Child Abuse and Neglect: Definitional Framework in 2003

	Definitional Problem	Measures Taken by OIS-2003
Source of Data	Statistics are rarely presented with sufficient detail to allow one to consider all the data collection issues.	<i>OIS-2003</i> data were collected from child protection workers upon completion of their initial investigation (time depends on provincial, regional, and site practices).
Forms of Maltreatment	Maltreatment statistics vary considerably with respect to the forms of maltreatment included.	The OIS-2003 includes 25 defined forms of maltreatment under five main categories: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence.
Multiple Forms of Maltreatment	Failure to document multiple forms of maltreatment can lead to underestimating some forms of maltreatment.	OIS-2003 documents up to three forms of maltreatment.
Level of Harm	Some statistics only include cases where children have been harmed; others include cases of harm and substantial risk of harm.	OIS-2003 includes cases where children are harmed as well as cases where children are at risk of harm. Physical and emotional harm are documented.
Timeframe	Research on child maltreatment can focus on the annual incidence, which is the number of cases in a single year; or, it can focus on childhood prevalence, which is the number of children maltreated during childhood.	The OIS-2003 measures the annual incidence of investigated maltreatment.
Reporting Year	Rates of reported maltreatment have been increasing steadily as public awareness of child abuse increases. Rates from two different years must be compared accordingly.	The reporting year for the OIS-2003 is 2003. Some data is compared with data from the OIS-1993 and OIS-1998.
Unit of Analysis	Child welfare investigations can use either a child-based or family-based method of tracking cases. For child-based, each investigated child is counted as a separate investigation, while for family-based investigations, the unit of analysis is the investigated family, regardless of the number of children investigated.	The OIS-2003 counts cases on the basis of child investigations
Duplication	Children investigated several times in a year are often counted as separate investigations. Approximately 20 per cent of investigations in a given year involve children investigated more than once.	The OIS-2003 estimates are not unduplicated. Children who are investigated twice during a year are counted as two separate child investigations.
Age Group	The age group of children investigated by child welfare services varies by province or territory.	OIS-2003 estimates are presented for children under 16 (Newborn to 15 inclusive).
Levels of Identification/ Substantiation	The point at which cases are being identified significantly affects child maltreatment estimates, given that many identified cases are not reported, many reported cases are not investigated, and many investigated cases are not substantiated.	OIS-2003 reports on cases investigated by child welfare authorities. A three-tiered definition of substantiation is used: (1) substantiated, (2) suspected, and (3) unfounded. Screened out or uninvestigated reports are not included.

Categories and Forms of Maltreatment

A first area 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 and emotional maltreatment, are not systematically included. There is even less consensus with respect to

subtypes or forms of maltreatment.¹³ For instance, some child welfare authorities include only intra-familial sexual abuse, the justice system dealing with cases of extra-familial sexual abuse.

The OIS-2003 definition of child maltreatment includes *25 forms of maltreatment* subsumed under *five categories* of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence.¹⁴ This classification reflects a fairly broad definition of child maltreatment and includes several forms of maltreatment that are not specifically stated in the *Child and Family Services Act* (e.g., educational neglect).

Documentation of *multiple forms* of maltreatment is also problematic. Many child welfare information systems have the capacity to classify cases only in terms of a single form of maltreatment. Systems that count only one form of maltreatment tend to under-count neglect and emotional maltreatment because these often appear in conjunction with abuse, but are generally considered less severe.¹⁵ The OIS-2003 is able to track up to three categories of maltreatment.

Level of Harm

There is some debate in the child maltreatment literature about defining maltreatment in terms of caregiver maltreating behaviours versus **actual harm** done to children as a result of abuse or neglect.¹⁶ Cases of maltreatment that draw public attention usually involve children who have been severely injured or, in the most tragic cases, have died as a result of maltreatment. In practice, child welfare agencies investigate and intervene in many situations in which children have not yet been physically harmed, but are **at risk of harm**. Many of these children display cognitive and emotional difficulties that are associated with maltreatment, but not necessarily a specific injury that has led to a report. The *Child and Family Services Act* covers both children who have suffered from demonstrable harm due to abuse or neglect, and children at risk of harm. The level or risk of harm required before an act is considered abusive is based upon the severity of the act. In cases of sexual abuse, for instance, evidence of harm to the child is not considered to be relevant, whereas in cases of physical abuse, especially in cases involving corporal punishment, physical injury is more closely tied to the determination of abuse. The third U.S. *National Incidence Study of Child Abuse and Neglect NIS-3 (1996)* includes two standards in calculating estimates of maltreatment: a narrow standard based on evidence of harm to the child,

13 Portwood, S. G. (1999). Coming to terms with a consensual definition of child maltreatment. *Child Maltreatment: Journal of the American Professional Society on the Abuse of Children*, 4(1), 56–68.

14 Given the expansion of domestic violence investigations, the OIS-2003 treats exposure to domestic violence as a separate maltreatment typology.

15 Cicchetti, D. (2004). An odyssey of discovery: Lessons learned through three decades of research. *American Psychologist*, 59(8), 731–741.

16 Portwood, S. G. (1999). Coming to terms with a consensual definition of child maltreatment. *Child Maltreatment: Journal of the American Professional Society on the Abuse of Children*, 4(1), 56–68.

and a broader standard that includes cases of children at risk of harm.¹⁷ The OIS-2003 documents both physical and emotional harm; however, definitions of maltreatment used for the study do not require the occurrence of harm.

Timeframe

Maltreatment statistics can also be misinterpreted because of confusion about the *timeframe* to which statistics refer. The most serious source of misunderstanding is the difference between annual incidence and childhood prevalence. For a given population, *childhood prevalence* refers to the number of people maltreated at any point during their childhood, whereas *annual incidence* refers to the number of child maltreatment investigations per 1,000 children in a given year. The relation between the two is complicated and is determined by the duration of maltreatment, the number of separate incidents, and the age at onset of the maltreatment. Although this use of the term “incidence” is common in child welfare, it is different from the way in which the term is used by epidemiologists, where incidence refers to the number of new events (e.g., new cases of a disease or disorder in a given population and time period).¹⁸ The OIS-2003 did not track new incidents of maltreatment on already open cases.

The *reporting year* can significantly affect documented rates of maltreatment, since reporting rates change over time. In Ontario, for example, there was a 44% increase in the number of cases of reported maltreatment between 1993 and 1998.¹⁹ The reporting year can also lead to confusion because some jurisdictions use the calendar year, whereas others refer to the fiscal year. OIS-2003 estimates were calculated for the calendar year from January 1 to December 31, 2003.

Unit of Analysis

The *unit of analysis* determines the denominator used in calculating maltreatment rates. Some statistics refer to the number of child investigations, but others refer to the number of family investigations. The relation between the two is unclear in some instances, because with *family-based* statistics it is difficult to determine how many children have been maltreated, particularly in cases of neglect. The OIS-2003 uses *child-based* statistics to be consistent with the way most child service statistics are kept (e.g., health, corrections, education, and foster care).

17 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.

18 Last, J.M. (1995). *A dictionary of epidemiology*, third edition. New York: Oxford University Press.

19 Trocmé, N., Fallon, B., MacLaurin, B. and Copp, B. (2002). *The Changing Face of Child Welfare Investigations in Ontario: Ontario Incidence Studies of Reported Child Abuse and Neglect (OIS-1993/1998)*, Toronto, ON: Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto.

Some jurisdictions provide child welfare services to families when there is no alleged maltreatment. These are referred to as *non-maltreatment* cases in the OIS-2003 (e.g., services for prenatal counseling and child behaviour problems) and are tracked separately as non-maltreatment case openings. The OIS-2003 reports only on child maltreatment investigations.

Consideration should also be given to the *age group* included in the child welfare statistics. OIS-2003 data are reported for children aged less than one to 15 years of age as mandated by the *Child and Family Services Act*.

Case Duplication

Most annual child welfare statistics are reported on the basis of the number of investigations, as opposed to the number of investigated children. Some investigations involve children who were previously investigated in the same year. Therefore, statistics based on the number of investigations double count children who are investigated twice in one year. Although each investigation represents a new allegation of maltreatment, confusion arises if these investigations are taken to represent an unduplicated count of children. To avoid such confusion, the OIS-2003 uses the term “child investigations” rather than “investigated children,” since the unit of analysis is the investigation of the child’s suspected maltreatment.

Most frequently child welfare data systems report numbers of investigations as opposed to investigated children. For example the U.S. *National Child Abuse and Neglect Data System (2003)* report,²⁰ states: “In the data presented in this report, a child is counted *every time* he or she is the subject of a substantiated or indicated report” (emphasis added). An estimate of how often maltreated children will be counted more than once, can be derived from those jurisdictions that maintain separate investigation and child-based counts. Rates of recurrence during a 12-month follow-up range from 5.2 per cent to 31 per cent.²¹ The U.S. *National Child Abuse and Neglect Data System (NCANDS)*,²² reports that for substantiated cases of child maltreatment, the recurrence rate is 8.4 per cent within 6 months during 2003. In Québec, the recurrence rate was 8.8 per cent of screened-in investigations over a 12-month period.²³

20 U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2005). *Child Maltreatment 2003*. Washington, DC: U.S. Government Printing Office.

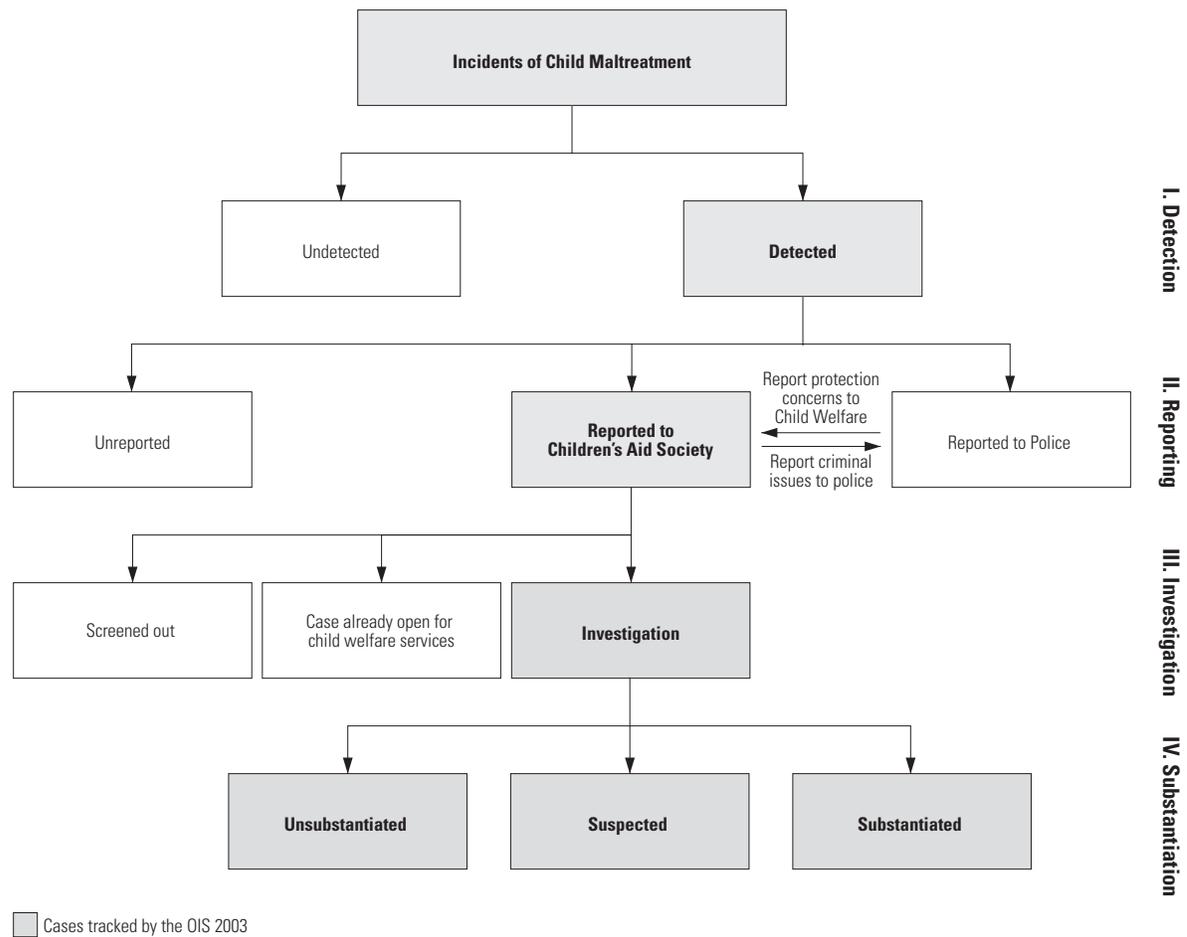
21 For example: Baird, S. C. (1988). Development of risk assessment indices for the Alaska Department of Health and Social Services. In T. Tatara (Ed.), *Validation research in CPS risk assessment: Three recent studies* (Occasional Monograph Series No. 2, pp. 84–142; Luttrell, J., Hull, S. & Wagner, D. (1995). *The Michigan Department of Social Services Structured DeOISion Making System: An evaluation of its impact on child protection services*. Paper presented at the Ninth National Roundtable on CPS Risk Assessment, San FranOISco. DePanfilis, D. & Zuravin, S. J. (1998). Rates, patterns, and frequency of child maltreatment recurrences among families known to CPS. *Child Maltreatment*, 3(1), 27–42.

22 U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2005). *Child Maltreatment 2003*. Washington, DC: U.S. Government Printing Office.

23 Hélie, S. (2005). *Fréquence et déterminants de la recurrence du signalement en protection de la jeunesse: Analyse de survie d'une cohorte Montréalaise*. Unpublished doctoral dissertation, Université du Québec à Montréal, Psychologie Department.

While all duplicate reports were removed from the OIS-2003 sample,²⁴ it was not possible to develop unduplicated child estimates for the whole year, because the annual investigation statistics used to derive the OIS-2003 annualization weights were investigation-based counts that included children investigated more than once in the given year.

Figure 1-2
Stages of Identification of Incidents of Child Maltreatment, OIS-2003



²⁴ Duplicate cases were screened for and deleted on site on the basis of agency identification numbers, family initials, and date of referral.

Level of Case Identification

A major source of variation in maltreatment statistics occurs with the ***level of identification and substantiation*** used. Figure 1-2 provides an illustration of four key stages in the case identification process: detection, reporting, investigation, and substantiation. There is considerable variation in child maltreatment statistics depending on the level of case identification. For example, several jurisdictions screen out a significant number of reports before conducting investigations.

Detection is the first stage in the case identification process. Little is known about the relation between detected and undetected cases. Surveys of adult survivors indicate that some have never disclosed their childhood experiences of abuse.²⁵

Reporting suspected maltreatment is required by law in Ontario. A number of studies of reporting practices have been conducted in the United States and show that as many as half of the cases of suspected maltreatment detected by professionals working with children are not reported to child welfare services.²⁶ The OIS-2003 does not document unreported cases.

It is also important to distinguish between cases reported to child welfare services and cases reported to the police. Although there is some overlap between these two groups (19% of substantiated OIS-2003 child maltreatment investigations were jointly investigated by child welfare services and the police), many cases involving alleged perpetrators outside the family (for example; a stranger exposing himself to a child) may involve only a police investigation and therefore may not be counted in child welfare investigation statistics. The OIS-2003 documents only cases investigated by child welfare, or cases jointly investigated by the police and child welfare services.

Investigation is a third stage in the case identification process and can lead to confusion when child maltreatment statistics are compared. As noted earlier, not necessarily all reports are investigated. Some may be screened out because there is not enough information about the whereabouts of a child to launch an investigation; others may be screened out because they are not considered to be within the defined mandate of the child welfare services. **Screening practices** in Ontario can vary from an informal and undocumented process to a structured, formal telephone investigation. The level of informal screening used in Ontario children's aid societies is not known. While the province-wide use of eligibility criteria has most likely helped standardize screening, research specifically addressing this issue has not yet been done. The OIS-2003 could not track screened-out cases.

25 For example: Finkelhor, D., Hotaling, G. et al. (1990). Sexual abuse in a national survey of adult men and women: prevalence, characteristics, and risk factors. *Child Abuse & Neglect*, 14(1):19–28.

Anderson, J. & Martin, J. (1993) *Woman's health survey*. Dunedin: Dunedin Public Hospital, Department of Psychological Medicine.

MacMillan, H., Jamieson, E., & Walsh, C. (2003) Reported contact with child protection services among those reporting child physical and sexual abuse: results from a community survey. *Child Abuse & Neglect*, 27(12):1397–1408

26 Zellman G. (1990). Report decision-making patterns among mandated child abuse reporters. *Child Abuse & Neglect*, 14(3):325–336.

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 addition to reports being screened out, reports received about cases already open for child welfare services may be investigated by the ongoing worker and may not be tracked as new investigations. The OIS-2003 did not track new incidents of maltreatment on already open cases.

Substantiation distinguishes cases in which maltreatment is confirmed, following an investigation, from cases in which it is not. Some jurisdictions use a two-tiered substantiation classification system that distinguishes between substantiated and unsubstantiated cases, or verified and not verified cases. The OIS-2003 uses a three-tiered classification system, 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.

Summary of OIS-2003 Definitional Framework

The OIS-2003 provides an estimate of the number of cases (child-based, under age 16) of alleged child maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence) reported to and investigated by Ontario child welfare services in 2003 (screened-out reports not included). The estimates are broken down in Chapter 3, into three levels of substantiation: substantiated, suspected, and unsubstantiated. With the exception of nine tables, estimates are limited to substantiated cases only. Cases opened more than once during the year are counted as separate investigations (see Table 1-2).

Organization of Report

The *OIS-2003 Major Findings Report* presents the major descriptive findings from the OIS-2003 and selected comparisons between OIS-1993, OIS-1998 and OIS-2003.

The main body of the *OIS-2003 Major Findings Report* is divided into nine chapters and 8 appendices. Detailed descriptive findings are provided for most of the variables from the OIS-2003 study. Chapter 2 describes the study’s methodology. Chapter 3 presents the estimates of the incidence of reported child maltreatment for each category of maltreatment by level of substantiation. Chapter 4 examines the characteristics of these different categories of substantiated maltreatment in terms of the nature, severity, and duration of injury, and the identity of the alleged perpetrators. Investigation outcomes, provision of services, placement, police involvement, and applications to court are presented in Chapter 5. Chapter 6 describes child characteristics, including categories of maltreatment by age and sex, and by child functioning. Chapter 7 describes household characteristics, including age and sex of caregivers, income and income source, housing accommodations, and other selected determinants of health (e.g., caregiver functioning, risk factors, and coping practices). Referral and agency characteristics are described in Chapter 8. The final chapter makes selected

comparisons between the findings from the OIS-1993, OIS-1998 and OIS-2003 studies as well as outlining directions for further research.

The **Appendices** include:

Appendix A: OIS-2003 Site Researchers

Appendix B: Glossary of Terms

Appendix C: Maltreatment Assessment Form

Appendix D: OIS/CIS Cycle II Guide Book

Appendix E: Case Vignettes

Appendix F: Worker Information Form

Appendix G: Variance Estimates and Confidence Intervals

Appendix H: Supporting Data for Additional Report Findings

■ 2. METHODOLOGY

The OIS-2003 is the third provincial study examining the incidence of reported child abuse and neglect in Ontario. The OIS-2003 captured information about children and their families as they came into contact with child welfare services over a three-month sampling period. Maltreated 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-2003 (see Chapter 1 for definitions of reported, non-reported, and screened-out cases).

A multi-stage sampling design was used, first to select a representative sample of 16 child welfare service areas across Ontario, and then to sample cases within these offices. Information was collected directly from the investigating workers and is based on the worker's judgment at the time of investigation. The OIS-2003 sample of 7,172 child maltreatment investigations was used to derive estimates of the annual rates and characteristics of investigated child maltreatment in Ontario.

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-2003 methodology and discusses its strengths, limitations, and impact on interpreting the OIS-2003 estimates. This chapter describes the OIS-2003 research network; its survey instruments; reliability and validity testing, focus group testing, the sample selection and enlistment strategies; the case selection, entry, and data verification procedures; and the statistical methods used for calculating national estimates.

Study Organization

The OIS-2003 was conducted as part of the *Canadian Incidence Study of Reported Child Abuse and Neglect, 2003 (CIS-2003)*, the second national maltreatment incidence study conducted in Canada (see Chapter 1). The study combines funds from the core study, funded by the Public Health Agency of Canada, with a research grant provided by the Ontario Ministry of Children and Youth Services.

Study Timeframe

The OIS-2003 was funded to begin in February 2003. The study was conducted in three phases over two and a half years. During the preparation phase (February 2003 to September 2003), the study instruments developed for the OIS-1998 were reviewed and tested, and the study sites were selected and enlisted. During the case selection phase (September 2003 to June 2004), participating child welfare workers were trained, and survey instruments were completed, collected, and verified. The final phase of the study (June 2004 to August 2005) involved entering the survey information into the OIS-2003 database, checking for inconsistent and missing information, conducting descriptive analysis, calculating the weighted estimates, and preparing reports.

Project Management Structure

The OIS-2003 was directed by a team of researchers affiliated with the Centre of Excellence for Child Welfare at the University of Toronto's Faculty of Social Work, including Nico Trocmé, Principal Investigator (McGill University), and Barbara Fallon and Joanne Daciuk, Project Co-managers (see Appendix A for a list of all site researchers). Sites in Ontario, participated under the direction of Nico Trocmé and the project managers. The University of Toronto research team also directed the national component of the study in collaboration with the Injury and Child Maltreatment Section, Public Health Agency of Canada (see *CIS-2003 Major Findings Report* for further details about the organization of the national component of the study).

Ethics Procedures

The OIS-2003 protocols and procedures were reviewed and approved by the University of Toronto's Ethics Committee and Public Health Agency of Canada Research Ethics Board prior to the commencement of data collection. Written permission for participating in the data collection process was obtained from the Provincial/Territorial Directors of Child Welfare as well as from the agency administrator or director. Where a participating site had an ethics review process, the study was also evaluated by the individual agency/office.

The study utilized a case file review methodology. The case files are the property of the delegated agency/office or regional authority. Therefore, the permission of the agency/office was required in order to access the case files. Confidentiality of case information and participants including workers and agencies was maintained throughout the process. No directly identifying information was collected on the data collection instrument. The *Intake Face Sheet* collects near-identifying information about the children's first name and their age. The tear-off portion of the *Intake face Sheet* (the bottom of the first page of the instrument) has a space for the service case number the agency/office assigns and the research case number that the OIS-2003 study researchers assigned and also provided space for the first two letters of the family surname. Workers provided the address of the family or postal code for the primary residence. This information was used for only verification purposes. The near-identifying information was stored at the agency/office.

The data collection instruments (that contained no directly-identifying information) were scanned into an electronic database. This electronic data was stored on a locked, password protected hard drive in a locked office and on a CD stored in a locked cabinet off-site. Only those University of Toronto research personnel with security clearance from the Government of Canada had access to this information through password-protected files. All paper data collection instruments are archived in a secure filing cabinets, approved by the RCMP.

The final report contains provincial estimates of child abuse and neglect and does not identify any participating agency/office.

Instruments

The survey instruments used in the *OIS-2003/CIS-2003* were designed to capture standardized information from child welfare workers conducting investigations. Because investigation procedures vary across Canada (see Chapter 1), a key challenge in designing the study survey instruments was to identify the common elements across jurisdictions that could provide data in a standardized manner. Given the time constraints faced by child welfare workers, the instruments also had to be kept as short and simple as possible.

The *OIS-2003/CIS-2003* instruments were based on the *Ontario Incidence Study* (1994) and the U.S. *National Incidence Study (1996)*²⁷ in order to maximize the potential for comparing the *OIS* findings with findings from these studies. Comparability with previous studies remained a key priority of the *CIS-2003* and the *OIS-2003*. The data collection instrument was modified from the *CIS-1998* and *OIS-1998* form after consultations with the National Steering Committee and focus and pilot testing. Modifications to the data collection instrument were made on a variable-by-variable basis.

Maltreatment Assessment Form

The main data collection instrument used for the study was the *Maltreatment Assessment Form*, which was completed by the primary investigating child welfare worker upon completion of each child welfare investigation (see Appendix C). The *Maltreatment Assessment Form* consisted of an *Intake Face Sheet*, a *Household Information Sheet*, and a *Child Information Sheet*.

Workers completed the *Intake Face Sheet* for all cases opened during the study period, whether or not a specific allegation of maltreatment had been made. This initial review of all child welfare case openings provided a consistent mechanism for differentiating between cases investigated for suspected maltreatment and those referred for other types of child welfare services (e.g., preventive services).

Basic information about the report or referral as well as partially identifying information about the child(ren) involved was collected on the *Intake Face Sheet*. The form requested information on the date of referral, referral source, number of children in the home, age and sex of children, whether maltreatment was suspected or alleged, whether the case was screened out, the family's postal code, and the reason for the referral or screening out. The section of the form containing partially identifying information was left at the agency/office (the case number, first two letters of the family's surname and postal code). The remainder of the form was completed if abuse or neglect was

27 Trocmé, N., McPhee, D. et al. (1994) *Ontario incidence study of reported child abuse and neglect*. Toronto: Institute for the Prevention of Child Abuse.

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.

suspected, either by the person(s) making the report or by the investigating worker at any point during the investigation.²⁸

The *Household Information Sheet* was completed only when at least one child in the family was investigated for suspected maltreatment. The household was defined as all the adults living at the address of the investigation. The *Household Information Sheet* collected detailed information on up to two caregivers. Descriptive information was requested about the contact with the caregiver, caregiver's own history of abuse, other adults in the home, housing, caregiver functioning, case status, and referral(s) to other services. (A copy of the *Household Information Sheet* can be found in Appendix C)

The third page of the instrument, the *Child Information Sheet*, was completed for each child who was investigated for maltreatment.²⁹ The *Child Information Sheet* 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 and emotional harm to the child attributable to the alleged maltreatment, child welfare court activity, out-of-home placement, police involvement, and the caregiver's use of spanking as a form of discipline.

The *Maltreatment Assessment Form* also included an open comment section for situations in which the categories provided did not adequately describe a case, or when additional detail was of benefit.

A significant challenge for the study was to overcome the variations in the definitions of maltreatment used in different jurisdictions. Rather than anchor the definitions in specific legal or administrative definitions, a single set of definitions corresponding to standard research classification schemes was used. All items on the case selection forms were defined in an accompanying OIS/CIS Cycle II Guide Book (see Appendix D).

Worker Information Form

A Worker Information Form was used to collect information about the worker(s) completing the investigation. Workers in the 16 OIS-2003 child welfare service areas were asked to complete the forms. Responses were received from 361 workers, 84% of OIS-2003 workers who had participated in the study. The one-page form included information about the worker's role and position, training, education, and experience (see Appendix F).

28 The OIS/CIS Cycle II Guide Book and training sessions emphasized that workers should base their responses to these questions on their clinical expertise rather than simply transposing information collected on the basis of provincial or local investigation standards. The OIS/CIS Cycle II Guide Book, (Appendix D) specifies the following: "Indicate which children were investigated because of suspected child maltreatment.... Only include those cases where in your clinical opinion maltreatment was suspected at some point." (p.6)

29 One Child Information Sheet was attached to the *Maltreatment Assessment Form*, and additional Child Information Sheets were available in every office.

Focus and Pilot Testing

In keeping with the goals of comparability and ease of use, the OIS/CIS-1998 data collection instrument was reviewed by a group of experts in October 2002. Several changes to the data collection instrument were suggested. These included the response options for the caregiver and child functioning items, caregiver age and case status. As a result of this meeting two versions of the form were developed for focus testing.

The *CIS-2003* National Steering Committee completed a focus test of the two forms in March 2003. The same two versions of the forms were focus tested with child welfare workers from one rural and one urban agency in Ontario and Alberta. Focus testing ensured that modifications to the form would be consistent with standard practices, be easy to read and understand and would maintain comparability with the 1998 cycle of the study.

The two versions of the forms were further modified to reflect the focus test results and were then pilot tested with child welfare workers. Pilot testing was conducted with a volunteer sample of workers in two agencies. The purpose of the pilot test was threefold: (1) to gain feedback on the instrument, in particular the level of clarity of the items, completion rates, and the relevance of the information requested; (2) to examine case selection procedures, and (3) to assess the reliability of the data collection instrument.

The vast majority of items on the *OIS-2003* maltreatment assessment form showed good to excellent test re-test reliability (Kappa = 0.66 to 1.00). Among the most reliable groups of variables were referral source, form of maltreatment, maltreatment history, child age and gender, case disposition items and indices related to emotional harm. The majority of items related to household and caregiver characteristics also showed substantial to excellent agreement.

A number of items fell slightly below the criterion adopted for acceptable reliability. The presence of unsafe and overcrowded housing, criminal activity of the primary caregiver, any child referral, perpetrator identity (Caregiver A) and several child functioning concerns had Kappa values that fell within a moderate range of agreement (0.40 to 0.60).³⁰ For further information about reliability testing, see *CIS-2003 Major Findings Report*.

Several modifications to the form were made as a result of the focus and pilot testing process. Some items on the form were re-organized, others were collapsed and some items were added. For example, the variables “maltreated as a child” and “caregiver in a violent relationship” were moved into the caregiver risk factor section. The household income levels were collapsed from eight to five categories. The housing category was collapsed from eight categories to six categories. Modifications

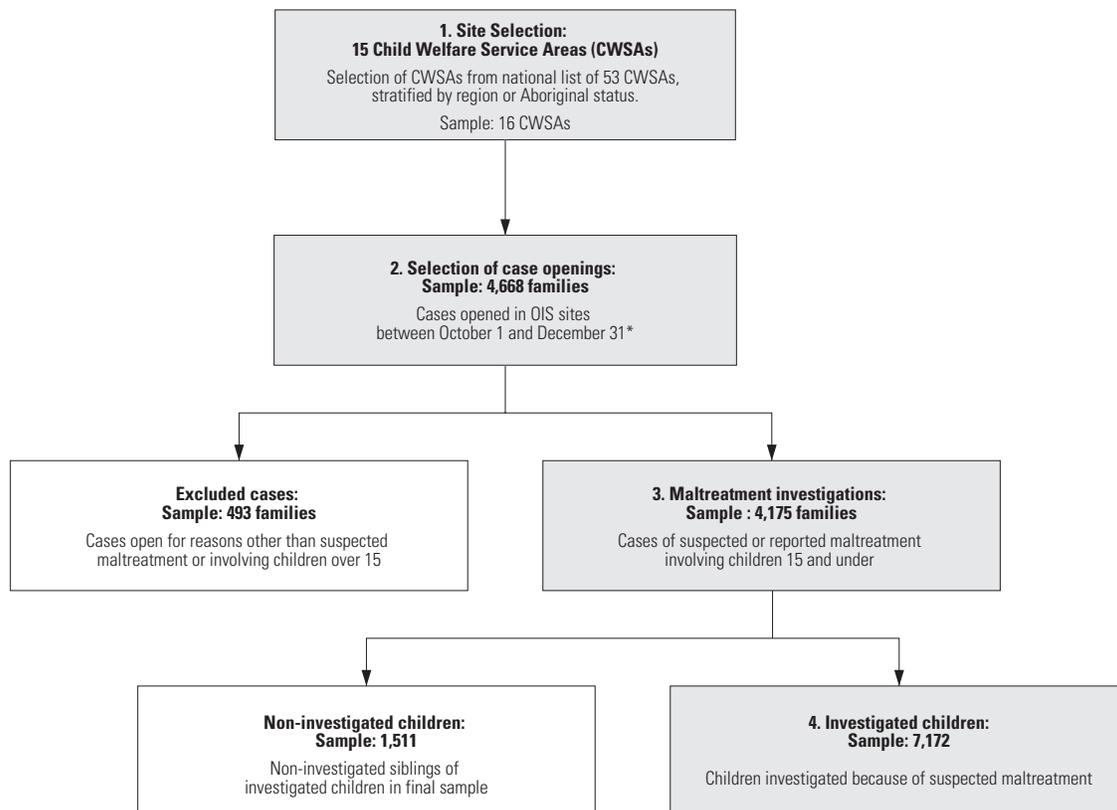
30 Landis, J.R. & Koch, G.G. (1977) The measurement of observer agreement for categorical data. *Biometrics* 33, 159-174.

to maltreatment codes were also made as a result of the focus and pilot testing process. Physical abuse categories were anchored to caregiver behaviours. Sexual abuse categories were also updated, with several items made less ambiguous and the category of sex talk was added to include sexual communications including Internet contact and exposure to pornography.

Sampling

A stratified cluster design was used to select maltreatment investigations for the OIS-2003. A four-stage sampling process was required to select a provincially representative sample of children investigated because of suspected maltreatment (see Figure 2-1).

Figure 2-1
Ontario Incidence Study of Reported Child Abuse and Neglect: Sampling Stages in 2003



* In the Aboriginal jurisdictions data collection included cases opened in January 2004. This adjustment was made because of late enrolment.

In the first stage of the sampling process a minimum of one agency or office was selected in each region of the province. In the Toronto region, all agencies that offered child protection services were involved in the study. Aboriginal agencies were not included in the provincial/territorial strata, but were sampled from a separate Aboriginal pan-Canadian stratum.

Sixteen CWSAs were selected from a pool of 53 CWSAs in Ontario. Six CWSAs declined to be involved because of their particular circumstances, and six replacement CWSAs were randomly selected from the remaining pool. The largest metropolitan centre, Toronto,³¹ was sampled with certainty to ensure their inclusion in the study.

The second sampling stage involved selecting cases opened³² in each site over a three-month period. Cases were selected by having investigating workers determine case eligibility using the *Intake Face Sheet* of the *Maltreatment Assessment Form*.

Table 2-1
Child Welfare Service Area (CWSA) and Sample Size by Region, OIS-2003

Region	Child Population (0-15)	Total Child Welfare Service Areas (CWSA)	Number of OIS CWSA	CWSA Child Population (0-15)	Annual CWSA Case Openings	Case Openings Sampled for OIS
Central West	465,190	5	2	244,540	5,701	358
Central East	432,560	5	2	252,590	7,607	916
Toronto	462,000	1	1	462,000	11,805	608
Hamilton-Niagara	229,970	4	2	48,290	2,837	592
South East	96,920	6	2	38,940	2,229	415
South West	315,205	10	2	40,575	1,922	465
Eastern	216,630	4	2	179,310	5,314	596
North & North East	171,860	12	3	68,430	2,935	730
Ontario	2,390,665	47	16	1,334,675	40,350	4,680

* Source: Canada. Statistics Canada. *Census of Canada, 2001: Age and Sex for Population, for Canada, Provinces, Territories, Census Divisions and Census Subdivisions, 2001 Census – 100% Data* [computer file]. Ottawa: Ont.: Statistics Canada [producer and distributor], October 22, 2002 (95F0300XCB01006). Census data quality can be found at <http://www.statcan.ca/english/census96/dqindex.html> and <http://www12.statcan.ca/english/census01/Products/Reference/dict/appendices/app002.pdf>

³¹ Due to high case volumes in one of Ontario's largest child welfare agency, workers participated in the OIS-2003 on a volunteer basis. Cases included in the study were selected randomly from their caseloads.

³² In most sites all open cases were included; in very large agencies/sites (>1,500 investigations annually) cases were randomly selected for inclusion in the study, or investigating workers participated for smaller periods of time. This was to ensure high participation rates.

Cases open between October 1, 2003 and December 31, 2003 in the study sites were selected for inclusion in the study (N = 7,121). Three months was considered to be 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 to be typical of the 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 services may affect estimates that are based on a three-month sampling period.³³

The third sampling stage involved selecting opened cases to identify those cases that met *OIS-2003* definitions of investigated maltreatment (see Figure 2-1, Stage 3). Although investigating suspected maltreatment is the core mandate for most child welfare services, situations that are considered to involve children at risk of maltreatment are also given service. These can include children with difficult behaviour problems, pregnant women seeking supportive counseling, or other service requests that do not involve a specific allegation of maltreatment. In order to maximize uniformity in case selection, the *Intake Face Sheet* of the *Maltreatment Assessment Form* was completed on all open cases in the sample. Investigating workers then evaluated each case to determine whether maltreatment was alleged by the referral source or suspected at any point in the investigation process. Workers were asked to use the *OIS-2003* definitions of maltreatment, which were generally more inclusive than definitions in many jurisdictions.

In 89% of cases in the core sample (N = 4,175) the selected cases involved specific concerns about suspected maltreatment involving children who were 15 or under; the remaining cases (N = 493) involved situations with no allegations of maltreatment of children under 16 years of age and were excluded from the *OIS-2003* sample.

The final case selection stage involved identification of the specific children who had been investigated. In many jurisdictions, cases are classified on the basis of family units, while in others each investigated child is counted as a case. In jurisdictions using family-based case counts, children who had been specifically investigated because of suspected maltreatment were identified. A total of 7,172 child maltreatment investigations form the sample for the *OIS-2003*.

Case Selection and Processing

Site Researchers were assigned to coordinate site training and case selection at each *OIS-2003* agency/office (see Appendix A for a list of all *OIS-2003* Site Researchers). The case selection phase began with a training session, conducted with the principal investigator, co-investigator or study managers, to introduce participating child welfare workers to the *OIS-2003* instruments and case

³³ Seasonal variations would not affect the overall estimates of the number of maltreatment investigations because such variants are adjusted for in the weighting, but they could affect the proportion of cases referred from some sources, such as schools.

selection procedures. After a review of the forms and procedures, trainees completed the *Maltreatment Assessment Form* for selected case vignettes (see Appendix E for the case vignettes). The completed forms were then discussed and discrepancies in responses reviewed to ensure that items were being properly interpreted. Each worker was given a OIS/CIS Cycle II Guide Book, which included definitions for all the items and study procedures (see Appendix D).

Completion of the *Maltreatment Assessment Form* was recommended to coincide with the written assessments that workers record upon the completion of their investigation. The length of time between the receipt of the referral and the completion of the written assessment differs according to site practices. Given that some investigations can take many months to be completed, workers were asked to complete the *Maltreatment Assessment Form* at the same time as their first assessment report, regardless of whether the entire investigation was yet completed.

Site Researchers visited the OIS-2003 sites on a regular basis to collect forms, respond to questions, and monitor study progress. In most instances five visits to each location were required. However, additional support was provided depending on the individual needs of workers at each site. Site Researchers collected the completed *Maltreatment Assessment Forms* during each site visit and reviewed them for completeness and consistency. Every effort was made to contact workers if there was incomplete information on key variables (e.g., child age or category of maltreatment) or inconsistencies. Site Researchers also ensured that the investigation was part of the sample. Identifying information (located on the bottom section of the *Intake Face Sheet*, see Appendix C) was stored on site, and non-identifying information was sent to the central data verification locations.

Data Verification and Data Entry

Maltreatment Assessment Forms were verified twice for completeness and inconsistent responses: first on site by the Site Researchers, as described above, and then a second time at the University of Toronto. Consistency in form completion was examined by comparing the selected maltreatment codes to the brief case narratives provided by the investigating workers.

Data from Maltreatment Assessment Forms sent to the OIS-2003 office in Toronto were entered by scanner using TELEform Elite scanning software, V.8.1. Face Sheet information was entered manually using Microsoft Access 2000. The data were then combined into an SPSS Version 12.0 database. Inconsistent responses, missing responses, and miscodes were systematically identified. Duplicate cases were screened for at the child welfare site and deleted on the basis of agency identification numbers, family initials, and date of referral.

Data entry error rates were examined by re-entering a random sample of forms. Five hundred Maltreatment Assessment Forms were re-scanned by TELEform, and 100 Face Sheets were re-

entered manually to determine entry error. Error rates were 2% for TELEform entry and 2% for manual data entry. The TELEform error rate was due to scanning errors in data fields that required a written number rather than a check box. Written fields in all forms were subsequently verified to correct for the scanning errors.

Participation and Item Completion Rates

The case selection form was kept as short and simple as possible to minimize the response burden and ensure a high completion rate. Item completion rates were over 99% on all items.³⁴

The participation rate was estimated by comparing actual cases opened during the case selection period (October 1 to December 31, 2003) with the number of cases for which Maltreatment Assessment Forms were completed.³⁵ Unfortunately, in some sites differences in the way cases were tracked made it impossible to arrive at a count of case openings from October to December 2003 that corresponded to the cases tracked by the OIS-2003. The overall participation rate in sites where a participation rate could be estimated was 88%, ranging from a low of 70% to a high of 100%. Participation rates below 95% were discussed with the OIS-2003 liaisons for each agency to examine the possibility of skewed sampling. In all cases low participation could be attributed to external events (e.g., staff holidays, staff turnover), and no evidence of systematic bias was found.

Weighting

The data collected for the OIS-2003 were weighted in order to derive national annual incidence estimates. Two sets of weights were applied. First, results were annualized to estimate the annual volume of cases investigated by each study site. The annualization weights were derived by dividing the total number of cases opened by each site in 2003 by the number of cases sampled for the OIS-2003. For example, if 225 cases were sampled over three months in a site that opened 1,000 cases over the year, a weight of 4.44 (1,000/225) was applied to all cases in the site. The average annualization weight was 4.62³⁶ reflecting the fact that cases had been collected over three months out of 12. While this annualization method provides an accurate estimate of overall volume, it cannot account for qualitative differences in the types of cases referred at different times of the year (see Chapter 1).

34 The high item completion rate can be attributed both to the design of the case selection instrument and to the verification procedures. In designing the form, careful attention was given to maintaining a logical and efficient ordering to questions. The use of check boxes minimized completion time. An “unknown” category was included for many questions to help distinguish between missed responses and unknown responses.

35 Participation rate is the proportion of cases open between Oct. 1 and Dec. 31, 2003, for which the *Maltreatment Assessment Form* was completed.

36 This average excludes eight larger sites where case sampling during the 3 months generated a higher annualization weight of 8.13.

To account for the non-proportional sampling design, regional weights were applied to reflect the relative sizes of the selected sites. Each study site was assigned a weight reflecting the proportion of the child population of the site relative to the child population in the stratum or region that the site represented. For instance if a site with a child population of 25,000 was randomly sampled to represent a region or province/territory with a child population of 500,000, a regionalization weight of 20 (500,000/25,000) would be applied to cases sampled from that site. Regionalization and annualization weights were combined so that each case was multiplied first by an annualization weight and then by a regionalization weight.

Provincial incidence estimates were calculated by dividing the weighted estimates by the child population (less than one to 15 year olds). The child population figures for OIS-2003 sites are based on 2001 Census data. In most cases, this involved aggregating Census subdivisions only, while a few cases required the splitting of census subdivisions by aggregating enumeration areas.³⁷

Duplication

The OIS-2003 estimates are reported on the basis of the number of child maltreatment investigations conducted during 2003, as opposed to the number of investigated children. Some investigations involve children who had been previously investigated in the same year. Although each investigation represents a new incident of maltreatment, confusion arises if these investigations are taken to represent an unduplicated count of children. The OIS-2003 estimates cannot be unduplicated because the annualization weights are based on unduplicated service statistics provided by the study sites.

The OIS-2003 had no precise method for identifying children who were investigated more than once during 2003, unless they were investigated more than once during the October to December study period. An outside estimate of this number can be derived by examining instances in which children had been previously investigated; 38% of maltreatment investigations involved cases closed within 12 months of the current investigation. Because the OIS-2003 did not document when re-opened cases had been previously opened, it was not possible to determine how many of these cases had been opened for an investigation twice within the same calendar year. The 38% percent re-opening rate should therefore be treated as an outside estimate, with the true rate being under 38%.

³⁷ Census subdivisions are the equivalent of municipalities (e.g., cities, towns, townships, villages, etc.)

Sampling Error Estimation

Although the OIS-2003 estimates are based on a relatively large sample of 7,172 child maltreatment investigations, sampling error is primarily driven by variability between the 16 sites. Sampling error estimates were calculated to reflect the fact that the survey population had been stratified and that primary sampling units (or sites) had been selected randomly from each stratum. To calculate the variance, the stratified design allowed the research team to assume that the variability between strata was zero and that the total variance was the sum of the variance for each stratum. In most instances, two CWSAs, the primary sampling units, were chosen from each stratum. Variance estimates were calculated using WesVar 4.2, which computes estimates and their variance estimates from survey data using replication methods.

Standard error estimates were calculated at the $p < .05$ level.³⁸ For most estimates standard errors were within an acceptable range, with coefficients of variation ranging between 8% and 16%.³⁹ Coefficients of variation were above 16% in instances involving low frequency events (e.g., where the number of sampled cases was under 100) or in instances involving variables with unusually large variability. Estimates based on events that occurred in fewer than five cases are not included in this report and are marked as blanks in the accompanying tables.

The larger sample size of the OIS-2003 compared to the sample size of the *OIS-1998* (3,050 child maltreatment investigations), has yielded coefficient of variations which are generally lower than the previous study, indicating a lower degree of variation in child welfare practice across Ontario. However, both the maltreatment typologies of primary substantiated sexual abuse and emotional maltreatment have coefficient of variations that indicate the estimates for these variables must be interpreted with caution (see Table 2-2). Similarly, positive toxicology at birth for substantiated maltreatment also yielded an estimate that must be interpreted with caution. There is less variability for Males 0-15 years of age in substantiated maltreatment and placement in other foster care in substantiated maltreatment.

The error estimates do not account for any errors in determining the annual and regional weights, nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from site to site. 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.

³⁸ This means that 95% of random samples will yield estimates that will lie within one standard error above or below the estimate. In other words, if the study were repeated 100 times, in 95 times the estimates would fall within one standard error of the estimate. For example, 95 out of 100 times the estimate for the number of children admitted to care would be between 2,503 and 4,404 (see Table 2-2).

³⁹ The coefficient of variation (CV) is the ratio of the standard error to its estimate. Statistics Ontario considers CVs under 16 to be reliable, warns that CVs between 16 and 33.3 should be treated with caution, and recommends that CVs above 33.3 not be used.

Table 2-2
Standard Errors and Coefficients of Variation for Selected Variables ($p < .05$) in 2003

Variable	Sample Size	Estimated Count or Incidence Rate	Standard Error	Coefficient of Variation
Primary Substantiated Sexual Abuse (Table 3-3)	82	1,490	363	24.39
Incidence of Primary Substantiated Emotional Maltreatment (Table 3-3)	472	3.64 per 1,000 children	0.71	19.60
Physical Harm in Substantiated Child Maltreatment Investigations (Table 4-1(a))	268	4,989	841	16.86
Placement in Other Foster Care in Substantiated Child Maltreatment Investigations (Table 5-4)	214	3,453	485	14.04
Males 0–15 Years of Age in Substantiated Child Maltreatment Investigations (Table 6-1)	1,668	30,810	4,380	14.22
Positive Toxicology at Birth in Substantiated Child Maltreatment Investigations (Table 6-4(a))	19	280	75	26.95
Unsafe Housing Conditions in Substantiated Child Maltreatment Investigations (Table 7-7)	213	3,630	552	15.21
Referrals from Police in Substantiated Child Maltreatment Investigations (Table 8-1)	1,167	21,743	3,676	16.91

Limitations of the OIS-2003

Every effort has been made to make the OIS-2003 a robust and reliable study of reported child maltreatment in Ontario. Several challenges that the research team faces have resulted in limitations to the study. These limitations have been outlined in the preceding two chapters, and are summarized below.

- the OIS-2003 is limited to reports investigated by child welfare services and do not include reports that were screened out, cases that were only investigated by the police and cases that were never reported;
- the study is not designed to conduct regional comparisons, variations in rates of investigated maltreatment across Ontario could not be examined;
- the study is based on the assessments provided by the investigating child welfare workers and could not be independently verified.

1993, 1998, 2003 Comparisons

Select comparisons between the OIS-1998 and OIS-2003 are presented in Chapter 9. Direct comparisons between the *1998 Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-1998)* report cannot be made due to changes in the way in which the rate of substantiation was calculated. This change has also imposed limits on the number of comparisons made with the OIS-1993. Four comparisons between 1993, 1998 and 2003 are presented in Chapter 9.

Data Presentation Format

Definitions of the **study variables** are described in the corresponding chapters. For forms of maltreatment and substantiation rates, please read the introduction to Chapter 3. In reading the data tables in Chapters 3 to 8, the following points should be noted:

- Data tables in Chapter 3 present estimate counts and incidence rates by level of substantiation for **all forms** of investigated maltreatment;
- Tables in Chapters 4 through 8 primarily present estimate counts for the five **primary categories of substantiated maltreatment**;
- Estimates are not presented when there were insufficient cases sampled to provide a reliable estimate. In such instances one dash (-) appears in the cell;
- All estimates are **weighted annual estimates for 2003** presented either as a **count** of child maltreatment investigations (e.g., 12,300 child maltreatment investigations) or as the annual **incidence rate** (e.g., 3.1 per 1,000 children);
- The overall sample used to derive data for each table is noted at the bottom of the table along with the number of missing cases. Because of **missing cases** the case count totals at the bottom of each table will vary from one table to the next. Chapter 3 tables provide the full count of estimated child maltreatment investigations; and,
- Column percentages total 100% for all tables, except when multiple responses were possible (e.g., referral source, child functioning).

■ 3. INCIDENCE OF ABUSE AND NEGLECT

This chapter presents estimates of the number of child maltreatment investigations conducted in 2003. Selected comparisons with the findings from the OIS-1993 and OIS-1998 are presented in Chapter 9.

All data are presented in terms of the total number of estimated child maltreatment investigations, as well as the annual incidence rate of estimated investigations per 1,000 children aged less than one to 15.⁴⁰ These figures refer to child investigations and not to the number of investigated families. Thus, if several children in a family had each been reported as abused or neglected, each investigated child counted as a separate child investigation. For children investigated more than once in a year, each investigation is included in the estimates (see Chapter 1, Definitional Framework).⁴¹

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 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 services, (2) reported cases that were screened out by child welfare services before being fully investigated, (3) new reports on cases already open by child welfare services, and (4) cases that were investigated only by the police.

Definition of Classifications of Maltreatment

The OIS-2003 definition of child maltreatment includes 25 forms of maltreatment subsumed under five categories: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence (see Section 14, “Forms of Maltreatment,” in OIS/CIS Cycle II Guide Book in Appendix D). The 25 forms of maltreatment tracked by the OIS are defined in the detailed sections on the five categories of maltreatment in this chapter.

Each investigation 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% of substantiated child maltreatment investigations (see Table 3-4). The

40 The cut-off age of 15 (children under the age of 16) was selected. All calculations were based on the child population estimates from the 2001 Census.

41 Children investigated more than once during the case selection period (October to December 2003) were only counted as one investigation; however, children investigated more than once over the whole year (2003) were counted as separate cases because the child welfare service statistics used to annualize the OIS estimates had not had duplicates removed (see Chapter 1, Definitional Framework).

primary form of maltreatment was the form that best characterized the investigated maltreatment. In cases where one form of maltreatment was substantiated and one was not, the substantiated form was automatically selected as the primary form.⁴²

For the purpose of this report, most tables will only present the **primary classification of substantiated maltreatment** in order to allow summary comparisons of the five categories of maltreatment tracked by the OIS-2003 (physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence). In this chapter, however, Tables 3-5, 3-6, 3-7, 3-8 and 3-9 will present the **primary and secondary forms** of investigated maltreatment in order to provide an exact estimate of the occurrence of the five categories and the 25 individual forms of maltreatment.

Definition of Levels of Substantiation

The data in this chapter are all presented in terms of the three levels of substantiation specified by workers: substantiated, suspected, and unsubstantiated. The following definition of substantiation was used:

A case is considered **substantiated** if the balance of evidence indicates that abuse or neglect has occurred.

A case is **suspected** if you do not have enough evidence to substantiate maltreatment, but you also are not sure that maltreatment can be ruled out.

A case is **unsubstantiated** if the balance of evidence indicates that abuse or neglect has not occurred.

Unsubstantiated 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 (see Malicious Referrals, Chapter 8).

Jurisdictions only make a distinction between a case that was substantiated and a case that was unsubstantiated, or verified and not verified.⁴³ The addition of a “suspected” level provides an important clinical distinction between cases in which there is enough conclusive evidence that a case can be deemed substantiated or unsubstantiated and cases in which maltreatment remains suspected

42 The OIS classification protocol was modified for the 2003 study to avoid confusion in cases one form of maltreatment is substantiated and one is not. If the primary investigated form was not substantiated but a secondary form was, the substantiated form was recoded as the primary overall form (this involved 515 cases, 4% of the sample). For example, if physical abuse was unsubstantiated in a case initially classified primarily as physical abuse, but neglect was substantiated, the substantiated neglect was recoded as the primary form of maltreatment.

43 For the purposes of OIS-2003, child welfare workers were asked to use three levels of substantiation regardless of provincial practices.

at the conclusion of the investigation. It should be noted, however, that the use of the suspected category leads to fewer cases being classified as substantiated or unsubstantiated. Comparisons with other statistics that use only two levels of substantiation should therefore be made with caution (see Chapter 1).

Family-Level Substantiation: In Table 3-2, which presents family-level data, the substantiation level is determined by the highest level of substantiation among all investigated children within a family. For example, if the allegation of maltreatment for the first child was unsubstantiated and the allegation of maltreatment for the second child was substantiated, then the family investigation was deemed to be substantiated (a minimum of one substantiated form of maltreatment for the multiple children who were investigated).

Total Child Investigations and Overall Rates of Substantiation

Table 3-1 presents the estimated number of child investigations of reported maltreatment in all of Ontario. An estimated 128,108 child maltreatment investigations were conducted in Ontario, a rate of 53.59 investigations per thousand children. Forty-four percent of these investigations were substantiated, an estimated 58,425 child investigations.⁴⁴ In a further 10% of investigations (an estimated 13,032 child investigations, 5.45 investigations per 1,000 children) there was insufficient evidence to substantiate maltreatment, however, maltreatment remained suspected by the investigating worker. Forty-six percent of investigations (an estimated 56,652 child investigations, 23.70 investigations per 1,000 children) were unsubstantiated.

Table 3-1
Child Maltreatment Investigations by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Maltreatment Investigations in Ontario				
Child Investigations*	58,425	13,032	56,652	128,108
Incidence per 1,000 Children	24.44	5.45	23.70	53.59
Row Percentage	44%	10%	46%	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 7,172 child maltreatment investigations.

⁴⁴ At least one form of maltreatment was substantiated.

Total Family Investigations and Overall Rates of Substantiation

Table 3-2 presents the estimated number of family investigations in Ontario. Although the estimates presented in this report are child-based, the family-based data are presented in this table to provide a basis for comparing OIS-2003 data with the family-based child maltreatment statistics that are routinely gathered in many jurisdictions. An estimated 74,857 family maltreatment reports were investigated because of alleged maltreatment in Ontario. Of this number, 47% were substantiated, 10% remained suspected, and 43% were unsubstantiated.

Children living in an investigated family were not all considered to be suspected victims of maltreatment. Children were considered to have been investigated if they were reported for suspected maltreatment, or if concerns about possible maltreatment of that child arose during the investigation.⁴⁵ In investigated families there was an average of 2.45 children under the age of 19, and an average of 1.71 children who were investigated in each family. (see Appendix H, Table 1(a) and Table 1(b)).

Table 3-2
Families Involved in Child Maltreatment Investigations by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Maltreatment Investigations				
Family Investigations*	35,339	7,406	32,112	74,857
Row Percentage	47%	10%	43%	100%
				<i>Ontario Incidence Study of Reported Child Abuse and Neglect 2003</i>
* Based on a sample of 4,175 family maltreatment investigations.				

Categories of Maltreatment

Table 3-3 presents the primary categories of substantiated maltreatment in Ontario in 2003. Exposure to domestic violence was the most common form of substantiated maltreatment in Ontario. Almost a third (32%) of all substantiated investigations involved exposure to domestic violence as the primary category of maltreatment, an estimated 18,518 investigations at a rate of 7.75 substantiated investigations per 1,000 children. Neglect was the second most frequently substantiated category of maltreatment (an estimated 15,660 substantiated investigations, a rate of 6.55 per 1,000 children), followed closely by physical abuse (an estimated 14,054 substantiated investigations, a rate of 5.88 per

⁴⁵ Workers were asked to distinguish between children who were interviewed as part of an investigation protocol and children suspected of being maltreated.

1,000 children). Emotional maltreatment was the primary category of substantiated maltreatment in 15% of cases (an estimated 8,703 substantiated investigations, a rate of 3.64 per 1,000 children) while sexual abuse cases represented only 3% of all substantiated investigations (an estimated 1,490 substantiated investigations, a rate of 0.62 per 1,000 children).

Table 3-3
Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment					Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence	
Substantiated Maltreatment in Ontario						
Substantiated Child Investigations*	14,054	1,490	15,660	8,703	18,518	58,425
Incidence per 1,000 Children	5.88	0.62	6.55	3.64	7.75	24.44
Row Percentage	24%	3%	27%	15%	32%	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations. Row Percentage total equals 101% because of rounding.

Single and Multiple Categories of Maltreatment

Table 3-4 presents the breakdown by category of maltreatment of substantiated cases involving multiple categories of maltreatment in Ontario.

Single Categories of Maltreatment: In 85% of substantiated cases only one category of maltreatment was identified, involving an estimated 49,624 child investigations. Physical abuse was identified as the single category of maltreatment in 19% of investigations; 2% of investigations involved only sexual abuse, 23% involved neglect only, 12% involved only emotional maltreatment and 29% involved allegations of exposure to domestic violence only.

Multiple Categories of Maltreatment: Fifteen percent of investigations involved more than one category of substantiated maltreatment, an estimated 8,801 child investigations. The most frequently identified combinations were emotional maltreatment and exposure to domestic violence (1,494 investigations), neglect and exposure to domestic violence (1,409 investigations), physical abuse and exposure to domestic violence (1,379), neglect and emotional maltreatment (1,208), and physical abuse with emotional maltreatment (1,203) or with neglect (857). It was relatively rare to find sexual abuse in combination with other forms of maltreatment.

Table 3-4
Single and Multiple Categories of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Substantiated Maltreatment		
	Count	Incidence per 1,000 children	% of Substantiated Maltreatment
Single Form of Substantiated Maltreatment			
Physical Abuse Only	11,077	4.63	19%
Sexual Abuse Only	1,244	0.52	2%
Neglect Only	13,573	5.68	23%
Emotional Maltreatment Only	7,060	2.95	12%
Exposure to Domestic Violence Only	16,669	6.97	29%
Subtotal: Only One Form of Substantiated Maltreatment	49,624	20.76	85%
Multiple Categories of Substantiated Maltreatment			
Physical Abuse and Sexual Abuse	116	0.05	0%
Physical Abuse and Neglect	857	0.36	2%
Physical Abuse and Emotional Maltreatment	1,203	0.50	2%
Physical Abuse and Exposure to Domestic Violence	1,379	0.58	2%
Sexual Abuse and Neglect	138	0.06	0%
Sexual Abuse and Emotional Maltreatment	–	–	0%
Sexual Abuse and Exposure to Domestic Violence	–	–	0%
Neglect and Emotional Maltreatment	1,208	0.51	2%
Neglect and Exposure to Domestic Violence	1,409	0.59	2%
Emotional Maltreatment and Exposure to Domestic Violence	1,494	0.62	3%
Physical Abuse, Sexual Abuse and Neglect	–	–	0%
Physical Abuse, Sexual Abuse and Emotional Maltreatment	–	–	0%
Physical Abuse, Sexual Abuse and Exposure to Domestic Violence	–	–	0%
Physical Abuse, Neglect, Emotional Maltreatment	178	0.07	0%
Physical Abuse, Neglect and Exposure to Domestic Violence	111	0.05	0%
Physical Abuse, Emotional Maltreatment and Exposure to Domestic Violence	224	0.09	0%
Sexual Abuse, Neglect and Emotional Maltreatment	–	–	0%
Sexual Abuse, Neglect and Exposure to Domestic Violence	–	–	0%
Sexual Abuse, Emotional Maltreatment and Exposure to Domestic Violence	–	–	0%
Neglect, Emotional Maltreatment and Exposure to Domestic Violence	332	0.14	1%
Subtotal: Multiple Categories	8,801	3.68	15%
Total Substantiated Maltreatment*	58,425	24.44	46%
<i>Ontario Incidence Study of Reported Child Abuse and Neglect 2003</i>			
* Based on a sample of 3,193 substantiated child investigations. Columns may not add up to total because of low frequency estimates are not reported but are included in total.			

Physical Abuse

For the purposes of the OIS-2003, cases of investigated maltreatment were classified as physical abuse if the investigated child was suspected to have suffered or to be at substantial risk of suffering physical harm at the hands of his or her caregiver. If several forms of physical abuse were involved, investigating workers were instructed to identify the most intrusive form.⁴⁶ The physical abuse category includes five forms of abuse:

Shake, Push, Grab or Throw: include pulling or dragging a child as well as shaking an infant.

Hit with Hand: include slapping and spanking but not punching

Punch, Kick, or Bite: include as well any other hitting with other parts of the body (e.g., elbow or head).

Hit with Object: includes hitting with a stick, a belt or other object, throwing an object at a child, but does not include stabbing with a knife.

Other Physical Abuse: Any other form of physical abuse including choking, strangling, stabbing, burning, shooting, poisoning, and the abusive use of restraints.

The incidence of reported physical abuse is presented in Table 3-5. An estimated 47,131 investigations (19.71 investigations per 1,000 children) involved physical abuse as the primary or secondary (including both second and third) reason for investigation, and an estimated 36,842 child investigations involved physical abuse as the primary reason for investigation, with an incidence rate of 15.41 investigations per 1,000 children. Physical abuse was substantiated as the primary or secondary reason for maltreatment in 17,424 cases (37% of physical abuse investigations).

An estimated 19,780 child investigations (8.27 investigations per 1,000 children) involved concerns about a child being hit with a hand. Thirty-eight percent of these were substantiated (3.12 investigations per 1,000 children). An estimated 9,384 child investigations (3.93 investigations per 1,000 children) involved concerns about a child shaken, pushed, grabbed or thrown, 36% of these cases being substantiated (3,371 investigations, a rate of 1.41 per 1,000 children). Being punched, kicked or bitten was investigated in 3,387 cases, 31% of which were substantiated, and 8,683 investigations involved an allegation of being hit with an object, 46% of which were substantiated. In an estimated 5,897 the allegation was classified as other physical abuse, with 26% of these cases being substantiated.

⁴⁶ Workers were asked to identify the most severe form of physical abuse for the investigation rather than reporting multiple forms for the same incident. For instance, if a child had been a victim of being hit with a hand and hit with an object by the same perpetrator, this was counted as a single case of being hit with an object. When multiple forms were identified, OIS-2003 Site Researchers would consult with workers and would recode when appropriate. If this consultation was not possible, the original response was maintained.

Table 3-5
Primary or Secondary Forms of Physical Abuse by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Physical Abuse				
Shake, Push, Grab or Throw				
Number of Child Investigations	3,371	1,272	4,741	9,384
Row Percentage	36%	14%	51%	100%
Incidence per 1,000 children	1.41	0.53	1.98	3.93
Hit with Hand				
Number of Child Investigations	7,455	2,244	10,081	19,780
Row Percentage	38%	11%	51%	100%
Incidence per 1,000 children	3.12	0.94	4.22	8.27
Punch, kick or bite				
Number of Child Investigations	1,062	281	2,044	3,387
Row Percentage	31%	8%	60%	100%
Incidence per 1,000 children	0.44	0.12	0.86	1.42
Hit with object				
Number of Child Investigations	3,984	1,288	3,411	8,683
Row Percentage	46%	15%	39%	100%
Incidence per 1,000 children	1.67	0.54	1.43	3.63
Other Physical Abuse				
Number of Child Investigations	1,552	591	3,754	5,897
Row Percentage	26%	10%	64%	100%
Incidence per 1,000 children	0.65	0.25	1.57	2.47
Total Investigations Involving Physical Abuse as Primary or Secondary Reason for Investigation**				
Number of Child Investigations*	17,424	5,676	24,031	47,131
Row Percentage	37%	12%	51%	100%
Incidence per 1,000 children	7.29	2.37	10.05	19.71
Total Investigations Involving Physical Abuse as Primary Reason for Investigation				
Number of Child Investigations	14,054	3,650	19,138	36,842
Row Percentage	38%	10%	52%	100%
Incidence per 1,000 children	5.88	1.53	8.01	15.41
<i>Ontario Incidence Study of Reported Child Abuse and Neglect 2003</i>				
* Based on a sample of 2,016 child maltreatment investigations with information about physical abuse. Row Percentage totals may add up to 99% or 101% because of rounding.				

Sexual Abuse

The OIS-2003 tracked eight forms of sexual abuse, ranging from penetration to sexual exploitation. If several forms of sexual activity were involved, investigating workers were instructed to identify the most intrusive form.⁴⁷ It should be noted that the OIS-2003 identified only cases reported to child welfare services; many cases of child sexual abuse that do not involve parents or relatives in the home are investigated only by the police, and child welfare services usually become involved in extra-familial sexual abuse cases only if there are concerns about the parents' ability to protect the child.

The OIS-2003 included eight forms of sexual abuse:

Penetration: penile, digital or object penetration of vagina or anus.

Attempted penetration: attempted penile, digital or object penetration of vagina or anus.

Oral Sex: oral contact with genitals by either perpetrator or by the child.

Fondling: touching or fondling of genitals for sexual purpose.

Sex Talk: 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).

Voyeurism: Included activities where the alleged perpetrator observes the child for the perpetrator's sexual gratification.

Exhibitionism: Included activities where the perpetrator is alleged to have exhibited himself/herself for his/her own sexual gratification.

Exploitation: Included situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.

As shown in Table 3-6, an estimated 9,493 child maltreatment investigations (3.97 investigations per 1,000 children) involved allegations of sexual abuse as either the primary or secondary category of maltreatment. Of this number only 22% were substantiated (2,114 investigations), 13% remained suspected, and 65% were unsubstantiated. An estimated 6,754 child investigations (2.83 investigations per 1,000 children) involved sexual abuse as the primary reason for investigation.

⁴⁷ Workers were asked to identify the most severe form of sexual abuse for the investigation rather than reporting multiple forms for the same incident. For instance, if a child had been a victim of fondling and attempted penetrations by the same perpetrator, this was counted as a single case of attempted penetration. When multiple forms were identified, OIS-2003 Site Researchers would consult with workers and would recode when appropriate. If this consultation was not possible, the original response was maintained.

Table 3-6
Primary or Secondary Forms of Sexual Abuse by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Sexual Abuse				
Penetration				
Number of Child Investigations	226	125	442	793
Row Percentage	28%	16%	56%	100%
Incidence per 1,000 children	0.09	0.05	0.18	0.33
Attempted Penetration				
Number of Child Investigations	–	–	107	261
Row Percentage	36%	23%	41%	100%
Incidence per 1,000 children	0.04	0.02	0.04	0.11
Oral Sex				
Number of Child Investigations	360	277	364	1,001
Row Percentage	36%	28%	36%	100%
Incidence per 1,000 children	0.15	0.12	0.15	0.42
Fondling				
Number of Child Investigations	1,067	378	3,620	5,065
Row Percentage	21%	7%	71%	100%
Incidence per 1,000 children	0.45	0.16	1.51	2.12
Sexual Talk				
Number of Child Investigations	107	–	507	670
Row Percentage	16%	8%	76%	100%
Incidence per 1,000 children	0.04	0.02	0.21	0.28
Voyeurism				
Number of Child Investigations	–	–	111	201
Row Percentage	–	45%	55%	100%
Incidence per 1,000 children	–	0.04	0.05	0.08
Exhibitionism				
Number of Child Investigations	116	–	389	565
Row Percentage	21%	11%	69%	100%
Incidence per 1,000 children	0.05	0.03	0.16	0.24
Exploitation				
Number of Child Investigations	143	203	591	937
Row Percentage	15%	22%	63%	100%
Incidence per 1,000 children	0.06	0.08	0.25	0.39
Total Investigations Involving Sexual Abuse as Primary or Secondary Reason for Investigation**				
Number of Child Investigations*	2,114	1,248	6,131	9,493
Row Percentage	22%	13%	65%	100%
Incidence per 1,000 children	0.88	0.52	2.56	3.97
Total Investigations Involving Sexual Abuse as Primary Reason for Investigation				
Number of Child Investigations*	1,490	756	4,508	6,754
Row Percentage	22%	11%	67%	100%
Incidence per 1,000 children	0.62	0.32	1.89	2.83

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 421 child maltreatment investigations with information about sexual abuse. Columns may not add up to total because of low frequency estimates are not reported but are included in total. Row Percentage totals may add up to 99% or 101% because of rounding.

** The total number of investigations involving primary or secondary sexual abuse is not equal to the sum of the specific forms of sexual abuse because some cases involve multiple forms of sexual abuse (see Table 3-4).

An estimated 793 child investigations (0.33 investigations per 1,000 children) involved allegations of penetration; 28% of these investigations (226 investigations) were substantiated, 16% remained suspected, and 56% were unsubstantiated. An estimated 261 child investigations (0.11 investigations per 1,000 children) were for allegations of attempted penetration. An estimated 1,001 child investigations involved allegations of oral sex, 36% of which were substantiated. An estimated 5,065 child investigations (2.12 investigations per 1,000 children) of touching or fondling of genitals were investigated, 21% of which were substantiated. Sexual talk was investigated in 670 cases, 16% of which were substantiated. Voyeurism was investigated in 201 cases, and exhibitionism was investigated in another 565 cases. Sexual exploitation was investigated in 937 cases, 15% of which were substantiated.

Neglect

Child neglect includes situations in which children have suffered harm, or their safety or development has been endangered as a result of the caregiver's failure to provide for or protect them. Section 72(1) of Ontario's *Child and Family Services Act* (CFSA)⁴⁸ includes neglect as grounds for investigating maltreatment and makes a direct reference to neglect as a "pattern of neglect in caring for, providing for, supervising or protecting the child." The OIS-2003 examines eight forms of neglect:

Failure to Supervise – Physical Harm: The child suffered or was at substantial risk of suffering physical harm because of the caregiver's failure to supervise and protect the child adequately. Failure to supervise included situations in which a child was 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).

Failure to Supervise – Sexual Abuse: The child has been or was at substantial risk of being sexually molested or sexually exploited, and the caregiver knew or should have known of the possibility of sexual molestation and failed to protect the child adequately.

Permitting Criminal Behaviour: A child has committed a criminal offence (e.g., theft, vandalism or assault) with the encouragement of the child's caregiver, or because of the caregiver's failure or inability to supervise the child adequately.

Physical Neglect: The child has suffered or was 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.

48 *Child and Family Services Act*, 2000, S.O. 1990 c.11, s.72.

Medical Neglect: The child required medical treatment to cure, prevent, or alleviate physical harm or suffering, and the child's caregiver did not provide, refused, or was unavailable or unable to consent to the treatment. This included dental services where funding was available.

Failure to Provide Psychological/Psychiatric Treatment: The child was at substantial risk of suffering from emotional harm as demonstrated by severe anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or a mental, emotional, or developmental condition that could seriously impair the child's development. The child's caregiver did not provide, or refused, or was 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. Parents awaiting service were not included in this category.

Abandonment: The child's parent has died or was unable to exercise custodial rights and did not make adequate provisions for care and custody, or the child was in a placement and the caregiver refused or was unable to take custody.

Educational Neglect: Caregivers knowingly allowed chronic truancy (five or more days a month), or failed to enroll the child, or repeatedly kept the child at home. If the child had been experiencing mental, emotional, or developmental problems associated with school, and treatment had been offered but caregivers did not cooperate with treatment, the case was classified under failure to provide treatment as well.

Table 3-7 indicates that child neglect was the most frequently investigated category of maltreatment. An estimated 55,066 child maltreatment investigations (23.03 investigations per 1,000 children) involved neglect as either the primary or secondary reason for investigation. Thirty-six percent of investigations were substantiated; in a further 11% of cases neglect remained suspected but could not be confirmed, and 53% of investigated neglect was unsubstantiated. Neglect was the primary category of investigation in an estimated 41,424 child maltreatment cases (17.33 investigations per 1,000 children).

Table 3-7 shows that the most common form of investigated neglect was failure to supervise leading to physical harm or risk of physical harm. An estimated 21,942 child investigations (9.18 investigations per 1,000 children) involved failure to supervise, resulting in actual or risk of physical harm.

The second most frequently investigated form of neglect was physical neglect. An estimated 15,791 investigations of physical neglect were conducted (6.61 investigations per 1,000 children), 33% of which were substantiated. Medical neglect was investigated in 4,323 cases, and failure to provide psychological treatment was investigated in 1,405 cases. Permitting criminal behaviour as a form of

Table 3-7
Primary or Secondary Forms of Neglect by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Neglect				
Failure to Supervise (Physical)				
Number of Child Investigations	7,989	2,595	11,358	21,942
Row Percentage	36%	12%	52%	100%
Incidence per 1,000 children	3.34	1.09	4.75	9.18
Failure to Supervise (Sexual)				
Number of Child Investigations	1,162	436	2,504	4,102
Row Percentage	28%	11%	61%	100%
Incidence per 1,000 children	0.49	0.18	1.05	1.72
Physical Neglect				
Number of Child Investigations	5,186	1,689	8,916	15,791
Row Percentage	33%	11%	56%	100%
Incidence per 1,000 children	2.17	0.71	3.73	6.61
Medical Neglect				
Number of Child Investigations	1,420	341	2,562	4,323
Row Percentage	33%	8%	59%	100%
Incidence per 1,000 children	0.59	0.14	1.07	1.81
Failure to Provide Psych.Treatment				
Number of Child Investigations	398	163	844	1,405
Row Percentage	28%	12%	60%	100%
Incidence per 1,000 children	0.17	0.07	0.35	0.59
Permitting Criminal Behaviour				
Number of Child Investigations	298	102	389	789
Row Percentage	38%	13%	49%	100%
Incidence per 1,000 children	0.12	0.04	0.16	0.33
Abandonment				
Number of Child Investigations	2,231	610	2,090	4,931
Row Percentage	45%	12%	42%	100%
Incidence per 1,000 children	0.93	0.26	0.87	2.06
Educational Neglect				
Number of Child Investigations	936	190	657	1,783
Row Percentage	52%	11%	37%	100%
Incidence per 1,000 children	0.39	0.08	0.27	0.75
Total Investigations Involving Neglect as Primary or Secondary Reason for Investigation**				
Number of Child Investigations*	19,620	6,126	29,320	55,066
Row Percentage	36%	11%	53%	100%
Incidence per 1,000 children	8.21	2.56	12.26	23.03
Total Investigations Involving Neglect as Primary Reason for Investigation				
Number of Child Investigations*	15,660	4,074	21,690	41,424
Row Percentage	38%	10%	52%	100%
Incidence per 1,000 children	6.55	1.70	9.07	17.33

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 2,368 child maltreatment investigations with information about neglect. Row Percentage totals may add up to 99% or 101% because of rounding.

** The total number of investigations involving primary or secondary neglect is not equal to the sum of the specific forms of neglect because some cases involve multiple forms of neglect (see Table 3-4).

neglect was investigated in an estimated 789 child investigations (0.33 investigations per 1,000 children), with 38% of these cases being substantiated.

An estimated 4,931 child investigations (2.06 investigations per 1,000 children) involved abandonment as a primary or secondary form of investigated maltreatment, 45% of which were substantiated. Educational neglect was noted in an estimated 1,783 child investigations (0.75 investigations per 1,000 children), over half of which (52%) were substantiated.

Emotional Maltreatment

Emotional maltreatment is a difficult category of maltreatment to document because often it does not involve a specific incident or visible injury. In addition, the effects of emotional maltreatment, although often severe, tend to become apparent over time (e.g., impaired cognitive, social, and emotional development). Three forms of emotional maltreatment were tracked by the OIS-2003. A fourth form, exposure to non-intimate partner violence, was added after the start of the study to deal with the relatively large number of such investigations.

Emotional Abuse: The child has suffered or was at substantial risk of suffering from mental, emotional, or developmental problems caused by overtly hostile, punitive treatment, or habitual or extreme verbal abuse (threatening, belittling, etc.).⁴⁹

Non-organic Failure to Thrive: A child under 3 has suffered a marked retardation or cessation of growth for which no organic reasons can be identified. Failure to thrive cases where inadequate nutrition was the identified cause were classified as physical neglect. Non-organic failure to thrive is generally considered to be a form of psychological maltreatment; it has been classified as a separate category because of its particular characteristics.

Emotional Neglect: The child has suffered or is at substantial risk of suffering from mental, emotional, or developmental problems caused by inadequate nurturance/affection. If treatment was offered but caregivers were not cooperative, cases were classified under failure to provide treatment as well.

Exposure to Non-intimate Partner Violence: A child has been exposed to violence occurring between adults in the child's home environment (for example the child's father and an acquaintance), excluding exposure to domestic violence.

⁴⁹ Instances in which children were displaying severe emotional problems requiring treatment and parents refused or did not cooperate with offered treatment were classified as neglect cases under failure to provide treatment.

There were an estimated 30,233 child investigations (12.65 investigations per 1,000 children) in 2003 for alleged emotional maltreatment as the primary or secondary maltreatment classification (Table 3-8). Forty-one percent of all investigations were substantiated, 19% were suspected, and 40% were unsubstantiated. Emotional maltreatment was the primary reason for investigation in an estimated 18,426 cases (7.71 investigations per 1,000 children).

Table 3-8
Primary or Secondary Forms of Emotional Maltreatment by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Emotional Maltreatment				
Emotional Abuse				
Number of Child Investigations	8,485	3,935	8,942	21,362
Row Percentage	40%	18%	42%	100%
Incidence per 1,000 children	3.55	1.65	3.74	8.94
Non-organic Failure to Thrive				
Number of Child Investigations	–	–	–	205
Row Percentage	48%	27%	24%	100%
Incidence per 1,000 children	0.04	0.02	0.02	0.09
Emotional Neglect				
Number of Child Investigations	2,974	1,339	2,712	7,025
Row Percentage	42%	19%	39%	100%
Incidence per 1,000 children	1.24	0.56	1.13	2.94
Exposure to Non-Intimate Partner Violence				
Number of Child Investigations	985	267	389	1,641
Row Percentage	60%	16%	24%	100%
Incidence per 1,000 children	0.41	0.11	0.16	0.69
Investigations Involving Emotional Maltreatment as Primary or Secondary Reason for Investigation**				
Number of Child Investigations*	12,543	5,597	12,093	30,233
Row Percentage	41%	19%	40%	100%
Incidence per 1,000 children	5.25	2.34	5.06	12.65
Investigations Involving Emotional Maltreatment as Primary Reason for Investigation				
Number of Child Investigations*	8,703	2,632	7,091	18,426
Row Percentage	47%	14%	38%	100%
Incidence per 1,000 children	3.64	1.10	2.97	7.71
<i>Ontario Incidence Study of Reported Child Abuse and Neglect 2003</i>				
* Based on a sample of 1,025 child maltreatment investigations with information about emotional maltreatment. Columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.				
** Based on a sample of 1,025 child maltreatment investigations with information about emotional maltreatment. Columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.				
The total number of investigations involving primary or secondary emotional maltreatment is not equal to the sum of the specific forms of emotional maltreatment because some cases involve multiple forms of emotional maltreatment (see Table 3-4).				

Emotional abuse was investigated in an estimated 21,362 cases (8.94 investigations per 1,000 children), 40% of which were substantiated. Emotional neglect was the primary or secondary form of maltreatment in an estimated 7,025 child investigations (2.94 investigations per 1,000 children), 42% of which were substantiated. An estimated 205 cases of non-organic failure to thrive were investigated. Exposure to non-intimate partner violence was investigated in 1,641 cases, 60% of which were substantiated.

Exposure to Domestic Violence

Although Ontario does not include a direct reference to exposure to domestic violence in the *Child and Family Services Act* (CFSA),⁵⁰ it is included in Ontario's Risk Assessment Model (ORAM)⁵¹ as part of the Eligibility Spectrum⁵² under the emotional harm section. To facilitate the analysis of this rapidly expanding form of maltreatment it is described in this report as its own category.

Exposed to domestic violence: A child has been a witness to violence occurring between the caregivers (or a caregiver and his/her partner). This would include situations where the child indirectly witnessed the violence (e.g., saw the physical injuries on his/her caregiver the next day or overheard the violence).

As can be seen in Table 3-9, exposure to domestic violence was investigated as the primary or secondary form of maltreatment in 30,879 a rate of 12.92 investigations per 1,000 children. Over two thirds (70%) of these cases were substantiated, in another 9% of cases exposure remained suspected. Exposure to domestic violence was unsubstantiated in only 21% of cases. Exposure to domestic violence was the primary form of investigated maltreatment in 24,663 cases.

Table 3-9
Primary or Secondary Exposure to Domestic Violence by Level of Substantiation in Ontario in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Investigations Involving Exposure to Domestic Violence as Primary or Secondary Reason for Investigation				
Number of Child Investigations*	21,637	2,811	6,431	30,879
Row Percentage	70%	9%	21%	100%
Incidence per 1,000 children	9.05	1.18	2.69	12.92
Investigations Involving Exposure to Domestic Violence as Primary Reason for Investigation				
Number of Child Investigations*	18,518	1,920	4,225	24,663
Row Percentage	75%	8%	17%	100%
Incidence per 1,000 children	7.75	0.80	1.77	10.32

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 1,342 child maltreatment investigations with information about exposure to domestic violence.

50 *Child and Family Services Act*, 2000, S.O. 1990 c. C.11, s.37

51 Ministry of Community and Social Services. (2000). Risk assessment model for child protection in Ontario. (Revised 2000). Toronto: Queen's Printer for Ontario.

52 Ontario Child Welfare Eligibility Spectrum (Revised 2000). Ontario Association of Children's Aid Society.

■ 4. CHARACTERISTICS OF MALTREATMENT

Chapter 4 describes the characteristics of maltreatment in terms of nature and severity of harm, the duration of the maltreatment, and the perpetrator's relationship to the victim. The findings are presented in terms of the five primary categories of substantiated maltreatment tracked by the OIS-2003: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence. All tables in this chapter present estimates for Ontario. Selected comparisons with the findings from the OIS-1993 and OIS-1998 are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 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 services, (2) reported cases that were screened out by child welfare services before being fully investigated, (3) new reports on cases already open by child welfare services, and (4) cases that were investigated only by the police.

Physical Harm

The OIS-2003 tracked physical harm suspected or known to be caused by the investigated maltreatment. Information on physical harm was collected using two scales, one describing severity of harm as measured by medical treatment need and one describing the nature of harm.

Physical harm was identified in 8% of cases of substantiated maltreatment (Table 4-1(a)). In 6% of cases (an estimated 3,628 substantiated investigations) harm was noted but no treatment was considered to be required. In a further 2% of cases (an estimated 1,360 child investigations), harm was sufficiently severe to require treatment.

Physical Abuse: Physical harm was indicated in 24% of investigations where physical abuse was the primary substantiated maltreatment. In 21% of cases a physical injury had been documented but was not severe enough to require treatment, and in another 3% of cases medical treatment was required, involving an estimated 434 victimized children. The fact that no physical harm was noted in 76% of physical abuse cases may seem surprising to some readers. It is important to understand that physical abuse includes caregiver behaviours that seriously endanger children, as well as those that lead to documented injuries.

Sexual Abuse: Physical harm was identified in 8% of investigations where sexual abuse was the primary substantiated concern.

Neglect: Although physical harm was indicated in only 8% of investigations where neglect was the primary substantiated maltreatment, most of these cases involved injuries that were severe enough to require medical treatment (5% of substantiated neglect cases). As a result, there were more victims of neglect requiring medical treatment (an estimated 756 victims of neglect) than for any other category of maltreatment.

Emotional Maltreatment: Physical harm was identified in 1% of investigations where emotional maltreatment was the primary substantiated concern.

Exposure to Domestic Violence: Physical harm was identified in 1% of cases of where exposure to domestic violence was the primary form of substantiated maltreatment.

Table 4-1(a)
Physical Harm by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Physical Harm	76%	10,672	92%	1,365	92%	14,446	99%	8,603	99%	18,349	92%	53,436
Physical Harm, No Treatment Required	21%	2,948	2%	–	3%	457	1%	–	1%	107	6%	3,628
Physical Harm, Treatment Required	3%	434	6%	–	5%	756	0%	–	0%	–	2%	1,360
Total Child Investigations*	100%	14,054	100%	1,490	100%	15,659	100%	8,703	100%	18,517	100%	58,424

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about physical harm. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Nature of Physical Harm

Investigating workers were asked to document the nature of physical harm that was suspected or known to have been caused by the investigated maltreatment. 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 visible for at least 48 hours.

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).

Fatal: The child died, and maltreatment was suspected during the investigation as the cause of death. Cases where maltreatment was eventually unsubstantiated were included.

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

Table 4-1(b) presents seven types of physical harm reported in the OIS-2003. Physical harm was documented in 8% of cases of substantiated maltreatment involving an estimated 4,990 children. Physical harm primarily involved bruises, cuts, and scrapes (6%) and other health conditions (2% of substantiated maltreatment). Less than 1% of physical harm situations involved head trauma, or burns and scalds, or broken bones. Because the OIS-2003 estimates are based on a very small number of cases involving burns and scalds, broken bones and head trauma, the estimates presented in Table 4-1(b) should be interpreted with caution.

During the three-month OIS-2003 case selection period there was one substantiated investigation of a child fatality in a study site. Because these tragic events occur relatively rarely, it is not surprising that only one substantiated investigated child fatality was captured by the OIS-2003. Estimates of the rate of child fatalities cannot be derived from this single case.⁵³

Physical Abuse: Physical harm was most often noted in cases with substantiated physical abuse as the primary maltreatment. Twenty-two percent (an estimated 3,083 children) involved bruises, cuts and scrapes. Other health conditions were reported in 1% of these cases while more severe injuries were indicated less often: broken bones were indicated in approximately 1% of cases with substantiated physical abuse as the primary concern.

Sexual Abuse: Investigations where sexual abuse was the primary substantiated maltreatment and physical harm was reported.⁵⁴

53 Thirty-three children (under age 12) were victims of homicide in Canada in 2003, which represents the lowest rate of child homicide victims in 25 years. Twenty-three of these children were killed by a parent. The average number of child homicides for the preceding 10 years is 49 child homicides per year. See Dauvergne, M. (2004). *Homicide in Canada, 2003* – Catalogue no. 85-002-XPE, Vol. 24, no. 8 Statistics Canada: Ottawa

54 Sexually transmitted diseases were the only specific type of health condition noted in the open-ended question that accompanied this category.

Neglect: Cases with neglect as the primary substantiated maltreatment most frequently involved other health conditions (5%). An additional 2% of cases involved bruises, cuts and scrapes.

Emotional Maltreatment: Physical harm was rare in cases with substantiated emotional maltreatment as the primary reason for investigation; when it was documented physical harm primarily involved a health condition (1% of cases with substantiated emotional maltreatment as the primary concern).

Exposure to Domestic Violence: Physical harm was rare in cases with substantiated exposure to domestic violence as the primary maltreatment. When it was documented, physical harm primarily involved bruises, cuts or scrapes (1% of cases with substantiated exposure to domestic violence as the primary concern).

Table 4-1(b)
Nature of Physical Harm by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Physical Harm	76%	10,672	92%	1,365	92%	14,446	99%	8,603	99%	18,349	92%	53,436
Bruises, Cuts, and Scrapes	22%	3,083	5%	–	2%	344	0%	–	1%	–	6%	3,602
Burns and Scalds	0%	–	0%	–	1%	–	0%	–	0%	–	0%	149
Broken Bones	1%	–	0%	–	0%	–	0%	–	0%	–	0%	–
Head Trauma	0%	–	0%	–	0%	–	0%	–	0%	–	0%	147
Fatality	0%	–	0%	–	0%	–	0%	–	0%	–	0%	–
Other Health Conditions	1%	202	3%	–	5%	739	1%	100	0%	–	2%	1,103
At Least One Type of Physical Harm	24%	3,382	8%	125	8%	1,214	1%	100	1%	169	8%	4,990
Total Child Investigations*		14,054		1,490		15,660		8,703		18,518		58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about physical harm. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding. Children may have experienced multiple types of harm.

Medical Treatment for Physical Harm

To estimate the severity of physical harm, investigating workers were asked to indicate whether identified physical harm was severe enough to require medical treatment.

Medical Treatment Required for Injury: Indicate whether medical treatment was required as a result of the injury or harm for any of the investigated forms of maltreatment.

Table 4-1(c) presents medical treatment ratings for the five OIS-2003 measures of physical harm. Bruises cuts and scrapes were the most common injury, 85% of which did not require medical treatment. Medical treatment was required in 57% of cases involving other health conditions.

Table 4-1(c)
Medical Treatment Required in Substantiated Child Maltreatment Investigations by Nature of Physical Harm in Ontario in 2003

	Nature of Physical Harm									
	Bruises, Cuts, and Scrapes		Burns and Scalds		Broken Bones		Head Trauma		Other Health Conditions	
Medical Treatment Not Required	85%	3,075	55%	–	0%	–	45%	–	43%	471
Medical Treatment Required	15%	527	45%	–	100%	–	55%	–	57%	631
Total Child Investigations*	100%	3,602	100%	149	100%	–	100%	148	100%	1,102

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 268 substantiated child maltreatment investigations with information about the nature of physical harm and medical treatment. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Emotional Harm

Information on emotional harm was collected using a series of questions asking child welfare workers to describe emotional harm that had occurred after the maltreatment incidents. Workers were asked to indicate whether the child was showing signs of mental or emotional harm (e.g., nightmares, bed wetting or social withdrawal). These maltreatment-specific descriptions of emotional harm are not to be confused with the general child functioning ratings that are presented in Chapter 6.

Table 4-2 presents emotional harm identified during the child maltreatment investigations. In order to rate the severity of mental/emotional harm, workers indicated whether therapeutic treatment was required in response to the mental or emotional distress shown by the child. Emotional harm was noted in 18% of all substantiated maltreatment investigations, involving an estimated 10,240 substantiated investigations. In 13% of substantiated cases symptoms were severe enough to require treatment.

Physical Abuse: Emotional harm was noted in 16% of cases where physical abuse was the primary substantiated maltreatment; in 11% of cases symptoms were severe enough to require treatment.

Sexual Abuse: Emotional harm was noted in 40% of investigations where sexual abuse was the primary substantiated concern. In 39% of cases where sexual abuse was the primary substantiated maltreatment, harm was sufficiently severe to require treatment. Although a large proportion of sexually abused children displayed symptoms of emotional harm requiring treatment, these cases account for an estimated 576 out of the 7,340 substantiated maltreatment cases where emotional harm was believed to require therapeutic intervention (8%). It should also be noted that the OIS-2003 tracked harm that could be associated with observable symptoms. It is likely that many sexually abuse children may be harmed in ways that were not readily apparent to the investigating worker.

Neglect: Emotional harm was identified in 17% of investigations where neglect was the primary substantiated maltreatment; in 13% of cases harm was sufficiently severe to require treatment.

Emotional Maltreatment: Emotional harm was identified in 30% of investigations where substantiated emotional maltreatment was the primary concern, and was sufficiently severe to require treatment in 20% of cases. While it may appear surprising to some readers that no emotional harm had been documented for such a large proportion of emotionally maltreated children, it is important to understand that the determination of emotional maltreatment is based on parental behaviour and/or the child’s symptoms.

Exposure to Domestic Violence: Emotional harm was identified in 12% of investigations where exposure to domestic violence was the primary substantiated maltreatment; in 8% of cases harm was sufficiently severe to require treatment.

Table 4-2
Emotional Harm by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
No Emotional Harm*	84%	11,832	60%	889	83%	12,963	70%	6,029	88%	16,256	82% 47,969
Signs of Mental or Emotional Harm, No Treatment Required**	5%	689	1%	–	4%	596	10%	889	4%	717	5% 2,900
Emotional Harm, Treatment Required	11%	1,512	39%	576	13%	2,057	20%	1,694	8%	1,492	13% 7,340
Total Child Investigations	100%	14,043	100%	1,474	100%	15,616	100%	8,613	100%	18,465	100% 58,211

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,179 substantiated child maltreatment investigations with information about emotional harm and treatment requirements. Rows and columns may not add up to total because low frequency estimates are not reported but are included in totals.
 ** Includes 72 (weighted) cases in which the child displayed signs of emotional harm, but information about treatment requirements was omitted.

Duration of Maltreatment

Duration of maltreatment was documented on a three-point scale:

- 1) Single incident
- 2) Multiple incidents for less than six months
- 3) Multiple incidents for more than six months

Given the length restrictions for the OIS-2003 questionnaire, it was not possible to gather additional information on the frequency of maltreatment in order to distinguish between long-term situations with infrequent maltreatment and long-term situations with frequent maltreatment. Workers could also note if the duration of the maltreatment was unknown.

Table 4-3 shows that 34% of substantiated investigations (an estimated 19,770 child investigations) involved maltreatment that had been ongoing for more than six months, 15% involved multiple incidents that had occurred over a period of less than six months, and 36% of investigations involved single incidents. Duration of maltreatment could not be determined in 15% of cases.

Physical Abuse: Maltreatment was indicated as a single incident in 45% of cases with physical abuse was the primary substantiated concern, as multiple incidents over a period of less than six months in 14% of abuse cases, and as multiple incidents over a period longer than six months in 27% of these cases.

Sexual Abuse: Maltreatment was indicated as a single incident in 39% of cases where sexual abuse was the primary substantiated concern, as multiple incidents over a period of less than six months in 13% of sexual abuse cases, and as multiple incidents over a period longer than six months in 29% of these cases.

Neglect: Single incidents of neglect occurred in 31% of cases where neglect was the primary substantiated maltreatment. Neglect involved multiple incidents over a period of less than six months in 19% of these cases, and multiple incidents over more than six months in 30% of cases.

Emotional Maltreatment: As with neglect, emotional maltreatment investigations involved more chronic than single incident cases. Twenty-six percent of cases involving emotional maltreatment as the primary category of substantiated concern involved a single incident, 16% involved incidents over a period of less than six months and 45% of these cases occurred over a period of more than six months.

Exposure to Domestic Violence: Thirty-seven percent of cases with exposure to domestic violence as the primary substantiated maltreatment were single incident cases, 11% involved multiple incidents over less than six months, and 39% over more than six months.

Table 4-3
Duration of Maltreatment by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment						Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence		
Single Incident	45% 6,298	39% 578	31% 4,714	26% 2,247	37% 6,604	36% 20,441	
Less Than Six Months	14% 1,980	13% 196	19% 2,903	16% 1,354	11% 1,975	15% 8,408	
More Than Six Months	27% 3,811	29% 426	30% 4,715	45% 3,836	39% 6,982	34% 19,770	
Unknown	14% 1,928	18% 274	20% 3,127	13% 1,112	13% 2,345	15% 8,786	
Total Child Investigations*	100% 14,017	100% 1,474	100% 15,459	100% 8,549	100% 17,906	100% 57,405	

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,142 substantiated child maltreatment investigations with information about duration of maltreatment. Row percentages may add up to 99% or 101% because of rounding.

Perpetrator

The perpetrator refers to the person who is or persons who are considered to have abused or neglected the child. Perpetrator information was collected either through the caregiver questions on the Household Information Sheet or through an open ended question that was subsequently recoded into the following classifications:

Biological Mother/Biological Father: The biological parent of all children in the family

Stepfather/Stepmother or Common Law Partner: Partner of the child(ren)'s biological parent, but is not the biological parent of at least one child in the family.

Adoptive Parents/Foster Family: Includes adoptive parents and foster family.

Other Relative: Any other relative, adult or child, who had contact with the investigated child (e.g., grandparent, aunt/uncle, sibling).

Family Friend: Friend of the caregiver(s) living with the child.

Parent's Boyfriend/Girlfriend: Parent's partner not in a caregiving role.

Child's Friend (Peer): Another child considered a friend or peer.

Babysitter: An individual of any age in a babysitting role to the child.

Teacher: Includes teachers but not other school personnel (e.g., caretakers)

Other Professional: Includes recreation, health, and social service professionals.

Other Acquaintance: An individual known to the child's family.

As shown in Table 4-4(a) and Table 4-4(b), most substantiated investigations involved allegations against parents: biological mothers (51%), biological fathers (50%), stepfathers/common-law partners (12%), and stepmothers/common-law partners (2%). It should be noted that in many instances, non-familial allegations of abuse are investigated by the police, not by a child welfare service.⁵⁵ At least one parent was a perpetrator in 89% of maltreatment investigations (see Appendix H, Table 3). Other than parents, relatives were the most frequently identified perpetrators (6%). Only 3% of all substantiated maltreatment investigations involved non-family perpetrators, as shown in Table 4-4(a). Less than 1% involved allegations against a teacher or another professional working with the child.

Physical Abuse: Perpetrators in cases with physical abuse as the primary substantiated concern were evenly split between mothers and fathers, with female parents being substantiated in 52% of cases (49% biological mothers and 3% stepmothers), and male parents in 51% of cases (42% biological fathers and 9% stepfathers). This distribution is somewhat biased by the fact that 42% of physical abuse victims were living in lone female-parent families (see Table 7-1). The alleged roles of mothers and fathers in two-parent families are somewhat different, with fathers being perpetrators of 65% of substantiated physical abuse, and mothers in 52% of substantiated physical abuse (see Appendix H, Table 4).

Eleven percent of cases where physical abuse was the primary substantiated concern involved other relatives as perpetrators.

Sexual Abuse: In contrast to physical abuse cases, non-parental figures were most often the perpetrators in cases where sexual abuse was the primary substantiated maltreatment. Non-parental relatives represented the largest group of perpetrators (40%), followed by step-fathers (17%), biological fathers (12%), biological mothers (8%), and other acquaintances (7%).

It is important to note that many sexual abuse allegations involving non-family members are investigated by the police alone, and child welfare services are only involved if there are concerns about the ongoing protection of the child or if other children may be at risk of abuse.

Neglect: Biological mothers were considered to be perpetrators in 84% of cases where neglect was the primary substantiated concern. The over-representation of biological mothers in this category should be interpreted with caution, given that 42% of substantiated neglect investigations involved lone female-parent families (see Table 7-1). Fathers/stepfathers were considered to be perpetrators in 43% of cases of substantiated neglect (34% biological fathers and 9% stepfathers).

⁵⁵ Trocmé, N. & Brison, R. (1998). Homicide and injuries due to assault and to abuse and neglect. In: Beaulne G (ed.). *For the safety of Canadian children and youth: from data to preventive measures*. Ottawa: Health Canada.

Emotional Maltreatment: Biological fathers/stepfathers were considered perpetrators in 59% and mothers/stepmothers in 68% of investigations where substantiated emotional maltreatment was the primary concern.

Exposure to Domestic Violence: Biological fathers/stepfathers were considered to be responsible for exposure to domestic violence in 89% of child maltreatment investigations where exposure to domestic violence was the primary substantiated concern. Mothers/stepmothers were considered to have failed to protect their child(ren) from exposure to domestic violence in 24% of these cases. It should be noted that the concept of perpetrator in cases of exposure to domestic violence should be interpreted with caution. Child welfare investigations focus primarily on the question of the parent’s ability to protect a child from exposure to the violence rather than identifying the perpetrator of the violence.⁵⁶

Table 4-4(a)
Identified Perpetrator (Relatives) by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Relatives												
Biological Mother	49%	6,949	8%	116	84%	13,108	66%	5,763	22%	4,122	51%	30,058
Biological Father	42%	5,890	12%	172	34%	5,241	49%	4,245	74%	13,685	50%	29,233
Stepfather	9%	1,329	17%	256	9%	1,436	10%	891	15%	2,857	12%	6,769
Stepmother	3%	377	0%	–	1%	161	2%	209	2%	268	2%	1,015
Foster Family/ Adoptive Parents	2%	262	0%	–	1%	224	3%	219	1%	154	2%	859
Other Relative	11%	1,539	40%	589	5%	697	8%	707	1%	219	6%	3,751
Child Investigations With At Least One Relative Perpetrator												
	97%	13,597	76%	1,134	99%	15,468	99%	8,589	95%	17,586	97%	56,374
Child Investigations With At Least One Non-Relative Perpetrator												
	4%	574	26%	382	4%	617	4%	309	3%	553	4%	2,415
Total Child Investigations*												
	14,054		1,490		15,660		8,703		18,518		58,425	

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about alleged perpetrators. Columns are not additive as maltreatment may have involved more than one perpetrator. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total.

⁵⁶ For the purposes of this report, caregivers who were identified in the Caregiver Functioning Checklist as victims of domestic violence and as perpetrators of domestic violence were not coded as perpetrators of exposure to domestic violence.

Table 4-4(b)
Identified Perpetrator (Non-Relatives) by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Non-Relatives												
Family Friend	0%	–	2%	–	1%	149	0%	–	0%	–	0%	259
Parent's Boyfriend/Girlfriend	0%	–	0%	–	1%	127	0%	–	2%	418	1%	604
Child's Friend (Peer)	1%	–	7%	–	0%	–	0%	–	0%	–	0%	165
Babysitter/Babysitter's Family	0%	–	4%	–	1%	–	0%	–	0%	–	0%	177
Day Care Provider/Teacher/Other Professional	1%	–	1%	–	0%	–	0%	–	0%	–	0%	129
Other Acquaintance	0%	–	7%	107	0%	–	1%	–	0%	–	0%	231
Stranger/Unknown	0%	–	4%	–	0%	–	0%	–	0%	–	0%	–
Child Investigations With At Least One Non-Relative Perpetrator	2%	319	24%	356	3%	424	2%	148	2%	418	3%	1,665
Child Investigations With At Least One Relative Perpetrator	96%	13,518	75%	1,118	99%	15,435	99%	8,589	99%	18,237	99%	56,897
Total Child Investigations*		14,054		1,490		15,660		8,703		18,518		58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about alleged perpetrators. Columns are not additive as maltreatment may have involved more than one perpetrator. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total.

■ 5. SERVICE DISPOSITIONS

Six service dispositions were documented by the OIS-2003 Maltreatment Assessment Form: (1) previous child welfare contact (2) provision of ongoing child welfare services; (3) referrals to other services; (4) placement of children in out-of-home care; (5) application to child welfare court; and (6) police involvement and criminal charges for child maltreatment and for domestic violence. The data presented in this chapter should be interpreted with care because they track only case events that occurred during the initial child welfare investigation. Additional referrals for services, admissions to out-of-home care, court applications, and criminal charges are likely to occur for cases kept open after the initial investigation. It should also be noted that investigation intervention statistics presented in this chapter apply only to child welfare cases open because of alleged maltreatment. Children referred to child welfare services for reasons other than child maltreatment (e.g., behavioural or emotional problems, see chapter 2) may have been admitted to care or been subject to child welfare court proceedings, but were not tracked by the OIS-2003. Selected comparisons with the findings from the OIS-1993 and OIS-1998 are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 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 services, (2) reported cases that were screened out by child welfare services before being fully investigated, (3) new reports on cases already open by child welfare services, and (4) cases that were investigated only by the police.

The tables in this chapter present information for each of the specific child welfare interventions in terms of the number of child investigations and the primary form of substantiated maltreatment.

Previous Investigations and Time Since Most Recent Opening

Previous Investigations

Tables 5-1(a) and (b) show the following case information: the numbers of previous child welfare contacts and the amount of time since the most recent child welfare contact. The data are presented by primary category of substantiated maltreatment.

Forty-two percent of investigations (an estimated 24,244 children) of substantiated maltreatment had no previous case openings. Eighteen percent had more than three previous case openings.

Table 5-1(a)
Previous Case Opening by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
No Previous Openings	46%	6,502	41%	608	31%	4,875	37%	3,189	49%	9,070	42% 24,244
One Previous Opening	21%	2,912	22%	324	18%	2,850	19%	1,617	24%	4,404	21% 12,107
2–3 Previous Openings	18%	2,536	16%	241	23%	3,529	23%	2,025	13%	2,467	18% 10,798
More than 3 Previous Openings	13%	1,858	14%	207	27%	4,235	21%	1,841	12%	2,299	18% 10,440
Unknown Record	2%	227	7%	111	1%	171	0%	–	2%	278	1% 801
Total Investigations*	100%	14,035	100%	1,491	100%	15,660	100%	8,686	100%	18,518	100% 58,390

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,191 substantiated child maltreatment investigations with information about previous child welfare contacts. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column percentages may add up to 99% or 101% because of rounding.

Physical Abuse: In 52% of cases where substantiated physical abuse was the primary maltreatment, the family had at least one previous case opening (an estimated 7,306 child investigations).

Sexual Abuse: Fifty-two percent of cases where sexual abuse was the primary substantiated concern involved children whose family had at least one previous case opening (an estimated 772 child investigations).

Neglect: Investigations where neglect was the primary substantiated maltreatment had the highest rate of previous case opening: 68% (an estimated 10,614 child investigations).

Emotional Maltreatment: Sixty-three percent of cases where emotional maltreatment was the primary substantiated concern involved children whose family had at least one previous case opening (an estimated 5,483 child investigations).

Exposure to Domestic Violence: Cases where exposure to domestic violence was the primary substantiated maltreatment had the lowest rate of previous case opening (49%, involving an estimated 9,170 children).

Time Since Most Recent Opening

For cases with a previous child welfare service history, Table 5-1(b) illustrates the time passed since the family last had a case open. Although 42% of substantiated maltreatment investigations had no previous

case history, 34% had previous histories that had been closed within 12 months of the OIS-2003 investigation, while another 22% had previous histories that had been closed for more than 12 months.

Physical Abuse: Thirty percent of child maltreatment investigations where physical abuse was the primary substantiated concern had previous histories and had been closed within 12 months.

Sexual Abuse: In contrast, 18% of investigations where sexual abuse was the primary substantiated maltreatment had been closed within 12 months of the current investigation.

Neglect: Forty-two percent of investigations where neglect was the primary substantiated concern had previous histories and had been closed within 12 months.

Emotional Maltreatment: Forty-one percent of investigations where emotional maltreatment was the primary substantiated concern had been closed within the past 12 months.

Exposure to Domestic Violence: Twenty-nine percent of investigations where exposure to domestic violence was the primary substantiated concern had been closed within the past 12 months.

Table 5-1(b)
Time Since Case Was Last Closed by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Previous Opening	46%	6,502	41%	608	31%	4,875	37%	3,189	49%	9,070	42%	24,244
Time Since Most Recent Closing												
Less than 3 Months	7%	996	2%	–	10%	1,512	17%	1,519	10%	1,824	10%	5,881
3–6 Months	10%	1,450	8%	124	14%	2,257	10%	906	10%	1,780	11%	6,517
7–12 Months	13%	1,881	8%	113	18%	2,889	14%	1,176	9%	1,626	13%	7,685
13–24 Months	8%	1,192	13%	187	13%	2,045	9%	788	9%	1,758	10%	5,970
More than 24 Months	13%	1,787	20%	302	11%	1,766	11%	977	12%	2,148	12%	6,980
Unknown	2%	227	7%	111	1%	171	0%	–	2%	278	1%	801
Total Child Investigations*	100%	14,035	99%	1,491	99%	15,660	99%	8,686	100%	18,518	100%	58,390

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,191 substantiated child maltreatment investigations with information about previous case opening(s). Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column percentages may add up to 99% or 101% because of rounding.

Ongoing Child Welfare Services

Investigating workers were asked whether the investigated case would remain open for ongoing child welfare services after the initial investigation (Table 5-2). Workers completed these questions on the basis of the information available at that time or upon completion of the intake investigation. An estimated 23,013 (39%) substantiated child maltreatment investigations were identified as remaining open for ongoing services while an estimated 35,393 (61%) substantiated investigations were to be closed.

Physical Abuse: An estimated 30% (4,182) of all cases where physical abuse was the primary substantiated maltreatment remained open for ongoing child welfare services, while the remaining 70% (9,872) were closed following the initial investigation.

Sexual Abuse: Thirty-four percent of cases that indicated sexual abuse as the primary substantiated maltreatment (an estimated 500 child investigations) remained open for ongoing services, while the remaining 990 cases were closed at the completion of the investigation.

Neglect: Fifty-three percent of cases where neglect was identified as the primary substantiated maltreatment (an estimated 8,360 child investigations) remained open for ongoing child welfare service – the highest percentage of the five primary categories of substantiated maltreatment.

Emotional Maltreatment: Forty-five percent (an estimated 3,924 child investigations) of cases where emotional maltreatment was the primary substantiated maltreatment were indicated as remaining open for ongoing services.

Exposure to Domestic Violence: Thirty-three percent of cases that identified exposure to domestic violence as the primary substantiated maltreatment (an estimated 6,047 child investigations) remained open following the end of the initial investigation.

Table 5-2
Ongoing Child Welfare Services by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment					Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence	
Case to Be Closed	70% 9,872	66% 990	47% 7,281	55% 4,779	67% 12,471	61% 35,393
Case to Stay Open	30% 4,182	34% 500	53% 8,360	45% 3,924	33% 6,047	39% 23,013
Total Child Investigations*	100% 14,054	100% 1,490	100% 15,641	100% 8,703	100% 18,518	100% 58,406

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,192 substantiated child maltreatment investigations with information about case status. Column percentages may add up to 99% or 101% because of rounding.

Referrals to Support Services (Child and Family)

The OIS-2003 tracked referrals made to programs designed to offer services beyond the parameters of “ongoing child welfare services.” Workers were asked to indicate all applicable referral classifications identified for the family or child. This included referrals made internally to a specialized program provided by a child welfare agency/office as well as referrals made externally to other agencies or services. A referral selection was meant to indicate that a formal referral had been made, not whether the child or family had actually started to receive services.

Sixteen referral categories were tracked:

Parent Support Program: Any group program designed to offer support or education (e.g., Parents Anonymous, parenting instruction course, Parent Support Association).

In-home Parenting Support: Home based support services designed to support families, reduce the risk of out-of-home placement, or reunify children in care with their family.

Other Family/Parent Counseling: Include programs for family therapy/counseling or couple counseling (e.g., family service bureau, mental health centre).

Drug/Alcohol Counseling: Addiction programs (any substance) for caregiver(s) or children.

Welfare/Social Assistance: Referral for social assistance to address financial concerns of the household.

Food Bank: Referral to any food bank.

Shelter Services: Regarding family violence or homelessness.

Domestic Violence Services: Referral for services/counseling regarding domestic violence, abusive relationships, or the effects of witnessing violence.

Psychiatric/Psychological Services: Child or parent referral to psychological or psychiatric services (trauma, high-risk behaviour, or intervention).

Special Education Referral: Any specialized school program to meet a child’s educational, emotional, or behavioural needs.

Recreational Program: Referral to a community recreational program (e.g., organized sports leagues, community recreation, Boys and Girls Clubs).

Victim Support Program: Referral to a victim support program (e.g., sexual abuse disclosure group)

Medical/Dental Services: Any specialized service to address the child's immediate medical or dental health needs.

Child/Day Care: Any paid child/day care services, including staff-run and in-home services.

Cultural Services: Services to help children or families strengthen their cultural heritage.

Other Child/Family Referral: Any other child or family-focused referral.

Table 5-3 details the breakdown of other service referrals and the primary category of substantiated maltreatment as a proportion of cases with substantiated maltreatment.

A minimum of one referral was made in 57% of substantiated maltreatment cases, an estimated 33,383 investigations. The most common type of referral was for other family or parent counseling (an estimated 17,294 child investigations), followed by domestic violence services (10,288 child investigations), parent support group (6,619 child investigations), drug or alcohol counseling (5,755 child investigations) and in-home parenting support (5,319 child investigations).

Physical Abuse: Fifty-five percent of all cases with physical abuse as the primary substantiated maltreatment had at least one referral (an estimated 7,662 cases). The most frequent referrals for cases where physical abuse was the primary substantiated maltreatment include: other family or parent counseling (an estimated 4,986 cases; 36% of cases with substantiated maltreatment) parent support groups (an estimated 2,258 cases; 16% of cases with substantiated maltreatment), in-home parenting support (1,601 cases; 11% of cases with substantiated maltreatment), and psychiatric or psychological services (1,121 cases; 8% of cases with substantiated maltreatment).

Sexual Abuse: A minimum of one referral was made in 70% of all cases with sexual abuse as the primary substantiated maltreatment (an estimated 1,040 cases). In cases of sexual abuse the referral pattern was different from other forms of maltreatment with other family or parent counseling (52%), psychiatric or psychological referrals (25%) and victim support services (19%) being used the most often.

Neglect: At least one service referral was made in 51% of all cases with neglect as the primary substantiated maltreatment (an estimated 7,930 cases). The most commonly used referral categories in cases of neglect were other family or parent counseling (21%), in-home parenting support (13%), drug or alcohol counseling (10%), parent support group (10%), other referrals (9%) and psychiatric or psychological counseling (8%).

Table 5-3
Referrals to Support Services by Primary Category of Substantiated Child Maltreatment Investigations in Ontario, in 2003*

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
In Home Parenting Support	11%	1,601	5%	–	13%	1,997	11%	992	4%	660	9%	5,319
Parent Support Group	16%	2,258	18%	264	10%	1,568	15%	1,319	7%	1,210	11%	6,619
Other Family/Parent Counseling	36%	4,986	52%	769	21%	3,247	31%	2,692	30%	5,600	30%	17,294
Drug/Alcohol Counseling	5%	685	0%	–	10%	1,636	12%	1,002	13%	2,427	10%	5,755
Welfare/Social Assistance	2%	282	1%	–	5%	758	4%	379	3%	610	4%	2,038
Food Bank	2%	308	0%	–	5%	712	4%	361	3%	609	3%	1,990
Shelter Services	3%	353	1%	–	3%	420	6%	495	8%	1,401	5%	2,678
Domestic Violence Services	7%	1,029	3%	–	5%	784	14%	1,224	39%	7,214	18%	10,288
Psychiatric/Psychological Services	8%	1,121	25%	368	8%	1,209	14%	1,188	6%	1,080	9%	4,966
Special Education Referral	1%	–	0%	–	2%	303	1%	–	0%	–	1%	481
Recreational Program	2%	337	0%	–	4%	541	2%	138	1%	113	2%	1,129
Victim Support Program	2%	297	19%	285	1%	207	5%	439	14%	2,633	7%	3,861
Medical/Dental Services	3%	479	4%	–	7%	1,150	3%	270	2%	293	4%	2,249
Child/daycare	1%	146	0%	–	5%	780	3%	267	1%	246	3%	1,439
Cultural Services	2%	297	6%	–	2%	337	2%	181	2%	450	2%	1,360
Other Referral	7%	964	16%	239	9%	1,369	6%	493	6%	1,025	7%	4,090
At Least One Referral Noted	55%	7,662	70%	1,040	51%	7,930	60%	5,212	62%	11,539	57%	33,383
No Family or Child Referral	46%	6,392	30%	450	49%	7,730	40%	3,491	38%	6,979	43%	25,042
Total Substantiated Investigations **	100%	14,054	100%	1,490	100%	15,660	100%	8,703	100%	18,518	100%	58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding. Table 5-3 of the *CIS-2003 Major Findings Report* refers only to substantiated investigations where a referral has been made.

** Column totals for Tables 5-3 are more than the total number of children for whom at least one referral was made because there can be several different referrals made for a child or his/her family.

Emotional Maltreatment: A minimum of one service referral was made in 60% of all cases with emotional maltreatment as the primary substantiated maltreatment (an estimated 5,212 cases). The most common referral types were: other family or parent counseling (31%), parent support groups (15%), domestic violence supports (14%), psychological or psychiatric services (14%) and drug or alcohol counseling (12%).

Exposure to Domestic Violence: At least one referral was made in 62% of all cases with domestic violence as the primary substantiated maltreatment (an estimated 11,539 cases). The most common referrals were domestic violence services (39%), other family or parent counseling (30%), victim support services (14%), drug or alcohol counseling (13%) and shelter services (8%).

Out-of-Home Placement

Admissions to out-of-home care at any time during the investigation were tracked. If there were multiple placements, workers were asked to indicate the setting where the child had spent the most time. The following placement classifications were used:

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

Placement Is Being Considered: At this point of the investigation, an out-of-home placement is still being considered.

Informal Kinship Care: An informal placement has been arranged within the family support network (kinship care, extended family, traditional care), the child welfare authority does not have temporary custody.

Kinship Foster Care: A formal placement has been arranged within the family support network (kinship care, extended family, customary care), the child welfare authority has temporary or full custody and is paying for the placement.

Other Family Foster Care: Includes any family based care, including foster homes, specialized treatment foster homes, and assessment homes.

Group Home Placement: An 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.

As shown in Table 5-4, 6% of all substantiated child investigations (an estimated 3,453 child investigations) led to a child being placed in formal child welfare care (kinship foster care, other family foster care, group home, or residential or secure treatment) during the initial investigation. An additional 4% of substantiated maltreatment investigations resulted in children being placed in informal kinship care, while placement was considered in a further 3% of substantiated child maltreatment investigations. In total, 10% percent of children experienced a change of residence during or at the conclusion of the initial substantiated maltreatment investigation.

Physical Abuse: Placement in child welfare care (kinship foster care, other family foster care, group home, or residential or secure treatment) occurred in 6% of investigations where physical abuse was the primary substantiated maltreatment. Of these, other family foster care was noted most frequently (3%). An additional 4% of substantiated physical abuse investigations resulted in children being placed in informal kinship care.

Sexual Abuse: Nine percent of cases where sexual abuse was identified as the primary substantiated maltreatment led to a child being placed in child welfare care (kinship foster care, other family foster care, group home or residential/secure treatment). No children in this category were placed in informal kinship care placements.

Neglect: Child victims of neglect experienced the greatest rate of placement with an estimated 17% of children being moved to a placement outside of their home. A child welfare placement (kinship foster care, other family foster care, group home or residential/secure treatment) occurred for 11% of all investigations that indicated neglect as the primary substantiated maltreatment, primarily in other foster family care (7%). A child placement in informal kinship care occurred for an additional 6% of the substantiated neglect investigations, while placement was considered for an additional 5%.

Emotional Maltreatment: Placement in child welfare care (kinship foster care, other family foster care, group home or residential/secure treatment) occurred in 6% of cases that identified emotional maltreatment as the primary substantiated maltreatment. An additional 4% of these investigations led to children being placed in informal kinship care, while placement was considered for a further 3% of cases.

Exposure to Domestic Violence: Children exposed to domestic violence experienced the lowest rates of placement. Only 2% of investigations where exposure to domestic violence was the primary substantiated maltreatment resulted in child welfare placement (other family foster care). Placements in informal care occurred in an additional 2% of these cases, while placement was considered in another 1% of cases.

Table 5-4
Out-of-Home Placement by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Placement Required	87%	12,247	88%	1,306	77%	12,124	88%	7,684	95%	17,548	87%	50,909
Placement Considered	3%	463	4%	–	5%	805	3%	295	1%	201	3%	1,823
Informal Kinship Care	4%	544	–	–	6%	984	4%	320	2%	327	4%	2,175
Child Welfare Placement:												
Kinship Foster Care	1%	–	2%	–	2%	278	1%	–	0%	–	1%	476
Other Family Foster Care	3%	426	1%	–	7%	1,153	3%	230	2%	394	4%	2,212
Group Home	1%	142	3%	–	1%	212	1%	–	0%	–	1%	456
Residential/Secure Treatment	1%	102	3%	–	1%	104	1%	–	0%	–	< 1%	309
Total Child Investigations*	100%	14,020	100%	1,490	100%	15,660	100%	8,691	100%	18,499	100%	58,360

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,189 substantiated child maltreatment investigations with information about placement. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column percentages may add up to 99% or 101% because of rounding.

Child Welfare Court Involvement

Application to child welfare court can be made for an order of supervision (child remaining in the home), temporary wardship (for a set time period), or permanent wardship. The OIS-2003 tracked the number of applications made or being considered during the initial investigation, but did not track the types of applications. Because applications may have been made at a point following the OIS-2003 study period, the OIS-2003 court involvement figures should be treated as underestimates of the true rate of court involvement. Court status was tracked in terms of three possible worker responses:

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

Application Considered: The child welfare worker was considering whether or not to submit an application to child welfare court.

No Application Considered: Court involvement was not considered.

In addition, the OIS-2003 tracked referrals to mediation or alternative response models. These options are not available in all Ontario jurisdictions.

As shown in Table 5-5, 6% of all substantiated child investigations (an estimated 3,357) resulted in an application to child welfare court during or at the completion of the initial investigation. In an additional 5% of substantiated maltreatment investigations, an application to child welfare court was considered. A referral to mediation or an alternative response was made in 2% of all substantiated maltreatment investigations.

Physical Abuse: Applications to child welfare court were made in 5% of cases where physical abuse was the primary substantiated concern (an estimated 753 child investigations) while applications were considered for an additional 4%. Referrals to mediation or alternative response were made in 2% of investigations where substantiated physical abuse was the primary maltreatment.

Sexual Abuse: Applications to child welfare court were made in 9% of investigations where sexual abuse was the primary substantiated concern.

Neglect: Applications to child welfare court were most frequently made in investigations where neglect was the primary substantiated maltreatment (11%). Applications to court were considered in an additional 6% of substantiated neglect investigations. Referrals to either mediation or other alternative responses were made for 1% of investigations with neglect as the primary maltreatment.

Emotional Maltreatment: An application to child welfare court was made in 5% and considered in an additional 7% of investigations where emotional maltreatment was identified as the primary substantiated concern. A referral to mediation or alternative response was made in 4% of cases with substantiated emotional maltreatment as the primary maltreatment.

Exposure to Domestic Violence: An application to child welfare court was made in 2% of investigations where exposure to domestic violence was the primary substantiated maltreatment, while an application was considered in an additional 3%. Referrals to mediation or alternative response were made in 2% of investigations where exposure to domestic violence was the primary substantiated maltreatment.

Table 5-5
Applications to Child Welfare Court and Mediation/Alternative Response
by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

Child Welfare Court*	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Court Considered	91%	12,765	86%	1,289	83%	13,014	88%	7,659	95%	17,632	90%	52,359
Application Considered	4%	535	5%	–	6%	920	7%	633	3%	506	5%	2,669
Application Made	5%	753	9%	126	11%	1,726	5%	392	2%	360	6%	3,357
Total Child Investigations	100%	14,053	100%	1,490	100%	15,660	100%	8,684	100%	18,498	100%	58,385
Mediation/Alternative Response**												
No Mediation/Alternative Response	98%	12,415	98%	1,294	99%	14,058	96%	7,159	98%	15,779	98%	50,705
Referral to Mediation/Alternative Response*	2%	249	2%	–	1%	172	4%	279	2%	329	2%	1,060
Total Child Investigations	100%	12,664	100%	1,325	100%	14,230	100%	7,438	100%	16,108	100%	51,765

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* Based on a sample of 3,191 substantiated child maltreatment investigations with information about Child Welfare Court.
** Based on a sample of 2,871 substantiated child maltreatment investigations with information about Mediation/Alternative Response. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column percentages may add up to 99% or 101% because of rounding.

Police Involvement and Criminal Charges

In many jurisdictions in Ontario there are detailed protocols between child welfare and police services, resulting in rising levels of co-operation. This co-operation includes cases of physical and sexual abuse as well as cases of domestic violence. Most jurisdictions require police to report adult domestic violence cases to the child welfare authorities if children are living in the family. The OIS-2003 captured information about police involvement in adult domestic violence cases as well as in all other child maltreatment investigations.

As with the other interventions during investigations described in this chapter, the OIS-2003 tracked only events that occurred during the initial child welfare investigation; it is therefore possible that police decided to lay charges or became involved in some cases after the OIS-2003 information forms had been completed. It should be noted further that the police also investigate many non-familial child maltreatment cases that do not involve child welfare services.⁵⁷

⁵⁷ See for example: Trocmé, N. & Brison, R. (1998) Homicide and injuries due to assault and to abuse and neglect. In: Beaulne G (ed) *For the safety of Canadian children and youth: from data to prevention measures*. Ottawa: Health Ontario.

As illustrated in Table 5-6, 18% of substantiated child maltreatment investigations involved a police investigation related to the maltreatment in addition to a child welfare investigation (an estimated 10,430). Criminal charges were laid in 5% of substantiated child maltreatment investigations and were considered for an additional 1%.

Physical Abuse: A police investigation for child maltreatment occurred in 25% of cases where physical abuse was identified as the primary substantiated maltreatment (an estimated 3,525 child investigations). Charges were laid for 8% and considered for an additional 2% at the end of the initial child welfare investigation period. The police investigated but did not lay charges in 15% of cases that indicated physical abuse as the primary substantiated maltreatment.

Sexual Abuse: Seventy-six percent of all cases that indicated sexual abuse as the primary substantiated maltreatment involved a police investigation for child maltreatment (an estimated 1,125 child investigations). Charges were laid for 43% of cases where sexual abuse was the primary substantiated maltreatment category, while charges were considered for an additional 15%. The police investigated but did not lay charges in 18% of cases that indicated sexual abuse as the primary substantiated maltreatment.

Neglect: Twenty-one percent of all cases with neglect as the primary substantiated maltreatment included a police investigation (an estimated 3,269 child investigations). Charges were laid for 4% of cases where neglect was the primary substantiated maltreatment category, while charges were considered in 1%. The police investigated but did not lay charges in 16% of cases that indicated neglect as the primary substantiated maltreatment.

Table 5-6
Police Investigations and Charges Laid by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
No Police Investigation	75%	10,516	24%	366	79%	12,391	85%	7,393	93%	17,302	82% 47,968
Police Investigation, No Charges Laid	15%	2,109	18%	266	16%	2,506	12%	1,054	4%	698	12% 6,633
Police Investigation, Charges Considered	2%	337	15%	222	1%	125	0%	–	0%	–	1% 684
Police Investigation, Charges Laid	8%	1,079	43%	637	4%	638	3%	242	3%	517	5% 3,113
Total Child Investigations*	100%	14,041	100%	1,491	100%	15,660	100%	8,689	100%	18,517	100% 58,398

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* Based on a sample of 3,191 substantiated child maltreatment investigations with information about police investigations and police charges. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column percentages may add up to 99% or 101% because of rounding.

Emotional Maltreatment: A police investigation for child maltreatment was conducted in 15% of investigations where emotional maltreatment was identified as the primary substantiated concern. Charges were laid in 3%. The police investigated but did not lay charges in 12% of cases when substantiated emotional maltreatment was the primary investigation concern.

Exposure to Domestic Violence: Seven percent of all cases that identified exposure to domestic violence as the primary concern resulted in a police investigation for maltreatment (an estimated 1,215 child investigations). Charges were laid for 3% of cases where exposure to domestic violence was the primary substantiated maltreatment category, while police investigated but did not lay charges in 4% of cases when substantiated exposure to domestic violence was the primary investigation concern. It is important to note that many cases of exposure to domestic violence included police investigations specific to the domestic violence, but not to the question of child exposure to the violence as a form of maltreatment.

■ 6. CHILD CHARACTERISTICS

This chapter provides a description of children investigated for reported maltreatment with respect to their age, sex, functioning, and Aboriginal status in terms of the five primary categories of maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence). Selected comparisons with the findings from the OIS-1993 and OIS-1998 are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 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 services, (2) reported cases that were screened out by child welfare services before being fully investigated, (3) new reports on cases already open by child welfare services, and (4) cases that were investigated only by the police.

Age and Sex of Investigated Children

Table 6-1 presents the age and sex of investigated children and the incidence of substantiated maltreatment by age and sex. The incidence of substantiated maltreatment was similar for males (25.13 per thousand boys) and females (23.71 per thousand girls). As with investigations there was some variation by age and sex in incidence rates with incidence rates being highest for infants (24.55 substantiated cases per thousand female infants and 24.87 per thousand male infants). Rates of maltreatment were similar by sex for infants to 7 year olds, while males were more often represented in the 8 to 11 year old group and females more often in the adolescent group.

Table 6-2 presents the age and sex of children by the primary substantiated categories of maltreatment.

Physical Abuse: Sixty percent of cases where physical abuse was the primary substantiated maltreatment (an estimated 8,417 child investigations) involved males and 40% involved females (an estimated 5,637 child investigations). The larger proportion of males is particularly noteworthy in the 8 to 11 year old group where an estimated 3,320 substantiated investigations involved males compared to an estimated 1,461 substantiated investigations involving females. By adolescence, 46% of substantiated investigations involved females aged 12 to 15 compared to 54% for males.

Sexual Abuse: Sixty-five percent of cases where sexual abuse was indicated as the primary substantiated maltreatment (an estimated 974 child investigations) involved female children, while 35% (an estimated 517 child investigations) involved males. The proportion of males to females

Table 6-1
Child Age and Sex in Investigated and Substantiated Child Maltreatment Investigations in Ontario in 2003

		Investigated Maltreatment*		Substantiated Maltreatment**	
		Number of Investigations	Incidence Per 1,000 Children	Number of Substantiated Cases	Incidence Per 1,000 Children
0–15	All Children	128,111	53.59	58,423	24.44
	Females	60,791	52.20	27,615	23.71
	Males	67,320	54.91	30,808	25.13
0–3 Years	Females	13,286	51.43	6,342	24.55
	Males	14,590	53.88	6,734	24.87
	< 1 Year				
	Females	3,886	63.86	2,042	33.56
	Males	4,351	67.47	2,107	32.67
	1 Year				
	Females	3,077	47.44	1,344	20.72
	Males	2,932	43.04	1,421	20.86
	2 Years				
	Females	3,292	50.32	1,486	22.71
	Males	3,754	55.22	1,640	24.12
	3 Years				
	Females	3,031	45.09	1,470	21.87
	Males	3,553	50.61	1,566	22.31
4–7 Years	Females	15,568	53.37	7,037	24.13
	Males	17,279	56.23	7,717	25.11
	4 Years				
	Females	3,684	52.97	1,494	21.48
	Males	4,112	56.67	1,933	26.64
	5 Years				
	Females	4,513	61.68	2,087	28.52
	Males	4,204	54.66	1,917	24.93
	6 Years				
	Females	3,547	47.64	1,724	23.15
	Males	4,601	58.06	1,779	22.45
7 Years					
Females	3,824	51.33	1,732	23.25	
Males	4,362	55.52	2,088	26.58	
8–11 Years	Females	15,965	51.29	7,111	22.84
	Males	20,160	61.48	9,329	28.45
	8 Years				
	Females	4,669	61.39	2,117	27.83
	Males	5,510	68.62	2,901	36.13
	9 Years				
	Females	3,977	50.94	1,833	23.48
	Males	5,172	63.56	2,471	30.37
	10 Years				
	Females	3,719	47.62	1,440	18.44
	Males	5,133	61.75	2,150	25.86
11 years					
Females	3,600	45.54	1,721	21.77	
Males	4,345	52.28	1,807	21.74	
12–15 Years	Females	15,972	52.66	7,125	23.49
	Males	15,291	47.78	7,028	21.96
	12 Years				
	Females	3,462	45.32	1,706	22.33
	Males	4,259	53.11	1,955	24.38
	13 Years				
	Females	3,907	52.40	1,755	23.54
	Males	4,193	53.29	1,883	23.93
	14 Years				
	Females	4,287	56.56	1,707	22.52
	Males	3,444	43.13	1,636	20.49
15 Years					
Females	4,316	56.35	1,957	25.55	
Males	3,395	41.77	1,554	19.12	

* Based on 7,172 child maltreatment investigations.

** Based on 3,193 substantiated child maltreatment investigations.

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Table 6-2
Age and Sex of Investigated Children by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment						Total					
	Physical Abuse		Sexual Abuse		Neglect	Emotional Maltreatment		Exposure to Domestic Violence				
0–3 Years		1,109		177		3,887		1,981		5,923		13,077
Female	55%	502	44%	–	42%	1,627	66%	1,308	48%	2,828	48%	6,342
Male	45%	607	56%	100	58%	2,260	34%	673	52%	3,095	52%	6,735
4–7 Years		3,276		362		3,898		2,267		4,954		14,757
Female	43%	1,425	44%	161	44%	1,713	58%	1,324	49%	2,416	48%	7,039
Male	57%	1,851	56%	201	56%	2,185	42%	943	51%	2,538	52%	7,718
8–11 Years		4,781		381		4,152		2,514		4,610		16,438
Female	31%	1,461	70%	268	43%	1,774	50%	1,261	51%	2,345	43%	7,109
Male	69%	3,320	30%	113	57%	2,378	50%	1,253	49%	2,265	57%	9,329
12–15 Years		4,888		571		3,723		1,941		3,030		14,153
Female	46%	2,249	82%	468	51%	1,880	52%	1,018	50%	1,510	50%	7,125
Male	54%	2,639	18%	103	49%	1,843	48%	923	50%	1,520	50%	7,028
Total		14,054		1,491		15,660		8,703		18,517		58,425
Female	40%	5,637	65%	974	45%	6,994	57%	4,911	49%	9,099	47%	27,615
Male	60%	8,417	35%	517	55%	8,666	44%	3,792	51%	9,418	53%	30,810

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* Based on a sample of 3,193 substantiated child maltreatment investigations with information about child age and sex. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row and column percentages may add up to 99% or 101% because of rounding.

varies considerably by age group. There were approximately the same number of male and female victims amongst children under eight, with slightly more males in the 4 to 7 age group and the infant to three year old age group. Females, however, constituted 70% of the 8 to 11 year old victims and 82% of the adolescent victims.

Neglect: Fifty-five percent of cases with neglect as the primary substantiated maltreatment (an estimated 8,666 child investigations) involved male children, while 45% (an estimated 6,994 child investigations) involved females. The proportion of males is higher for the infant to three (58%), the 4 to 7 (56%) and the 8 to 11 (57%) age groups, while there is a slightly higher percentage of females in the 12 to 15 (51%) age group.

Emotional Maltreatment: Fifty-seven percent of cases with emotional maltreatment identified as the primary substantiated maltreatment (an estimated 4,911 child investigations) involved female children, while 44% involved males (an estimated 3,792 child investigations). The proportion between males and females is even for the 8 to 11 (50% each) age group, while there is a higher percentage of females in the infant to three (66%), 4 to 7 (58%) and 12 to 15 (52%) age groups.

Exposure to Domestic Violence: Fifty-one percent of cases with exposure to domestic violence indicated as the primary substantiated maltreatment involved male children (an estimated 9,418 child investigations), while 49% involved females (an estimated 9,099 child investigations). The proportion of males to females is very even for all age groups with the exception of the infant to three age category where there was a higher proportion of males (52%) to females (48%).

Child Functioning

Child functioning was documented on the basis of a checklist of problems that child welfare workers were likely to be aware of as a result of their investigation. The child functioning checklist (see Appendix C, Maltreatment Assessment Form) 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.⁵⁸ The checklist documents only problems that child welfare workers became aware of during their investigation and therefore undercounts the occurrence of child functioning problems.⁵⁹ Nevertheless, it provides an important estimate of the types of concerns that are identified during child maltreatment investigations.

Investigating workers were asked to indicate problems that had been confirmed by a formal diagnosis and/or directly observed, as well as issues that they suspected were problems but could not fully verify at the time of the investigation.⁶⁰ 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:

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

ADD/ADHD: Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder included: distractibility; impulsivity; hyperactivity. These behaviours are very noticeable, occur over a long period of time in many situations, and are troublesome to others.

58 A number of child functioning measures with established norms exist; however, these are not consistently used in child welfare settings and could not be feasibly used in the context of the OIS.

59 Although child welfare workers assess the safety of children, they do not routinely conduct a detailed assessment of child functioning. Items on the checklist included only issues that workers happened to become aware of during their investigation. A more systematic assessment would therefore likely lead to the identification of more issues than noted by workers during the OIS.

60 This report refers to both confirmed and suspected problems as “indicated.”

Negative Peer Involvement: Child has been involved in high-risk peer activities, such as gang activities, graffiti or vandalism.

Alcohol Abuse: problematic consumption of alcohol (consider age, frequency and severity).

Drug/Solvent Abuse: included prescription drugs, illegal drugs and solvents.

Self-harming Behaviour: Child has engaged in high-risk or life-threatening behaviour such as suicide attempts, physical mutilation or cutting.

Violence towards Others: Child has displayed aggression and violence toward other children or adults.

Running (One Incident): Child has run away from home (or other residence) on one occasion, for at least one overnight period.

Running (Multiple Incidents): Child has run away from home (or other residence) on more than one occasion for at least one overnight period.

Inappropriate Sexual Behaviour: Child has been involved in inappropriate sexual behaviour.

Other Emotional or Behavioural Problem: The child has significant emotional or behavioural problems other than those described above.

Learning Disability: A child has identified learning deficits in one or more areas of mental functioning (e.g., language usage, numbers, speech, reading, word comprehension).

Specialized Education Services: Child has been involved in special education program for learning disability, special needs, or behaviour problems.

Irregular School Attendance: Child has shown irregular attendance and truancy (more than five days/month).

Developmental Delay: Child has delayed intellectual development. Typically it is diagnosed when a child does not reach his/her developmental milestones at expected times. It includes speech and language development, fine and gross motor skills and or personal and social skills.

Physical Disability: The child has 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.

Substance Abuse Related Birth Defect: Child has a diagnosis or indication of birth defect(s) related to substance abuse by the biological parent (e.g., Fetal Alcohol Syndrome (FAS)/Fetal Alcohol Effect (FAE), cocaine addiction or solvent abuse).

Positive Toxicology at Birth: The child, at birth, tests positive for the presence of drugs or alcohol.

Other Health Condition: Child has ongoing physical health condition (e.g., chronic disease, and frequent hospitalization).

Psychiatric Disorder: Child has diagnosis of psychiatric disorder by a psychiatrist (e.g., conduct disorder, anxiety disorder).

Youth Criminal Justice Act Involvement: Child has been involved in charges, incarceration, or alternative measures with the youth justice system.

Other: Any other child or family focused referral.

Table 6-3(a) and 6-3(b) have been organized to reflect the types of problems associated with physical, emotional and/or cognitive health, or with behaviour-specific concerns. In 45% of substantiated child maltreatment investigations (an estimated 26,309 child investigations), at least one child functioning issue was indicated by the investigating worker.

Table 6-3(a) presents child functioning characteristics that affect the physical, emotional, and cognitive health of children by the primary category of substantiated maltreatment. In 32% of substantiated maltreatment investigations (an estimated 18,403 child investigations) at least one child functioning issue was reported regarding the physical, emotional, and/or cognitive health of the child. Depression or anxiety was the most frequently reported category (16% of substantiated maltreatment investigations), and learning disability the second most common (14% of substantiated maltreatment investigations). Eleven percent of substantiated maltreatment investigations involved children placed in a special education program, while 8% indicated a developmental delay. Other health conditions was noted in 5% of substantiated cases.

The behavioural functioning classifications are presented in Table 6-3(b) by primary category of substantiated maltreatment. In 35% of the investigations (an estimated 20,180 child investigations) at least one behavioural functioning issue was reported. The type of behavioural functioning concern noted most frequently was other behavioural or emotional problem (24% of substantiated maltreatment investigations), followed by negative peer involvement (13%), ADD/ADHD (12%) and violence towards others (10%). Irregular school attendance was noted in 9% of substantiated maltreatment. It is important to note that these ratings are based on the initial intake investigation and do not capture behaviours that may become concerns after that time.

Physical Abuse: The six most often indicated child functioning issues in cases where physical abuse was identified as the primary substantiated maltreatment were other behavioural or emotional problems (31%), negative peer involvement (19%), ADD/ADHD (18%), learning disability (18%), depression or anxiety (17%) and violence towards others (16%). Overall, a physical, emotional, or cognitive health issue was reported in 34% of these physical abuse investigations, involving an estimated 4,835 child investigations. A behavioural issue was indicated in 45% of substantiated investigations (an estimated 6,362 child investigations).

Sexual Abuse: The six most often reported child functioning issues indicated in cases where sexual abuse was the primary substantiated maltreatment were depression or anxiety (33%), other behavioural or emotional problem (31%), inappropriate sexual behaviour (21%), negative peer involvement (19%), running away from home (11%), and irregular school attendance (11%). Overall, a physical, emotional, or cognitive health issue was reported in 38% of substantiated sexual abuse investigations, involving an estimated 564 child investigations, and a behavioural issue was indicated in 45% (an estimated 677 child investigations).

Neglect: The five most often indicated child functioning issues in cases where neglect was identified as the primary substantiated maltreatment were other behavioural or emotional problems (25%), learning disability (21%), irregular school attendance (19%), negative peer involvement (18%) and specialized education services (16%). Overall, a physical, emotional, and/or cognitive health issue was reported in 38% of these cases involving an estimated 5,888 investigations. A behavioural issue was indicated in 40% of investigations (an estimated 6,250 child investigations).

Emotional Maltreatment: The five most often indicated child functioning concerns in cases where emotional maltreatment was indicated as the primary substantiated maltreatment were other behavioural or emotional problem (31%), depression or anxiety (28%), learning disability (16%), negative peer involvement (13%) and irregular school attendance (12%). Overall, a physical, emotional, or cognitive health issue was reported in 39% of cases involving an estimated 3,396 child investigations. A behavioural issue was indicated in 41% (an estimated 3,602 child investigations) of substantiated emotional maltreatment investigations.

Exposure to Domestic Violence: The five most often indicated child functioning concerns in cases indicating exposure to domestic violence as the primary substantiated maltreatment were other behavioural or emotional problem (14%), depression or anxiety (11%), learning disability (6%), specialized education services (6%) and ADD/ADHD (6%). Overall, a physical, emotional, or cognitive health issue was reported in 20% of substantiated exposure to domestic violence investigations, involving an estimated 3,720 child investigations. A behavioural issue was indicated in 18% (an estimated 3,289 child investigations) of these investigations.

Table 6-3(a)
Child Functioning (Physical, Emotional and Cognitive) by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Physical, Emotional, and Cognitive Health												
Developmental Delay	8%	1,093	2%	–	12%	1,940	9%	774	5%	953	8%	4,786
Learning Disability	18%	2,485	8%	125	21%	3,204	16%	1,387	6%	1,142	14%	8,343
Physical Disability	1%	–	0%	–	3%	454	1%	–	2%	362	2%	966
Substance Abuse Related Birth Defect	1%	153	0%	–	1%	209	1%	–	1%	–	0%	432
Other Health Condition	3%	414	3%	–	9%	1,336	4%	345	3%	523	5%	2,666
Specialized Education Services	14%	1,958	4%	–	16%	2,554	11%	954	6%	1,053	11%	6,577
Depression or Anxiety	17%	2,355	33%	498	14%	2,136	28%	2,460	11%	2,080	16%	9,529
Self-harming Behaviour	4%	511	9%	136	5%	723	5%	456	1%	178	3%	2,004
Psychiatric Disorder	4%	512	3%	–	5%	728	5%	396	1%	166	3%	1,849
Positive Toxicology at Birth	1%	–	0%	–	1%	145	0%	–	0%	–	1%	280
Any Physical, Emotional or Cognitive Health Issue	34%	4,835	38%	564	38%	5,888	39%	3,396	20%	3,720	32%	18,403
Total Child Investigations*		14,054		1,490		15,660		8,703		18,518		58,425

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* Based on a sample of 3,193 substantiated child maltreatment investigations with information about Child Functioning. Total is less than the sum of Any Physical, Emotional or Cognitive Health Issues plus Any Behavioural Issue because of multiple responses for Child Functioning categories. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Table 6-3(b)
Child Functioning (Behavioural) by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Behavioural Functioning												
Negative Peer Involvement	19%	2,639	19%	287	18%	2,752	13%	1,164	3%	528	13%	7,370
Alcohol Abuse	3%	388	3%	–	5%	749	3%	298	0%	–	3%	1,520
ADD/ADHD	18%	2,469	6%	–	14%	2,255	11%	925	6%	1,037	12%	6,779
Drug/Solvent Abuse	3%	439	4%	–	6%	961	4%	389	0%	–	3%	1,929
Violence Towards Others	16%	2,184	10%	157	13%	2,037	11%	970	3%	620	10%	5,968
Running	7%	956	11%	162	9%	1,394	5%	397	1%	128	5%	3,037
Irregular School Attendance	7%	922	11%	159	19%	2,895	12%	1,036	2%	404	9%	5,416
Inappropriate Sexual Behaviour	3%	446	21%	316	7%	1,060	3%	250	2%	279	4%	2,351
Youth Criminal Justice Act Involvement	2%	274	2%	–	4%	588	2%	130	0%	–	2%	1,059
Other Behavioural or Emotional Problems	31%	4,392	31%	468	25%	3,829	31%	2,706	14%	2,515	24%	13,910
Any Behavioural Issue	45%	6,362	45%	677	40%	6,250	41%	3,602	18%	3,289	35%	20,180
Any Child Functioning Issue	54%	7,544	54%	801	53%	8,216	52%	4,524	28%	5,224	45%	26,309
Total Child Investigations*		14,054		1,490		15,660		8,703		18,517		58,424

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* Based on a sample of 3,193 substantiated child maltreatment investigations with information about Child Functioning. Total is less than the sum of Any Physical, Emotional or Cognitive Health Issues plus Any Behavioural Issue because of multiple responses Child Functioning categories. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Aboriginal Heritage of Investigated Children

Aboriginal heritage⁶¹ was documented by the OIS-2003 in an effort to better understand some of the factors that bring children from these communities into contact with the child welfare system.⁶²

Aboriginal children were identified as a key group to examine because of concerns about overrepresentation of children from these communities in the foster care system.⁶³ The OIS-2003 tracked the Aboriginal status of each investigated child.

Five percent of substantiated cases, an estimated 2,892 substantiated maltreatment investigations, involved children of Aboriginal heritage (Table 6-4).

Table 6-4
Aboriginal Heritage of Investigated Children by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment					Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence	
Not Aboriginal	25% 13,724	3% 1,391	26% 14,497	15% 8,229	32% 17,692	100% 55,533
Aboriginal	11% 330	4% 100	40% 1,163	16% 474	29% 825	100% 2,892
Total*	24% 14,054	3% 1,491	27% 15,660	15% 8,703	32% 18,517	100% 58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about Aboriginal status of investigated child. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Physical Abuse: Eleven percent of substantiated investigations involving children of Aboriginal heritage were for physical abuse.

Sexual Abuse: Four percent of substantiated investigations involving children of Aboriginal heritage were for sexual abuse.

Neglect: Forty percent of substantiated investigations involving children of Aboriginal heritage were for neglect.

61 For the purposes of this report, Aboriginal refers to First Nation status, First Nation non-status, Métis, and Inuit.

62 The OIS-2003 collected information about eight other ethno-cultural groups, but the number of cases sampled for most groups was too low to allow for separate analysis.

63 See Armitage A. (1993). Family and child welfare in first nation communities. In: Wharf B (ed). *Rethinking child welfare in Ontario*. Toronto: McClelland & Stewart, 131–170.

McKenzie, B., Seidl, E. et al. (1995). Child welfare standards in First Nations. In: B.Galaway IB, Hudson J (eds). *Child welfare in Ontario: research and policy implications*. Toronto: Thompson Educational Press, 54–65.

Emotional Maltreatment: Sixteen percent of substantiated investigations involving children of Aboriginal heritage were for emotional maltreatment.

Exposure to Domestic Violence: Twenty-nine percent of substantiated investigations involving children of Aboriginal heritage were for exposure to domestic violence.

Service Dispositions for Aboriginal and Non-Aboriginal Children

Data comparing Aboriginal and non-Aboriginal children are presented in Table 6-5. Aboriginal children experience higher rates of ongoing service, child welfare court intervention and placement than non-Aboriginal children in substantiated child maltreatment investigations.

Ongoing Services: Sixty-five percent of substantiated child maltreatment investigations involving Aboriginal children received ongoing services (an estimated 1,869 child investigations). In comparison 38% of substantiated investigations involving non-Aboriginal children remained open for services.

Child Welfare Court Application: Eleven percent of substantiated child maltreatment investigations involving Aboriginal children (an estimated 303 child investigations) resulted in a child welfare court application. In comparison, 6% of substantiated child maltreatment investigations involving non-Aboriginal children resulted in a child welfare court application. In all, 16% of substantiated investigations involving Aboriginal children were either considered for child welfare court or were the subject of a court application.

Placement: Aboriginal children experienced higher rates of informal and child welfare placement at the conclusion of a substantiated child maltreatment investigations. Eleven percent of investigations involving Aboriginal children experienced an informal kinship care placement compared with 3% of investigations involving non-Aboriginal children. Six percent of substantiated investigations involving non-Aboriginal children experienced child welfare placements while 12% of investigations involving Aboriginal children experienced child welfare placements.

Table 6-5
Service Dispositions for Aboriginal and Non-Aboriginal Children in Substantiated Child Maltreatment Investigations in Ontario in 2003

	Aboriginal		Non-Aboriginal		Total	
	%	Number of Substantiated Child Investigations	%	Number of Substantiated Child Investigations		
Case to Stay Open for Ongoing Services	65%	1,869	38%	21,143	39%	23,012
Child Welfare Court						
Court Application Considered	5%	148	5%	2,522	5%	2,670
Court Application Made	11%	303	6%	3,055	6%	3,358
Placement						
No Placement	75%	2,155	88%	48,754	87%	50,909
Placement Considered	3%	—	3%	1,741	3%	1,823
Informal Kinship Care	11%	308	3%	1,866	4%	2,174
Child Welfare Placement	12%	346	6%	3,107	6%	3,453
Total Child Investigations*		2,892		55,533		58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about Aboriginal status of investigated child. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

■ 7. HOUSEHOLD CHARACTERISTICS

Chapter 7 provides an overview of the characteristics of the households of investigated children tracked by the OIS-2003. Household characteristics include household composition, age of mothers and fathers, sibling information, housing information, source of household income, and parental functioning and family stressors. For the purpose of the OIS-2003, a household was defined as the primary residence of the child when the investigation was initiated. The findings are presented by the primary substantiated category of maltreatment. Selected comparisons with the findings from the OIS-1993 and OIS-1998 are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 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 services, (2) reported cases that were screened out by child welfare services before being fully investigated, (3) new reports on cases already open by child welfare services, and (4) cases that were investigated only by the police.

Parents and Caregivers in the Home

The OIS-2003 gathered information on up to two of the child’s parents or caregivers.⁶⁴ For each listed caregiver, investigating workers were asked to choose the category that best described the relationship between the caregiver and the children in the home. If a caregiver was a biological parent to one child and a step-parent to another child in the family, workers were asked to use “step-parent” to describe that caregiver.⁶⁵ If recent household changes had occurred, investigating workers were asked to describe the situation at the time the referral was made.

Table 7-1 describes the parents and other caregivers looking after investigated children by primary category of substantiated maltreatment. Thirty-two percent of substantiated investigations involved children who lived with their two biological parents, and 15% lived in a two-parent blended family in

64 The two-caregiver limit was required to accommodate the form length restrictions set for the Household Information Sheet. The caregiver information usually corresponded to the parents and/or step-parent living in the home; if there was only one caregiver living in the home and a second living outside the home, information was gathered on both of these, but is not reported here.

65 This compromise was needed because the Household Information Sheet served as a common information source for all the children in the family. A much more extensive set of questions would have been required had the OIS-2003 gathered child-specific caregiver information, leading to a significantly longer form. Child-specific information on the caregiver-child relationship is available for caregivers who were investigated as alleged perpetrators (see Chapter 4).

which one of the caregivers was a step-parent, a common-law partner, or an adoptive parent who was not the biological parent of at least one of the children in the family. Three percent of substantiated child investigations involved a biological parent living with another adult who also acted as a caregiver to the child (i.e., grandparent, aunt/uncle). Forty-six percent involved children who lived in a family led by a lone parent: 42% by a female parent and 4% by a male parent. In comparison, the 2001 census showed that families led by female parents represented 17% of families with children under the age of 17, and 80% of families were led by two-parents.⁶⁶ Four percent of substantiated investigations involved households with a composition other than the household compositions previously described.

Physical Abuse: Fifty-six percent of investigations where physical abuse was the primary substantiated concern involved children who lived in two-parent households: 40% involved two biological parents and 16% involved a two-parent blended family. Twenty-nine percent of investigations where physical abuse was the primary substantiated concern involved children in a female-parent household and 4% in a male-parent household.

Sexual Abuse: Fifty-five percent of investigations where sexual abuse was the primary substantiated concern involved children who lived in two-parent households: 41% with two biological parents and 14% in a two-parent blended family. Thirty-seven percent of investigations where sexual abuse was the primary substantiated maltreatment involved children in a female-parent household.

Neglect: Forty-six percent of all substantiated neglect investigations involved lone-parent families – 42% female-parent households and 4% male-parent households – whereas 29% of investigations where neglect was the primary substantiated maltreatment involved children from households with two biological parents, and 15% involved two-parent blended families. It should be noted, that lone-parent families are also at higher risk of living in poverty, and that poverty, as opposed to family structure, could be the factor placing these families at such high risk of being reported for alleged maltreatment.⁶⁷

66 Canada. Statistics Canada. *Census of Canada, 2001: Age groups of children at home and family structure for census families in private households for Census Divisions and subdivisions* [computer file]. Ottawa: Ont.: Statistics Canada [producer and distributor], October 22, 2002 (97F0005XCB01005).

67 See Source of Income section in this chapter and the following:

Chamberland, C., Bouchard, C. et al. (1986). Conduites abusives envers les enfants: Réalités canadiennes et américaines. *Canadian Journal of Behavioural Science*, 8(4):391-412.

Drake, B. & Pandey, S. (1996). Understanding the relationship between neighbourhood poverty and specific types of child maltreatment. *Child Abuse and Neglect*, 20(11): 1003-18.

Garbarino, J. & Sherman, D. (1980). High-risk neighbourhoods and high-risk families: The human ecology of child maltreatment. *Child Development*, 51(1):188-98.

Mayer M. (1995). *Contextes écologiques d'incidence de trois types de mauvais traitements à l'égard des enfants signalés dans la région de Montréal*. Montreal: Université de Montréal, Sciences humaines appliquées.

Emotional Maltreatment: Thirty-seven percent of substantiated emotional maltreatment involved children who lived in two-parent households: 23% with two biological parents and 14% with a two-parent blended family. Forty-eight percent of investigations where emotional maltreatment was the primary substantiated concern involved children in a female-parent household and 6% in a male-parent household.

Exposure to Domestic Violence: Forty-seven percent of investigations where exposure to domestic violence was the primary substantiated maltreatment involved children living in two parent households: 31% with two biological parents and 16% with two parents in a blended family. Forty-eight percent of investigations where exposure to domestic violence was the primary substantiated maltreatment involved children living in a lone mother household, with a male caregiver identified but not living in the home.

Table 7-1
Household Structure by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
Two Parent-Biological	40%	5,654	41%	602	29%	4,600	23%	2,019	31%	5,640	32% 18,515
Two Parent-Blended/Step	16%	2,259	14%	201	15%	2,312	14%	1,252	16%	2,896	15% 8,920
Biological Parent and Other	4%	598	1%	–	4%	673	4%	348	1%	255	3% 1,893
Lone Mother	29%	4,084	37%	558	42%	6,600	48%	4,142	48%	8,973	42% 24,357
Lone Father	4%	625	5%	–	4%	639	6%	493	3%	524	4% 2,350
Other	6%	834	3%	–	5%	836	5%	448	1%	229	4% 2,388
Total*	100%	14,054	100%	1,490	100%	15,660	100%	8,702	100%	18,517	100% 58,423

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,192 substantiated child maltreatment investigations with information about household structure. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Age of Primary Caregiver(s)

Investigating workers were asked to indicate the age of up to two caregivers for each household. Ten age groups were captured on the Household Information sheet, enabling the workers estimate the caregiver’s age (see Appendix C, Maltreatment Assessment Form). Table 7-2(a) shows the age distribution of female caregivers (estimated 54,435 substantiated child maltreatment investigations) and Table 7-2(b) the age distribution of male caregivers (estimated 30,463 substantiated child maltreatment investigations). The categories of mother and father include biological parents, common-law partners, step-parents, foster parents and adoptive parents.

Of the substantiated investigations involving children living with a female caregiver, two thirds (66%) lived with a female caregiver who was over 30 years old and 16% lived with a female caregiver under 25 years of age. With regard to male caregivers, 84% of children lived with a male caregiver who was over 30 and 6% lived with a male caregiver under 25 years of age.

Physical Abuse: In 10,302 (80%) of investigations where physical abuse was the primary substantiated maltreatment involved female caregivers over the age of 30, and in 8% of cases they were age 25 and under. In 90% of investigations where physical abuse was the primary substantiated maltreatment involving children living with their male caregivers, the male caregivers were over 30, and in 2% of cases they were 25 years old or less.

Sexual Abuse: In 76% of investigations where sexual abuse was the primary substantiated maltreatment involving children living with their female caregivers, the female caregivers were over 30, and in 12% of cases they were age 25 and under. In 91% of investigations where sexual abuse was the primary substantiated maltreatment and children lived with their male caregivers, the male caregivers were over 30.

Neglect: Twenty-one percent of investigations where neglect was the primary substantiated concern involved children living with female caregivers age 25 and under. Most investigations where neglect was the primary substantiated concern involved children living with female caregivers over 30 (60%). With regard to male caregivers, in 9% of investigations where neglect was the primary substantiated concern, the male caregivers were age 25 and under, and in 77% of cases they were over 30.

Emotional Maltreatment: In 18% of investigations where emotional maltreatment was the primary substantiated concern children lived with female caregivers age 25 and younger. Most investigations where emotional maltreatment was the primary substantiated concern involved children living with female caregivers over 30 (68%). For male caregivers, in 9% of investigations where emotional maltreatment was the primary substantiated concern, the male caregivers were age 25 and under, and in 82% of cases they were over 30.

Exposure to Domestic Violence: In 61% of investigations where exposure to domestic violence was the primary substantiated maltreatment and children lived with their female caregivers, the female caregivers were over 30, and in 17% of cases they were 25 or younger. For male caregivers, 84% of investigations where exposure to domestic violence was the primary substantiated maltreatment involved children living with male caregivers over 30, and 7% lived with male caregivers aged 25 and under.

Table 7-2(a)
Age of Female Caregivers in Child Maltreatment Investigations by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003**

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Less than 19	0%	–	0%	–	2%	319	1%	–	1%	167	1%	556
19–21	1%	136	0%	–	4%	592	7%	549	5%	950	4%	2,227
22–25	7%	855	12%	163	15%	2,073	10%	823	11%	2,021	11%	5,935
26–30	13%	1,674	12%	166	19%	2,693	14%	1,082	22%	3,901	18%	9,516
31–40	55%	7,068	53%	745	44%	6,301	49%	3,890	49%	8,724	49%	26,728
Over 40	25%	3,234	23%	323	16%	2,332	19%	1,525	12%	2,059	17%	9,473
Total Child Investigations*	100%	12,978	100%	1,397	100%	14,310	100%	7,928	100%	17,822	100%	54,435

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 2,961 substantiated child maltreatment investigations with information about mother's age. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.
** Includes biological mothers, stepmothers, female common-law partners, adoptive mothers and foster mothers living with the child.

Table 7-2(b)
Age of Male Caregivers by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003**

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Less than 19	0%	–	0%	–	0%	–	1%	–	0%	–	0%	102
19–21	0%	–	0%	–	2%	119	1%	–	1%	132	1%	304
22–25	2%	161	2%	–	7%	585	7%	288	6%	493	5%	1,546
26–30	8%	689	8%	–	14%	1,098	10%	376	9%	843	10%	3,071
31–40	50%	4,377	42%	358	44%	3,451	47%	1,830	53%	4,783	49%	14,799
Over 40	40%	3,497	49%	420	33%	2,634	35%	1,347	31%	2,743	35%	10,641
Total Child Investigations*	100%	8,785	100%	862	100%	7,911	100%	3,900	100%	9,005	100%	30,463

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 1,698 child maltreatment investigations with information about father's age. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.
** Includes biological fathers, stepfathers, male common-law partners, adoptive fathers and foster fathers living with the child.

Number of Siblings in the Household

Investigating workers were asked to provide non-identifying information on all children 15 years of age and under who were living in the home at the time of the investigation. As shown in Table 7-3, in 22% of substantiated child maltreatment investigations no siblings 19 years of age and under were noted to be living at home, 39% had one sibling, 23% had two siblings (i.e., three children in the family), and 15% had three or more siblings (i.e., four or more children in the family).

Physical Abuse: Twenty-three percent of children in investigations where physical abuse was the primary substantiated concern, had no siblings 19 years of age and under living with them at the time of the investigation. Forty-one percent had one sibling, 24% had two siblings, and 13% had three or more siblings.

Sexual Abuse: In 38% of investigations where sexual abuse was the primary substantiated maltreatment the child had no siblings 19 years of age and under living in the home. Twenty-nine percent had one sibling, 22% had two siblings, and eleven percent had three or more siblings.

Neglect: In 23% of investigations where neglect was the primary substantiated concern the child had no siblings 19 years of age and under living in the home. Thirty-five percent had one sibling, 20% had two siblings, and 22% had three or more siblings.

Emotional Maltreatment: In 22% of investigations where emotional maltreatment was the primary substantiated concern the child had no siblings 19 years of age and under living in the home. Thirty-seven percent had one sibling, 27% had two siblings, and 15% had three or more siblings.

Table 7-3
Siblings of Children in Child Maltreatment Investigations by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment								Total			
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment			Exposure to Domestic Violence		
No Sibling	23%	3,194	38%	572	23%	3,626	22%	1,888	20%	3,727	22%	13,007
One Sibling	41%	5,757	29%	428	35%	5,545	37%	3,209	43%	7,909	39%	22,848
Two Siblings	24%	3,328	22%	323	20%	3,174	27%	2,302	24%	4,388	23%	13,515
Three Siblings	10%	1,426	2%	–	16%	2,439	12%	1,014	9%	1,597	11%	6,511
Four or More Siblings	3%	349	9%	132	6%	876	3%	290	5%	897	4%	2,544
Total*	100%	14,054	100%	1,490	100%	15,660	100%	8,703	100%	18,518	100%	58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about number of siblings. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Exposure to Domestic Violence: In 20% of investigations where exposure to domestic violence was the primary substantiated maltreatment the child had no siblings 19 years of age and under living in the home. Forty-three percent had one sibling, 24% had two siblings, and 14% had three or more siblings.

Number of Siblings Investigated

In addition to identifying all the children under the age of 16 in the household, investigating workers were asked to indicate all children who were also subject to investigation. Seventy percent of substantiated investigations involved children with at least one additional sibling who was also the subject of investigation, 8% had siblings who were not investigated, and 22% had no siblings (see Table 7-4).

Physical Abuse: In 65% percent of investigations where physical abuse was the primary substantiated maltreatment, the child had at least one additional sibling who was also the subject of investigation. Thirteen percent had siblings who were not investigated, and 23% had no siblings.

Sexual Abuse: In 36% percent of investigations where sexual abuse was the primary substantiated concern, the child had at least one additional sibling who was also the subject of investigation. Twenty-six percent had siblings who were not investigated, and 38% had no siblings.

Neglect: Sixty-eight percent of investigations where neglect was the primary substantiated maltreatment involved children with at least one additional sibling who was also the subject of investigation. Ten percent had siblings who were not investigated, and 23% had no siblings.

Emotional Maltreatment: In 72% of investigations where emotional maltreatment was the primary substantiated concern the child had at least one sibling who was also the subject of investigation. Six percent had siblings who were not investigated, and 22% had no siblings.

Exposure to Domestic Violence: In 76% of investigations where exposure to domestic violence was the primary substantiated concern the child had at least one sibling who was also the subject of investigation. Three percent had siblings who were not investigated, and 20% had no siblings.

Table 7-4
Investigated Siblings by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Sibling	23%	3,194	38%	572	23%	3,626	22%	1,888	20%	3,727	22%	13,007
One Sibling, Not Investigated	9%	1,286	16%	231	5%	770	4%	334	2%	435	5%	3,056
One Sibling, Investigated	32%	4,471	13%	197	31%	4,775	33%	2,875	40%	7,474	34%	19,792
Two or More Siblings, None Investigated	4%	492	10%	154	5%	734	2%	175	1%	139	3%	1,694
Two or More Siblings, At Least One Other Investigated	33%	4,611	23%	336	37%	5,755	39%	3,430	36%	6,743	36%	20,875
Total*	100%	14,054	100%	1,490	100%	15,660	100%	8,702	100%	18,518	100%	58,424

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about Investigated Siblings. Row percentages may add up to 99% or 101% because of rounding.

Source of Income

Investigating workers were requested to choose the income source that best described the primary source of the household income. Income source was designated by investigating workers in terms of five possible classifications:

Full Time Employment: A caregiver is employed in a permanent, full-time position.

Part Time/Seasonal Employment/Multiple Jobs: Family income is derived primarily from part-time employment (less than 30 hours/week), full-time or part-time positions for temporary periods of the year, or several part-time temporary jobs. Neither caregiver is employed in a permanent, full-time position.

Employment Insurance (EI)/Social Assistance/Other Benefit: Family income is derived primarily from employment insurance, social assistance or other benefits (e.g., long-term disability, pension, or child support).

Unknown: Source of income was not known.

No Source: There is no reliable source of income for the family. Income may be earned through illicit activities. Caregiver(s) may work at temporary jobs, but these are not predictable and cannot be relied on for financial budgeting.

Table 7-5 shows the source of income for the households of children with substantiated maltreatment as tracked by the OIS-2003. Sixty-four percent of investigations involved children in families that derived their primary income from full-time employment. Nineteen percent involved children whose families received benefits/EI/social assistance as their primary source of income. Eleven percent of families relied on part-time/multiple jobs/seasonal employment. In 5% of substantiated investigations the source of income was unknown by the workers, and in one percent of cases no reliable source of income was reported.

Physical Abuse: Seventy-two percent of investigations where physical abuse was the primary substantiated maltreatment involved children from families with full-time employment, and 12% involved families receiving benefits/EI or social assistance as the primary source of income. Nine percent of investigations where physical abuse was the primary substantiated maltreatment involved children from families with part-time/multiple jobs/seasonal employment as the primary source of income.

Sexual Abuse: Full-time employment was reported as the primary source of income in 69% of investigations where sexual abuse was the primary substantiated concern, and benefits/EI or social assistance in 19% of cases.

Neglect: In contrast to abuse cases, 51% of investigations where neglect was the primary substantiated concern involved families that relied on full-time employment as their primary source of income. Twenty-six percent involved families that were receiving some form of benefits/EI or social assistance, and a further 15% involved families relying on part-time/seasonal employment or multiple jobs as their primary source of income.

Emotional Maltreatment: Full-time employment was reported as the primary source of income in 66% of investigations where emotional maltreatment was the primary substantiated concern, benefits/EI or social assistance in 22%, and part-time/seasonal employment/multiple jobs in 9%.

Exposure to Domestic Violence: Full-time employment was reported as the primary source of income in 67% of investigations where exposure to domestic violence was the primary substantiated concern, benefits/EI or social assistance in 18%, and part-time/seasonal employment/multiple jobs in 11% of investigations.

Table 7-5
Household Source of Income by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
Full-Time Employment	72%	10,127	69%	1,027	51%	8,007	66%	5,704	67%	12,433	64% 37,298
Part-time/Multiple Jobs/Seasonal Employment	9%	1,189	6%	–	15%	2,385	9%	750	11%	1,985	11% 6,404
Benefits/Unemployment/Social Assistance	12%	1,729	19%	289	26%	4,037	22%	1,930	18%	3,282	19% 11,267
Unknown	6%	848	5%	–	7%	1,046	4%	319	4%	798	5% 3,090
No Source of Income	1%	146	0%	–	1%	185	0%	–	0%	–	1% 350
Total*	100%	14,039	100%	1,490	100%	15,660	100%	8,703	100%	18,517	100% 58,409

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,192 substantiated child maltreatment investigations with information about household income. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Housing

Investigating workers were asked to select the housing accommodation category that best described the investigated child's household living situation. The types of housing included:

Own Home: A purchased house, condominium, or townhouse.

Rental Accommodation: A private rental house, townhouse or apartment.

Public Housing: A rental unit in a public housing complex (i.e., rent-subsidized, government-owned housing), a house, townhouse or apartment on a military base, or band housing.

Shelter/Hotel: A homeless or family shelter, SRO hotel (single room occupancy), or motel accommodation.

Unknown: Housing accommodation was unknown.

Other: Any other form of shelter.

In addition to housing type, investigating workers were asked to indicate whether the investigated child lived in unsafe housing conditions where children were at risk of injury or impairment from their living situation (e.g., broken windows, insufficient heat, parents and children sharing single room). Workers also noted the number of family moves in the 12 months before the investigation.

At the time of the study, 51% of all substantiated investigations involved children living in rental accommodations (40% private rentals and 11% public housing), 37% involved children living in purchased homes, 3% in other accommodations, and 1% in shelters or hotels. In 8% of substantiated investigations, workers did not have enough information to describe the housing type (Table 7-6). According to the 2001 Census, 75% of families with never-married children living at home owned their home, and 25% rented their home.⁶⁸

Housing conditions were described as safe in 89% of substantiated maltreatment investigations and unsafe in 6% (Table 7-7). In 5% of substantiated maltreatment investigations housing conditions were unknown.

Fifty-one percent of investigations involved families that had not moved in the previous 12 months, whereas 27% had moved at least once (Table 7-8). In 22% of substantiated investigations, whether the family has recently moved was unknown to the workers.

Physical Abuse: Forty-one percent of investigations where physical abuse was the primary substantiated maltreatment involved children who were living in purchased homes, 34% were living in private market rentals, and 6% in public housing complexes. (Table 7-6)

Table 7-6
Housing Type by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
Own Home	41%	5,772	46%	679	24%	3,750	41%	3,528	43%	7,966	37% 21,695
Rental Accomodation	34%	4,818	25%	366	50%	7,808	39%	3,385	37%	6,838	40% 23,215
Public Housing	6%	822	16%	239	16%	2,477	11%	931	9%	1,698	11% 6,167
Shelter/Hotel	1%	166	–	–	1%	125	2%	179	1%	126	1% 596
Other	4%	497	1%	–	3%	392	3%	251	4%	680	3% 1,834
Unknown	14%	1,979	13%	191	7%	1,107	5%	428	7%	1,209	8% 4,914
Total Child Investigations	100%	14,054	100%	1,489	100%	15,659	100%	8,702	100%	18,517	100% 58,421

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about housing type. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

⁶⁸ Canada. Statistics Canada. *Census of Canada 2001: Household type and structural type of dwelling for census families* [computer file]. Ottawa: Statistics Canada [producer and distributor], October 22, 2002 (97F00006XCB01007)

Two percent of investigations where physical abuse was the primary substantiated maltreatment involved children living in unsafe housing conditions (Table 7-7). Fifty-three percent of investigations where physical abuse was the primary substantiated maltreatment involved children who had not moved in the previous 12 months, and 23% involved children whose families had moved at least once in the previous twelve months (Table 7-8).

Sexual Abuse: Forty-six percent of investigations where sexual abuse was the primary substantiated concern involved children who were living in purchased (Table 7-6).

No investigations where sexual abuse was the primary substantiated maltreatment involved children living in unsafe housing conditions (Table 7-7). Fifty percent involved children who had not moved in the previous 12 months, and 24% involved children whose families who had moved at least once (Table 7-8).

Neglect: Twenty-four percent of investigations where neglect was the primary substantiated concern involved children living in purchased homes. In 50% of investigations where neglect was the primary substantiated maltreatment they were living in private market rentals, and in 16% in public housing complexes. (Table 7-6)

Sixteen percent of investigations where neglect was the primary substantiated concern involved children living in unsafe housing conditions (Table 7-7). Forty-six percent involved children who had not moved in the previous 12 months, and 32% involved children who had moved at least once (Table 7-8).

Emotional Maltreatment: In 41% of investigations where emotional maltreatment was the primary substantiated concern children were living in purchased homes, 39% were living in private market rentals, and 11% in public housing complexes (Table 7-6).

Three percent of investigations where emotional maltreatment was the primary substantiated concern involved children living in unsafe housing conditions (Table 7-7). Fifty-three percent involved children who had not moved in the previous 12 months, and 30% had moved at least once (Table 7-8).

Exposure to Domestic Violence: In 43% of investigations where exposure to domestic violence was the primary substantiated concern children were living in purchased homes, 37% were living in private market rentals, and 9% in public housing complexes (Table 7-6).

Three percent of investigations where exposure to domestic violence was the primary substantiated maltreatment involved children living in unsafe housing conditions (Table 7-7). Fifty-two percent involved children who had not moved in the previous 12 months, and 26% involved children who had moved at least once (Table 7-8).

Table 7-7
Housing Conditions by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment						Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence		
Safe Conditions	91% 12,726	86% 1,280	78% 12,259	93% 8,041	94% 17,457	89% 51,763	
Unsafe Conditions	2% 320	0% –	16% 2,473	3% 274	3% 563	6% 3,630	
Unknown	7% 1,009	14% 210	6% 928	4% 387	3% 498	5% 3,034	
Total Child Investigations*	100% 14,055	100% 1,490	100% 15,660	100% 8,702	100% 18,518	100% 58,425	

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about housing conditions. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Table 7-8
Family Moves Within the Last Twelve Months by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment						Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence		
Twelve Months	53% 7,383	50% 739	46% 7,176	53% 4,610	52% 9,724	51% 29,632	
One Move	16% 2,197	20% 301	19% 2,890	23% 1,990	17% 3,081	18% 10,459	
Two or More Moves	7% 954	4% –	13% 2,046	7% 627	9% 1,618	9% 5,298	
Unknown	25% 3,520	26% 386	23% 3,548	17% 1,476	22% 4,094	22% 13,024	
Total Child Investigations*	100% 14,054	100% 1,479	100% 15,660	100% 8,703	100% 18,517	100% 58,413	

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,192 substantiated child maltreatment investigations with information about family moves. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Caregiver Functioning and Family Stressors

Concerns related to caregiver functioning and family stressors were examined by investigating workers using a checklist of 10 items plus an “other” category that were asked about each caregiver. Where applicable, the reference point for identifying concerns about caregiver functioning was the previous six months.⁶⁹ The checklist included:

Alcohol Abuse: the use of alcohol poses a problem for the household.

Drug/Solvent Abuse: at least one caregiver abuses prescription drugs, illegal drugs or solvents.

Criminal Activity: At least one caregiver is absent due to incarceration, or is involved in criminal activity (drug dealing, theft or prostitution). This did not include a criminal history for domestic violence.

Cognitive Impairment: The cognitive ability of at least one caregiver is known to or suspected to have an impact on the quality of care giving provided in the household.

Mental Health Issues: At least one caregiver is known or suspected to have mental health problems.

Physical Health Issues: At least one caregiver is known or suspected to have a chronic illness, frequent hospitalizations, or a physical disability.

Few Social Supports: At least one caregiver is known or suspected to be socially isolated or lacking in social supports.

Maltreated as a Child: Either caregiver is known or suspected to have suffered maltreatment as a child.

Domestic Violence: During the past six months the caregiver was a victim or a perpetrator of domestic violence including physical, sexual or verbal assault.⁷⁰

Other: Any other issue/concern describing caregiver functioning.

⁶⁹ Most items were rated on a 4-point scale differentiating “confirmed,” “suspected,” “no” and “unknown” caregiver functioning issues. A caregiver functioning or family stressor was classified as confirmed if a problem had been diagnosed, observed by the investigating worker or another worker, or disclosed by the caregiver. An issue was classified as suspected if investigating workers’ suspicions were sufficient to include the concern in their written assessment of the family or in transfer summary to a colleague. For the purposes of the present report, the categories of confirmed and suspected have been collapsed. A comparison of the ratings will be completed in subsequent analyses.

⁷⁰ In cases of domestic violence, females were much more likely than males to be victims. Males were much more likely to be perpetrators of domestic violence.

Table 7-9(a) presents caregiver functioning issues that were noted by investigating workers for female caregivers. Table 7-9(b) presents caregiver functioning issues that were noted by investigating workers for male caregivers.⁷¹ At least one caregiver functioning issue for female caregivers was identified in 77% of substantiated maltreatment (an estimated 42,802 child investigations) investigations. The most frequently noted concerns for female caregivers were domestic violence (52%), few social supports (35%), mental health issues (23%) and maltreated as a child (20%). At least one functioning concern for male caregivers was noted in 66% of substantiated maltreatment investigations (20,991 investigations). The most frequently noted concerns male caregivers were domestic violence (39%), few social supports (27%), alcohol abuse (23%), mental health issues (14%), criminal activity (12%) and maltreated as a child (12%).

Physical Abuse: At least one caregiver functioning issue was identified in 57% of investigations involving female caregivers and where physical abuse was the primary substantiated maltreatment. The most frequently noted functioning issues for female caregivers in physical abuse investigations were of domestic violence (31%) and a lack of social supports (29%). The next most common functioning issues were a childhood history of maltreatment (18%) and mental health issues (17%). Involvement in criminal activity for female caregivers was noted in only 3% of investigations where physical abuse was the primary substantiated concern.

At least one functioning issue for male caregivers was identified in 52% of investigations where physical abuse was the primary substantiated concern. Twenty-three percent of investigations where physical abuse was the primary substantiated concern noted few social supports for male caregivers: 23% noted domestic violence, 14% noted alcohol abuse, 13% noted maltreatment as a child and 10% noted mental health issues.

Sexual Abuse: Forty-nine percent of investigations where sexual abuse was the primary substantiated maltreatment involved at least one functioning issue for female caregivers. The three most frequently noted issues were: maltreated as a child (27%), few social supports (26%) and mental health issues (15%).

In 31% of investigations where sexual abuse was the primary substantiated maltreatment at least one male caregiver functioning issue was noted: in 12% of investigations criminal activity and alcohol abuse by a male caregiver was noted.

Neglect: Seventy-four percent of investigations where neglect was the primary substantiated concern involved at least one functioning issue for the female caregiver: 45% noted few social supports, 29% noted domestic violence, 27% involved a mental health issue, and 25% noted a childhood history of maltreatment. Alcohol or drug abuse by a female caregiver was noted in both 18% of these investigations.

⁷¹ Female caregiver functioning table and male caregiver functioning table includes only caregivers in the home where the child maltreatment investigation occurred.

In 60% of investigations where neglect was the primary substantiated maltreatment at least one functioning issue for male caregivers was noted: in 38% of investigations few social supports were noted, alcohol abuse was noted for male caregivers in 18% of investigations and 17% of cases noted the male caregiver had mental health issues.

Table 7-9(a)
Female Caregiver Functioning by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Alcohol abuse	7%	983	9%	122	18%	2,699	16%	1,309	9%	1,625	12%	6,738
Drug/Solvent Abuse	5%	616	1%	–	18%	2,722	14%	1,134	5%	958	10%	5,439
Criminal Activity	3%	430	1%	–	9%	1,284	10%	787	5%	923	6%	3,433
Cognitive Impairment	3%	409	2%	–	10%	1,557	9%	725	5%	890	6%	3,613
Mental Health Issues	17%	2,224	15%	217	27%	3,982	42%	3,465	17%	3,008	23%	12,896
Physical Health Issues	6%	745	4%	–	13%	1,904	10%	785	6%	1,027	8%	4,524
Few Social Supports	29%	3,909	26%	373	45%	6,684	34%	2,806	31%	5,485	35%	19,257
Maltreated as a Child	18%	2,334	27%	379	25%	3,775	26%	2,098	15%	2,727	20%	11,313
Domestic Violence	31%	4,143	8%	111	29%	4,335	52%	4,272	90%	16,110	52%	28,971
Other Concerns	4%	532	9%	122	4%	663	3%	260	3%	519	4%	2,096
Investigations Where at Least one Female Caregiver Functioning Issue was Noted	57%	7,601	49%	690	74%	10,990	79%	6,507	95%	17,008	77%	42,802
At Least one Female Caregiver in the Home		13,337		1,410		14,842		8,190		17,953		55,772
Total Child Investigations*		14,054		1,490		15,660		8,703		18,518		58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,039 substantiated child maltreatment investigations with information about female caregiver functioning. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column Totals for Table 7-9 are more than the total number of children for whom at least one caregiver functioning issue was noted because there can be several different stressors noted for each caregiver. Row percentages may add up to 99% or 101% because of rounding.

Emotional Maltreatment: Seventy-nine percent of female caregivers in investigations where emotional maltreatment was the primary substantiated concern experienced at least one functioning issue: in 52% of investigations, domestic violence was noted; 42% involved mental health issues and 34% noted few social supports.

In 63% of investigations where emotional maltreatment was the primary substantiated concern at least one functioning issue was noted for male caregivers: 32% of cases noted few social supports, 31% noted

Table 7-9(b)
Male Caregiver Functioning by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Alcohol abuse	14%	1,276	12%	106	18%	1,495	22%	950	37%	3,453	23%	7,280
Drug/Solvent Abuse	5%	469	1%	–	13%	1,078	15%	657	12%	1,112	10%	3,325
Criminal Activity	6%	579	12%	110	12%	1,028	14%	617	18%	1,643	12%	3,977
Cognitive Impairment	1%	125	2%	–	12%	976	4%	188	2%	209	5%	1,520
Mental Health Issues	10%	900	5%	–	17%	1,448	16%	686	15%	1,410	14%	4,488
Physical Health Issues	6%	597	7%	–	9%	750	8%	336	4%	363	7%	2,114
Few Social Supports	23%	2,146	9%	–	38%	3,194	32%	1,372	21%	1,972	27%	8,764
Maltreated as a Child	13%	1,159	10%	–	12%	1,018	9%	796	8%	775	12%	3,837
Domestic Violence	23%	2,103	8%	–	15%	1,286	31%	1,321	84%	7,711	39%	12,493
Other Concerns	4%	379	2%	–	4%	316	2%	–	3%	242	3%	1,050
Investigations Where at Least one Male Caregiver Functioning Issue was Noted	52%	4,762	31%	286	60%	5,004	63%	2,690	89%	8,249	66%	20,991
At Least One Male Caregiver in the Home		9,196		913		8,317		4,275		9,220		31,921
Total Child Investigations*		14,054		1,490		15,660		8,703		18,518		58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 1,775 substantiated child maltreatment investigations with information about male caregiver functioning. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column Totals for Table 7-9 are more than the total number of children for whom at least one caregiver functioning issue was noted because there can be several different stressors noted for each caregiver. Row percentages may add up to 99% or 101% because of rounding.

domestic violence, 22% of cases alcohol abuse by a male caregiver was noted, 16% noted male caregivers with mental health issues and 15% of these investigations involved drug or solvent abuse.

Exposure to Domestic Violence: Ninety-five percent of investigations where exposure to domestic violence was the primary substantiated concern involved at least one functioning issue for female caregivers: in 90% of investigations domestic violence was noted, 31% involved female caregivers with few social supports and 17% noted female caregivers experiencing mental health issues.

In 89% of investigations where exposure to domestic violence was the primary substantiated concern at least one functioning issue was noted for male caregivers. Eighty-four percent of cases had domestic violence noted as a concern for the male caregiver living in the home. Alcohol abuse by a male caregiver was noted in 37% of investigations. Few social supports of a male caregiver were noted in 21% of investigations and criminal activity by a male caregiver was noted in 18% of investigations.

Custody/Access Dispute

Table 7-10 presents information on whether there was an ongoing child custody/access dispute at the time of the child maltreatment investigation. For a worker to indicate yes, there had to have been a court application made or pending. In 86% of substantiated investigations there was no custody or access dispute. Thirteen percent of substantiated investigations involved a custody or access dispute and in 2% of substantiated cases whether there was a custody/access dispute was unknown.

Physical Abuse: Eighty-eight percent of investigations where physical abuse was the primary substantiated maltreatment did not involve a custody/access dispute. Eleven percent of investigations where physical abuse was the primary substantiated maltreatment involved a custody/access dispute.

Sexual Abuse: Ninety-five percent of investigations where sexual abuse was the primary substantiated concern did not involve a custody/access dispute.

Neglect: Ninety-one percent of investigations where neglect was the primary substantiated concern did not involve a custody/access dispute. Seven percent did involve a custody/access dispute.

Emotional Maltreatment: Eighty percent of investigations where emotional maltreatment was the primary substantiated concern did not involve a custody/access dispute. Nineteen percent of investigations where emotional maltreatment was the primary substantiated concern involved a custody/access dispute.

Exposure to Domestic Violence: Eighty-two percent of investigations where exposure to domestic violence was the primary substantiated concern did not involve a custody/access dispute. Sixteen percent of investigations where exposure to domestic violence was the primary substantiated concern involved a custody/access dispute.

Table 7-10
Custody Dispute by Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Custody Dispute	88%	12,329	95%	1,413	91%	14,253	80%	6,931	82%	15,133		86%
Custody Dispute	11%	1,479	5%	–	7%	1,146	19%	1,680	16%	3,025	13%	7,407
Unknown	2%	246	0%	–	2%	260	1%	–	2%	360	2%	958
Total*	100%	14,054	100%	1,490	100%	15,659	100%	8,703	100%	18,518	100%	58,424

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information on custody disputes. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

■ 8. REFERRAL AND AGENCY CHARACTERISTICS

Chapter 8 describes referral and agency characteristics, including referral sources, malicious and unsubstantiated referrals, agency size and structure, and investigating workers' professional training and years of experience. As with the previous chapters, the tables are presented in terms of the estimated number of child maltreatment investigations in Ontario in 2003, by primary category of substantiated maltreatment. Selected comparisons with the findings from the OIS-1993 and OIS-1998 are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 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 services, (2) reported cases that were screened out by child welfare services before being fully investigated, (3) new reports on cases already open by child welfare services, and (4) cases that were investigated only by the police.

Source of Referral

Table 8-1 presents the different categories of non-professionals and professionals who referred cases of substantiated maltreatment. Each independent contact with the child welfare agency or office regarding a child/children or family was counted as a separate referral. The person who actually contacted the child welfare agency/office was identified as the referral source. For example, if a child disclosed an incident of abuse to a school teacher, who made a report to child welfare services, the school was counted as a referral source. However, if both the school teacher and the child's parent called, both would be counted as referral sources.

The Maltreatment Assessment Form included 18 pre-coded referral source categories and an open "other" category. Referral sources were collapsed into 12 categories reflected in Tables 8-1.

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 Face Sheet* of the OIS-2003 Maltreatment Assessment Form.

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 his/her family.

Anonymous: A caller who is not identified.

Other referral source: Any other source of referral.

Professional Referral Sources:

Community Agencies: This includes social assistance worker (involved with the household), crisis service/shelter worker (includes any shelter or crisis services worker) for domestic violence or homelessness, community recreation centre staff (refers to any person from a recreation or community activity programs), day care centre staff (refers to a childcare or day care provider), and community agency staff.

Health Professional: This includes hospital referrals that originate from a hospital made by either a doctor, nurse or social worker rather than a family physician's office, public health nurse (nurses involved in services such as family support, family visitation programs and community medical outreach), and physician (any family physician with a single or ongoing contact with the child and/or family).

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

Mental Health Professional/Agency: Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside of a school/hospital/child welfare/*Youth Justice Act* setting.

Other Child Welfare Services: Includes referrals from mandated Child Welfare service providers from other jurisdictions or provinces.

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

Seventy-eight percent of referrals of substantiated maltreatment investigations (an estimated 45,234 child investigations) were made by professionals through their contact with children. The largest source of referrals was the police, who referred an estimated 21,744 substantiated investigations to child welfare services, representing 37% of all substantiated investigations. School personnel referred 20% of substantiated investigations, and community agencies referred another 8%. Non-professional community sources referred 17% of substantiated investigations.⁷² An estimated 5,423 substantiated investigations (9%) were referred to child welfare services by parents. Relatives accounted for 3% of referrals for substantiated investigations, neighbors/family friends for another 3%, and children themselves for 2%.

⁷² Because Table 8-1 documents up to three sources of referral per investigation, categories will add up to more than 100%.

Physical Abuse: School personnel referred 47% of all investigations where physical abuse was the primary substantiated concern; police referred the second largest number (14%) followed by community agencies (10%) and parents who referred for 9%.

Sexual Abuse: Police were the most common source of referral for all investigations where sexual abuse was the primary substantiated concern, being responsible for referring 22% (an estimated 333 child investigations). Parents and school personnel accounted for most of the remaining referrals of investigations where sexual abuse was the primary substantiated maltreatment (16% and 12% respectively).

Table 8-1
All Referral Sources (Non-Professional and Professional) by Primary Category of Substantiated Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Non-Professional Referral Sources												
Parent	9%	1,276	16%	235	10%	1,593	17%	1,466	5%	853	9%	5,423
Child	4%	494	4%	–	2%	264	2%	138	0%	–	2%	1,009
Relative	1%	188	6%	–	4%	615	3%	264	2%	444	3%	1,600
Neighbour/Friend	3%	371	5%	–	7%	1,017	1%	113	1%	191	3%	1,764
Other Referral Sources	3%	387	3%	–	9%	1,388	7%	581	3%	569	5%	2,968
Anonymous	1%	–	7%	103	8%	1,197	3%	229	1%	259	3%	1,853
Any Non-Professional Referral Source	16%	2,249	31%	457	22%	3,422	23%	1,981	8%	1,540	17%	9,649
Professional Referral Sources												
Police	14%	1,947	22%	333	23%	3,553	33%	2,849	71%	13,062	37%	21,744
School Personnel	47%	6,553	12%	179	18%	2,803	11%	913	6%	1,110	20%	11,558
Health Professional	5%	731	10%	146	10%	1,499	10%	846	2%	349	6%	3,571
Mental Health Professional	4%	618	4%	–	3%	393	4%	338	1%	177	3%	1,578
Other Child Welfare Service	3%	421	7%	106	7%	1,071	6%	532	5%	856	5%	2,986
Community Agency	10%	1,456	9%	139	5%	805	9%	786	7%	1,207	8%	4,393
Any Professional Referral Source	83%	11,600	62%	922	63%	9,920	72%	6,222	90%	16,570	78%	45,234
Total Child Investigations*		14,054		1,490		15,660		8,703		18,518		58,425

Ontario Incidence Study of Reported Child Abuse and Neglect

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about referral source. Totals are not additive as up to three referral sources could be documented for each investigation. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total.

Neglect: Police were the source of referral that stands out the most in investigations where neglect was the primary substantiated maltreatment with 23%. School personnel referred 18% of substantiated neglect investigations, parents and health professionals both referred for 10%.

Emotional Maltreatment: Police were the most common source of referral for investigations where emotional maltreatment was the primary substantiated concern, being responsible for referring 33% (an estimated 2,849 child investigations). Parents referred 17% of these investigations and school personnel referred 11%.

Exposure to Domestic Violence: Police referrals accounted for 71% of investigations where exposure to domestic violence was the primary substantiated maltreatment. The role of the police in these cases can be accounted for by the fact that police are often the first to intervene in domestic violence cases.

Unsubstantiated and Malicious Reports

Every provincial and territorial child welfare statute requires professionals and members of the public to report suspected maltreatment. To ensure that investigations are carried out by trained child welfare professionals in a thorough yet minimally intrusive manner, those reporting are not expected to attempt to verify their suspicions prior to reporting. After an investigation, 46% of cases tracked by the OIS-2003 were found to be unsubstantiated (see Table 3-1). Although most of these referrals were made in good faith, in some instances the allegations appeared to have been made with malicious intent, by a person who knew the allegation was false. Investigating workers classified such referrals as “malicious.”

Table 8-2(a) illustrates unsubstantiated and malicious reports for investigated children by primary category of maltreatment and by level of substantiation, and Table 8-2(b) provides a breakdown of malicious referrals by source of referral and by level of substantiation. Most unsubstantiated reports were considered to have been made in good faith, but 5% of all allegations of maltreatment (an estimated 6,162 child investigations) were judged to have been intentionally false. In another 6% of cases, the investigating worker was unable to determine whether or not an unsubstantiated report had been made in good faith.

Primary Categories of Maltreatment: Most of the reports that were judged to be malicious involved allegations of neglect with 7% of neglect reports. Physical abuse and sexual abuse were judged to be malicious for both 5% of abuse reports. Four percent of emotional maltreatment allegations were considered to be malicious. Only 1% of allegations of exposure to domestic violence were deemed malicious.

Table 8-2(a)
Unsubstantiated and Malicious Reports of Maltreatment by Primary Category of Maltreatment in Ontario in 2003

	Primary Category of Substantiated Maltreatment						Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence		
Substantiated Reports	38% 14,054	22% 1,490	38% 15,660	47% 8,703	75% 18,518	46%	58,425
Suspected Reports	10% 3,650	11% 756	10% 4,074	14% 2,632	8% 1,920	10%	13,032
Unsubstantiated Non-Malicious Reports	41% 15,118	54% 3,585	36% 14,834	29% 5,338	14% 3,517	33%	42,392
Unsubstantiated Malicious Reports	5% 1,930	5% 304	7% 2,948	4% 815	1% 165	5%	6,162
Unsubstantiated Reports, Malicious Intent Unknown	5% 1,800	8% 551	9% 3,805	5% 913	2% 543	6%	7,612
Total Child Investigations*	100% 36,552	100% 6,686	100% 41,321	100% 18,401	100% 24,663	100%	127,623

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 7,149 child maltreatment investigations. Row percentages may add up to 99% or 101% because of rounding.

Table 8-2(b)
Unsubstantiated and Malicious Reports of Maltreatment by Referral Source Category in Ontario in 2003

	Referral Source Category									
	Parent	Child	Relative	Neighbour/ Friend	Professional or Service	Other	Anonymous			
Substantiated Reports	42% 5,424	55% 1,009	33% 1,602	26% 1,762	50% 45,233	49% 2,966	25% 1,854			
Suspected Reports	13% 1,736	13% 239	14% 865	7% 457	10% 8,876	11% 672	9% 641			
Unsubstantiated Non-Malicious Reports	27% 3,571	24% 431	21% 1,036	22% 1,503	37% 33,410	26% 1,577	19% 1,386			
Unsubstantiated Malicious Reports	9% 1,130	6% 111	11% 539	19% 1,302	1% 1,269	8% 474	22% 1,581			
Unsubstantiated Reports, Malicious Intent Unknown	9% 1,172	2% –	21% 1,024	27% 1,829	2% 1,711	6% 347	26% 1,907			
Total Child Investigations*	100% 13,003	100% 1,827	100% 4,886	100% 6,853	100% 90,499	100% 6,036	100% 7,369			

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 7,172 child maltreatment investigations with information about malicious intent and referral source. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Source of Referral: Table 8-2(b) shows unsubstantiated and malicious referrals for investigated children by referral source. Parents, relatives and neighbours/friends were considered to be responsible for almost forty percent (39%) of all malicious referrals; an estimated 2,432 children were subjected to unnecessary maltreatment investigations as a result of referrals from these three sources. Although reports from professionals were rarely judged to have been intentionally false (1%, or an estimated 1,269 investigations), these reports nonetheless accounted for the third largest group of unsubstantiated malicious referrals (20% of malicious referrals). Anonymous reports constituted the next largest group of malicious referrals, involving an estimated 1,581 child maltreatment investigations.

Agency/Office Size

The OIS-2003 sampled investigations from 18 agencies/offices across Ontario. The following two tables provide a description of the types of child maltreatment investigations by agency/office size and level of urbanization.

Agency/office size is categorized in terms of the 2003 annual case openings:

Small Agencies/Offices: Less than 950 case openings per year.

Medium Agencies/Offices: Between 950 and 2,000 annual case openings per year.

Large Agencies/Offices: More than 2,000 case openings per year.

Size classification is agency/office specific rather than site specific. One site included more than one agency covering the same geographic area,⁷³ yielding a total of 18 agencies/offices. In total, the OIS-2003 agencies/offices include six large offices that process over 2,000 investigations per year, six medium agencies/offices, and six small agencies/offices.

Table 8-3 presents child maltreatment investigations in terms of the size of the agencies/offices where the investigations were conducted. An estimated 28,152 substantiated investigations (48%) were conducted by large agencies/offices, 37% were conducted by medium agencies/offices and 15% by small agencies/offices.

Physical Abuse: Fifty-seven percent of investigations where physical abuse was the primary substantiated concern were conducted by large agencies/sites; thirty percent were conducted by medium agencies/offices. Small agencies/offices conducted 14% of investigations where physical abuse was the primary substantiated maltreatment.

⁷³ These sites serve specific faith communities.

Sexual Abuse: Medium agencies/office conducted 59% of investigations where sexual abuse was the primary substantiated concern. Twenty-nine percent of these investigations were conducted by large agencies/offices and 12% by small agencies/offices.

Neglect: Forty-three percent of investigations where neglect was the primary substantiated maltreatment were investigated by medium agencies/offices, 40% by large agencies/offices and 17% by small agency/offices.

Emotional Maltreatment: Large agencies conducted half of investigations where emotional maltreatment was the primary substantiated concern, 29% were conducted by medium agency/offices and 22% percent by small agencies/offices.

Exposure to Domestic Violence: Half of investigations where exposure to domestic violence was the primary substantiated concern were investigated by large agencies/offices, 38% by medium agencies/offices and 11% by small agency/offices.

Table 8-3
Relative Size of Child Welfare Agency/Office by Primary Category of Substantiated Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Small (< 950 cases/year)	14%	1,914	12%	177	17%	2,728	22%	1,921	11%	2,084	15%	8,824
Medium (950–2,000 cases/year)	30%	4,215	59%	880	43%	6,760	29%	2,482	38%	7,112	37%	21,449
Large (> 2,000 cases/year)	57%	7,925	29%	433	40%	6,172	50%	4,300	50%	9,322	48%	28,152
Total Child Investigations*	100%	14,054	100%	1,490	100%	15,660	100%	8,703	100%	18,518	100%	58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about size of agency/office from which the investigation originated. Row percentages may add up to 99% or 101% because of rounding.

Urban and Rural Service Area

The 16 OIS-2003 Child Welfare Service Areas were sampled to provide a representative sample of both urban and rural areas across Ontario. The 18 OIS-2003 sites were categorized into one of three service area classifications:

Large Metropolitan Service Area: Providing child welfare services to densely populated urban settings, including suburban sites within a metropolitan site.

Mixed Urban/Rural Service Area: Providing child welfare services to sites with a wide population density range.

Primarily Rural Service Area: Providing child welfare services primarily to sparsely populated areas.

Table 8-4 presents child investigations by child welfare services based on population density. Large metropolitan service areas investigated 55% of substantiated maltreatment cases (an estimated 32,260 child investigations). Mixed urban rural areas conducted 35% of substantiated investigations, and primarily rural child welfare services conducted ten percent.

Physical Abuse: Large metropolitan service areas conducted 61% of investigations where physical abuse was the primary substantiated concern, and mixed urban/rural service areas conducted 30%. Rural service areas conducted 9% of investigations where physical abuse was the primary substantiated concern.

Sexual Abuse: Large metropolitan service areas conducted 41% of investigations where sexual abuse was the primary substantiated concern, and mixed urban/rural service areas conducted 29%. Rural service areas conducted 30% percent of investigations where sexual abuse was the primary substantiated concern.

Neglect: Rural service areas conducted 11% of investigations where neglect was the primary substantiated maltreatment. Large metropolitan service areas conducted 46% of investigations where neglect was the primary substantiated concern, and mixed urban/rural service areas conducted 42%.

Emotional Maltreatment: Rural service areas conducted 5% of investigations where emotional maltreatment was the primary substantiated concern. Large metropolitan service areas conducted 58% of investigations where emotional maltreatment was the primary substantiated concern, and mixed urban/rural service areas conducted 37%.

Exposure to Domestic Violence: Large metropolitan service areas conducted 58% of investigations where exposure to domestic violence was the primary substantiated concern, and mixed urban/rural service areas conducted 32%. Rural service areas conducted 11% of investigations where exposure to domestic violence was the primary substantiated maltreatment.

Table 8-4
Urban/Rural Location of Child Welfare Agency/Office by Primary Category of Substantiated Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
Large Metropolitan Service Area	61%	8,620	41%	617	46%	7,261	58%	5,072	58%	10,690	
Mixed Urban and Rural Service Area	30%	4,163	29%	426	42%	6,646	37%	3,227	32%	5,831	35% 20,293
Primarily Rural Service Area	9%	1,271	30%	447	11%	1,753	5%	404	11%	1,997	10% 5,872
Total Child Investigations*	100%	14,054	100%	1,490	100%	15,660	100%	8,703	100%	18,518	100% 58,425

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,193 substantiated child maltreatment investigations with information about the location of the agency/office from which the investigation originated. Row percentages may add up to 99% or 101% because of rounding.

Worker Position, Experience, and Education

Child maltreatment investigations tracked by the OIS involved 431 child welfare workers. Workers were asked to complete professional background information forms. Responses were received from 361 workers (84%). The collected information included workers' position at the agency, educational experience, and number of years of experience as child welfare workers.

Table 8-5 shows the position of workers investigating reported maltreatment by primary category of substantiated maltreatment. Ninety-two percent of substantiated investigations were conducted by intake workers with specialized investigation caseloads, and 6% were conducted by generalists with a mixed caseload of investigations and cases for which they were providing ongoing services such as counseling, case management, and supervision. Workers in other positions, such as supervisors and night-duty workers, conducted 2% of investigations.

Physical Abuse: Intake specialists investigated 96% of substantiated physical abuse cases, generalists 3%, and other workers 1%.

Sexual Abuse: Ninety-five percent of substantiated sexual abuse investigations were conducted by intake workers (1,300 substantiated investigations).

Table 8-5
Job Position of Investigating Worker by Primary Category of Substantiated Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
Intake and Investigation Specialists	96%	10,841	95%	1,300	91%	11,160	91%	6,446	91%	13,377	
Generalists with Mixed Intake and Ongoing Service Caseloads	3%	386	4%	–	7%	796	6%	434	8%	1,158	6% 2,822
Other	1%	114	2%	–	3%	309	3%	194	1%	203	2% 841
Total*	100%	11,341	100%	1,369	100%	12,265	100%	7,074	100%	14,738	100% 46,787

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 2,683 substantiated child maltreatment investigations with information about investigating worker's job position. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

Neglect: Intake workers investigated 91% of substantiated neglect investigations; generalists conducted 7% of substantiated neglect investigations and other workers 3%.

Emotional Maltreatment: Intake workers conducted the majority of substantiated emotional maltreatment investigations (91%); generalists conducted 6% of investigations and other workers 3% of substantiated emotional maltreatment investigations.

Exposure to Domestic Violence: Intake workers conducted the majority of substantiated exposure to domestic violence investigations (91%); generalists conducted 8% of substantiated exposure to domestic violence investigations and other workers 1%.

Years of Experience

Table 8-6 presents child maltreatment investigations in terms of the investigator's years of child welfare experience. Twenty-nine percent of substantiated investigations (or an estimated 13,213 investigations) were conducted by workers who had more than 4 years of child welfare experience, and 17% having more than 6 years of experience. Workers with one to four years of child welfare experience conducted 68% of the substantiated investigations, and workers with less than 12 months of child welfare experience conducted 4%.

Table 8-6
Years of Child Welfare Experience of Investigating Workers by Primary Category
of Substantiated Maltreatment in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
Less than 1 Year	5%	529	8%	109	5%	597	3%	165	3%	439	4% 1,839
1–2 Years	38%	4,335	24%	327	35%	4,365	35%	2,324	41%	6,032	38% 17,383
3–4 Years	32%	3,577	38%	508	28%	3,512	32%	2,143	29%	4,221	30% 13,961
5–6 Years	11%	1,247	9%	126	11%	1,379	12%	810	13%	1,859	12% 5,421
More than 6 Years	14%	1,593	20%	274	20%	2,502	18%	1,185	15%	2,238	17% 7,792
Total Child Investigations*	100%	11,281	100%	1,344	100%	12,355	100%	6,627	100%	14,789	100% 46,396

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 2,644 substantiated child maltreatment investigations with information about worker's years of child welfare experience. Row percentages may add up to 99% or 101% because of rounding.

Physical Abuse: Workers with more than 4 years experience conducted 25% of substantiated physical abuse investigations, workers with one to four years of experience conducted 70% of substantiated investigations and those with less than 12 months of experience conducted 5%.

Sexual Abuse: Workers with over 4 years experience conducted 29% of substantiated sexual abuse investigations. Workers with one to four years of child welfare experience conducted 62% of substantiated sexual abuse investigations and workers with less than 12 months of child welfare experience conducted 8% of substantiated sexual abuse investigations.

Neglect: In 31% of substantiated neglect investigations workers with more than 4 years experience were involved, and in 5% of cases workers with less than 12 months of experience were involved.

Emotional Maltreatment: Workers with more than 4 years of experience conducted 30% of substantiated emotional maltreatment investigations, and those with less than 12 months of experience conducted 3% of substantiated emotional maltreatment investigations.

Exposure to Domestic Violence: Workers with more than 4 years of experience conducted 28% of substantiated exposure to domestic violence investigations, workers with one to four years of child welfare experience conducted 70% of substantiated exposure to domestic violence and those with less than 12 months of experience conducted 3%.

Educational Background

Table 8-7 presents substantiated child maltreatment investigations in terms of the investigator's highest completed professional degree. Fifty-eight percent of substantiated cases were investigated by workers with a Bachelor of Social Work degree (BSW), 8% by workers with a Masters of Social Work (MSW), 3% by workers with a Master of Science degree (MSc), 28% by workers with a bachelors of arts or science degree (BA or BSc), and 4% by workers with a college diploma or certificate.

Physical Abuse: Workers with a BSW conducted 59% of investigations where the primary substantiated maltreatment was physical abuse, workers with a bachelor's degree in arts or science conducted 26%, and workers with an MSW conducted 9% of these investigations.

Sexual Abuse: Workers with a social work degree (BSW or MSW) conducted 55% of investigations where the primary substantiated maltreatment was sexual abuse. Workers with a BA or BSc conducted 28% of these investigations.

Neglect: Workers with a BSW or MSW conducted almost two thirds (60%) of substantiated neglect investigations.

Emotional Maltreatment: Workers with a BSW or MSW conducted 71% of substantiated emotional maltreatment investigations followed by workers with a BSc or BA (24%) and workers with a Master of Science degree (3%).

Exposure to Domestic Violence: Workers with a BSW or MSW conducted two thirds (66%) of substantiated exposure to domestic violence investigations followed by workers with a BA or BSc (27%) and workers with a college degree or certificate (4%).

Table 8-7
Highest Completed Educational Level of Investigating Workers by Primary Category of Substantiated Maltreatment Investigations in Ontario in 2003

	Primary Category of Substantiated Maltreatment										
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total
MSW	9%	1,049	5%	–	6%	733	10%	681	7%	1,074	8% 3,599
BSW	59%	6,890	50%	676	54%	6,817	61%	4,298	59%	8,909	58% 27,590
MSc	3%	312	5%	–	3%	416	3%	195	3%	448	3% 1,441
BA/BSc	26%	2,968	28%	380	33%	4,183	24%	1,674	27%	4,038	28% 13,243
College Diploma or Certificate	3%	399	12%	–	4%	476	2%	157	4%	593	4% 1,779
Total Child Investigations*	100%	11,618	100%	1,342	100%	12,625	100%	7,005	100%	15,062	100% 47,652

Ontario Incidence Study of Reported Child Abuse and Neglect

* Based on a sample of 2,685 substantiated child maltreatment investigations with information about worker's highest educational level. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Row percentages may add up to 99% or 101% because of rounding.

■ 9. OIS-1993, OIS-1998, AND OIS-2003

The OIS-2003 report provides a comprehensive statistical profile of children and families who came into contact with child welfare services in Ontario in 2003. This final chapter of the report examines the OIS-2003 findings in comparison to the OIS-1993 and OIS-1998.

OIS-1993, OIS-1998, and OIS-2003

Tables 9-1 to 9-7 describe some of the changes in investigated and substantiated maltreatment that have occurred across Ontario primarily between the OIS-1998 and the OIS-2003 with selected comparisons that include data from the OIS-1993. These results should be interpreted with caution since a number of factors are not controlled for in this preliminary analysis. Changes in rates of investigated or substantiated maltreatment can be attributed to a number of 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,⁷⁴ and (4) changes in the actual rate of maltreatment. In other words, an increase in the rate of reported child maltreatment does not necessarily indicate that more children are being abused or neglected; it can indicate that awareness and reporting have increased. As depicted in the “Iceberg Figure” in Chapter 1 (Figure 1-1), an increase in reported maltreatment might simply indicate that a larger portion of the iceberg is visible above the water line.

Table 9-1
Child Maltreatment Investigations by Level of Substantiation for Primary Maltreatment in Ontario 1998 and 2003

	Child Maltreatment Investigations						
	1998*			2003**			Significance Level
	Number of Investigations	Rate per 1,000 children	Substantiation Rate	Number of Investigations	Rate per 1,000 children	Substantiation Rate	
Substantiated	23,145	9.82	36%	58,425	24.44	44%	$p < .01$
Suspected	14,288	6.06	22%	13,032	5.45	10%	ns
Unsubstantiated	27,225	11.55	42%	56,652	23.70	46%	$p < .001$
Total	64,658	27.43	100%	128,108	53.59	100%	$p < .01$

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 3,050 child maltreatment investigations in 1998.
** Based on a sample of 7,172 child maltreatment investigations in 2003.

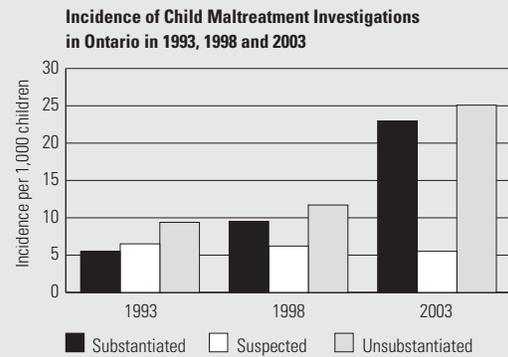
⁷⁴ These changes are described in Chapter 2. Study procedures, in particular sample selection and weighting, have been kept consistent between both studies. Some changes have been made to the specific forms of maltreatment tracked by the study, but the major typologies have not changed.

Increase in Substantiated Maltreatment

Table 9-1 describes the increase in child maltreatment investigations from 1998 to 2003 across all of Ontario. Across the province the estimated rate of investigations has increased 95% from a rate of 27.43 per thousand children to 53.59 per thousand. During the same period the estimated number of investigations has grown from 64,658 investigations in 1998 to 128,108 investigations in 2003. The rate of substantiated maltreatment in the OIS sample has increased 149%, from 9.82 substantiated cases per thousand children in 1998 to 24.44 in 2003.

Figure 9-1

Since 1993 the incidence of child maltreatment investigations has increased 151%. This increase can be largely attributed to the 320% increase in the number of substantiated investigations between 1993 and 2003.



Part of the increase in substantiated cases appears to reflect a shift in the way investigating workers classify cases, with a much smaller proportion of cases being classified as suspected, 10% in 2003 compared to 22% in 1998, in Ontario. The increase also reflects changes in the policies and practices that occurred across the province from 1998 to 2000. These include changes in the way children are investigated as well as growing awareness of the impact of domestic violence on children (see below).

More Children Investigated in each Family

Table 9-2 describes the relationship between the number of investigated families and the number of investigated children in 1998 and 2003 in Ontario. During that period the number of families⁷⁵ investigated increased 57% from an estimated 47,581 investigated families to 74,857 investigated families. During the same period, the number of investigated children increased 98% from an estimated 64,658 investigated children to 128,108 investigated children.

Like most public health statistics, the OIS is designed to track incidence of investigated maltreatment by child, not by family. Ontario children aid societies however, process investigations at the family level. The dramatic increase in the rate of investigated and substantiated children appears in part to be due to a shift in investigation practices. The average number of investigated children per family has increased from 1.36 to 1.71 (Table 9-2). This increase could be due to a greater understanding of the impact of maltreatment or to changes in the types of maltreatment investigated or to changes in administrative procedures. Further analysis is required to better understand the factors underlying this development.

⁷⁵ Note that this table does not include an incidence rate of investigations per thousand families with children, because the OIS-2003 was not designed to track incidence rates at the family level.

Table 9-2
Investigated Families Compared to Investigated Children in Ontario in 1998 and 2003

	1998*	2003**	Significance Level
	Number of Investigations	Number of Investigations	
Investigated Families	47,581	74,857	$p < .05$
Investigated Children	64,658	128,108	$p < .01$
Average Number of Investigated Children per Family	1.36	1.71	

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 2,193 family maltreatment investigations in 1998
 ** Based on a sample of 4,175 family maltreatment investigations in 2003

Variations by Category of Maltreatment

Table 9-3 provides further indication of some of the factors underlying the increase in the rate of substantiated maltreatment. All forms of child maltreatment have increased significantly during this period, other than sexual abuse. The increase has been most dramatic with respect to exposure to domestic violence and emotional maltreatment. The rate of exposure to domestic violence has increased 319% from 1.85 substantiated cases per thousand to 7.75 and the rate of emotional maltreatment has increased 359% from 0.79 substantiated cases per thousand to 3.64. In 1998 these two forms of maltreatment accounted for 27% of substantiated cases, by 2003 they have come to account for 47% of cases. These differences reflect a shift in awareness with respect to the impact of

Table 9-3
Substantiated Child Maltreatment Investigations by Primary Category in Ontario in 1998 and 2003

	Child Maltreatment Investigations						
	1998*			2003**			Significance Level
	Number of Investigations	Rate per 1,000 children	% of Substantiated Investigations	Number of Investigations	Rate per 1,000 children	% of Substantiated Investigations	
Physical Abuse	7,512	3.19	33%	14,054	5.88	24%	$p < .05$
Sexual Abuse	1,802	0.76	8%	1,490	0.62	3%	ns
Neglect	7,608	3.23	33%	15,660	6.55	27%	$p < .001$
Emotional Maltreatment	1,870	0.79	8%	8,703	3.64	15%	$p < .001$
Exposure to Domestic Violence	4,353	1.85	19%	18,518	7.75	32%	$p < .001$
Total	23,145	9.82	100%	58,425	24.44	100%	$p < .001$

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 1,055 substantiated investigations.
 ** Based on a sample of 3,193 substantiated investigations.

emotional maltreatment and exposure to domestic violence, as well as changes to legislation and investigation procedures.

During the same period rates of physical abuse and neglect have increased at a much slower pace, with substantiated physical abuse increasing 84% from 3.19 cases per thousand to 5.88 and neglect increasing 103% from 3.23 to 6.55. In sharp contrast to all other forms of maltreatment, cases of substantiated sexual abuse have decreased by 18%, dropping from 0.76 substantiated victims per thousand children to 0.62. This decrease was not statistically significant.

Rates of Substantiated Maltreatment by Age Group

Table 9-4 examines the increase in substantiated maltreatment by victim age group. The largest increase in substantiated child maltreatment occurred for children under one-year of age. In 1998, 6.52 per thousand children (927 investigations) were substantiated as victims of maltreatment, in 2003 the incidence of substantiated maltreatment increased to 33.10 per thousand children (4,149 investigations), over four times the rate of victimization identified in 1998. The rate of increase was also more pronounced for 1 to 3 year-olds. In 1998, the incidence of substantiated maltreatment for

Figure 9-2

The changes documented in maltreatment typologies between 1998 and 2003 are consistent with a longer trend beginning in 1993 which reflect an expansion of physical abuse and neglect, a decrease in reported sexual abuse and a dramatic increase in emotional maltreatment and exposure to domestic violence.

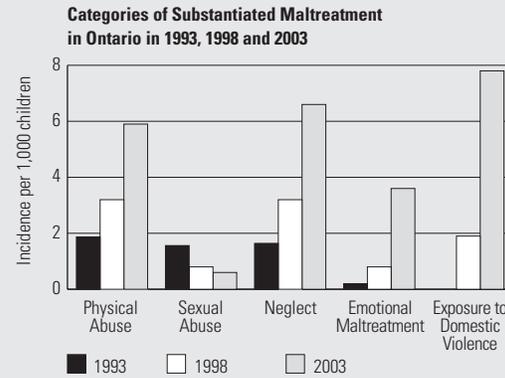


Table 9-4
Child Age in Substantiated Child Maltreatment Investigations in Ontario in 1998 and 2003

Child Age Group	1998*			2003**			Significance Level
	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated Investigations	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated Investigations	
< 1 year	927	6.52	4%	4,149	33.10	7%	<i>p</i> < .001
1–3 years	3,499	7.97	15%	8,928	22.11	15%	<i>p</i> < .001
4–7 years	5,490	9.03	24%	14,756	24.64	25%	<i>p</i> < .001
8–11 years	6,552	11.07	28%	16,438	25.72	28%	<i>p</i> < .001
12–15 years	6,678	11.58	29%	14,153	22.71	24%	<i>p</i> < .01
Total Maltreatment Investigations	23,145	9.82	100%	58,425	24.44	100%	<i>p</i> < .001

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 1,055 substantiated investigations with information about child age.
** Based on a sample of 3,193 substantiated investigations with information about child age.

this age group was 7.97 per thousand children (3,499 investigations). The incidence rate increased by 177% in 2003, to 22.11 per thousand children (8,928 investigations). The rate of substantiated maltreatment also increased significantly for all other age groups.

Lower Proportion of Cases Involving Harm

Table 9-5 compares rates of physical harm, emotional harm, and duration of maltreatment in 1998 and 2003. There has been no increase in the incidence of physical harm from 1998 to 2003. There is however a significant difference in the incidence of emotional harm, which has increased from 2.60 emotionally harmed victims per 1,000 children in 1998 to 4.28 in 2003. This represents an increase of the 65%, far less than the overall 149% increase in substantiated cases of maltreatment. The proportion of victims of maltreatment who display signs of harm has decreased from 21% to 9% for physical harm and from 27% to 18% for emotional harm. In other words the increase in maltreatment rates documented by the OIS appears to be driven primarily by cases where children have not been visibly harmed.

Changes in the distribution of cases in terms of the duration of maltreatment indicate that the increase in maltreatment rates has increased for single incident cases and multiple incidence lasting more than six months. Single incident cases have increased at the fastest rate, a 169% increase from 3.18 substantiated single incident cases per 1,000 children to 8.55. Multiple incidents over longer term have also increased by 156% from 3.23 per 1,000 children to 8.27 per 1,000 children.

Table 9-5
Case Characteristics of Substantiated Child Maltreatment Investigations in Ontario in 1998 and 2003

	1998*			2003**			Significance Level
	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated cases	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated cases	
Any Physical Harm	4,918	2.09	21%	4,989	2.09	8%	ns
Any Emotional Harm	6,137	2.60	27%	10,241	4.28	18%	$p < .05$
Duration of Maltreatment							
Single Incident	7,499	3.18	33%	20,441	8.55	36%	$p < .001$
Multiple Incidents – < 6 Months	4,685	1.99	21%	8,408	3.52	15%	$p < .001$
Multiple Incidents – > 6 Months	7,625	3.23	33%	19,770	8.27	34%	$p < .001$
Duration unknown	3,075	1.30	13%	8,786	3.68	15%	$p < .0$
Total Substantiated Maltreatment	23,145	9.82	100%	58,425	24.44	100%	

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

* Based on a sample of 1,055 substantiated investigations.

** Based on a sample of 3,193 substantiated investigations.

Child Welfare Interventions

Comparisons between rates of on-going service provision, out of home placement and child welfare court application in 1998 and 2003 in Ontario are presented in Table 9-6.

The decision to provide ongoing child welfare service was made in 10,324 substantiated child maltreatment investigations, a rate of 4.38 per 1,000 children in 1998. In 2003, ongoing child welfare services were provided to over twice as many children with 23,012 substantiated maltreatment investigations receiving ongoing services, a rate of 9.63 per 1,000 children. However, since the increase in the total number of substantiated cases was even greater, the proportion of substantiated cases being kept open for on-going services dropped from 45% in 1998 to 39% in 2003.

In contrast, the number of children who had been previously investigated kept pace with the overall increase in substantiated maltreatment. From 1998 to 2003 the incidence of substantiated maltreatment involving previously investigated children increased 144% from 5.73 per 1,000 to 14.00 per 1,000 children.

Figure 9-3

The incidence of investigations that result in a child welfare placement, has significantly increased between 1993 and 2003. However, the proportion of substantiated investigations that result in a child welfare placement has continued to decrease since 1993.

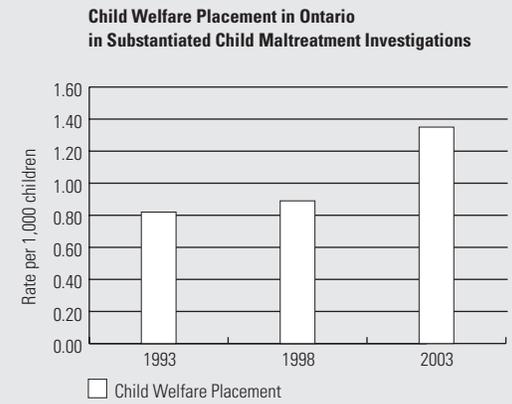


Table 9-6
Child Welfare Interventions in Substantiated Child Maltreatment Investigations in Ontario in 1998 and 2003

Child Welfare Interventions	1998*			2003**			Significance Level
	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated Investigations	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated Investigations	
Previously CAS Opening Case to Stay Open for Ongoing Services	13,515	5.73	58%	33,474	14.00	57%	$p < .001$
Child Welfare Placement	2,144	0.91	9%	3,453	1.44	6%	ns
Child Welfare Court Application	1,987	0.84	9%	3,357	1.40	6%	ns
Total Substantiated Investigations	23,145	9.82		58,425	24.44		

* Based on a sample of 1,055 substantiated investigations.
** Based on a sample of 3,193 substantiated investigations.

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

In 1998, 2,144 substantiated investigations (.91 per 1,000 children) resulted in a child welfare placement. In 2003, 3,453 substantiated investigations (1.44 per 1,000 children) included a child welfare placement. The rate of increase in placements was, however, less pronounced than the overall increase in substantiated cases and was statistically insignificant. As a result the proportion of maltreated children who experienced some type of placement during the investigation decreased from 9% in 1998 to 6% in 2003.

A similar development is apparent with the use of child welfare courts. The number of investigations involving child welfare court applications increased from 1,987 in 1998 to 3,357 in 2003, an increase that was not statistically significant. The proportion of substantiated cases being brought to court decreased from 9% to 6%.

More Reports From Professionals

Table 9-7 details the increase in the number of substantiated cases reported by professionals. Substantiated cases referred by professionals have increased 180% from 15,903 substantiated cases (6.75 per 1,000 children) in 1998 to 45,233 substantiated cases (18.92 per 1,000 children) in 2003. The proportion of substantiated cases referred by professionals increased from 69% to 77%. During the same time period there has been a significant increase in the rate of referrals from non-professionals and an increase in the rate of referrals

Figure 9-4

Since 1993 there has been a significant trend where professionals are increasingly making a larger proportion of referrals to the child welfare system.

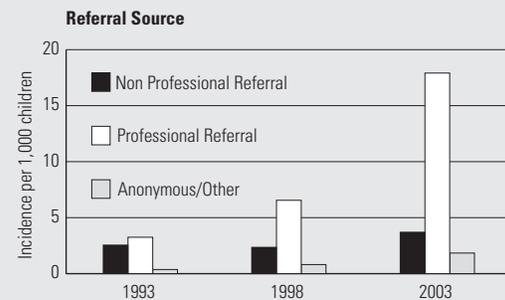


Table 9-7

Referral Sources in Substantiated Child Maltreatment Investigations in Ontario in 1998 and 2003

Referral Source	1998*			2003**			Significance Level
	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated Cases	Number of Child Investigations	Rate per 1,000 Children	% of Substantiated Cases	
Any Non-Professional Referral Source	5,835	2.48	25%	9,649	4.04	17%	$p < .001$
Any Professional Referral Source	15,903	6.75	69%	45,233	18.92	77%	$p < .001$
Any Anonymous/Other Source	2,092	0.89	9%	4,820	2.02	8%	$p < .001$
Total Substantiated Investigations	23,145	9.82		58,425	24.44		

* Based on a sample of 1,113 substantiated investigations.

** Based on a sample of 3,193 substantiated investigations.

Columns add up to more than 100% because referrals can be made from several different sources

Ontario Incidence Study of Reported Child Abuse and Neglect 2003

from anonymous or other sources. The overall increase in substantiated maltreatment however has been driven by professionals whose referrals account for 83% of the total increase in reports of maltreatment.

More Victimized Children or More Reports?

One of the first questions to consider in interpreting the 1998-2003 increase in cases of substantiated maltreatment is whether it indicates that more children are being abused and neglected or whether child welfare services have become more effective in detecting cases of maltreatment. Because the OIS is limited to reported cases of maltreatment it is impossible to rule out the possibility that the increase is driven by higher rates of victimization. The available evidence, however, indicates that the increase reflects more effective reporting and investigation practices, as manifested by more systematic identification of victimized siblings, increasing substantiation rates, greater awareness of emotional maltreatment and exposure to domestic violence and increasing reports from professionals. The lower proportion of cases involving emotional or physical harm as well as the lower proportion of children requiring placement or court involvement provide further indication that child welfare services are reaching a broader range of children at risk.

Future Directions

The OIS-2003 report provides a first glance at the dramatic changes in child welfare services that have taken place across Ontario since 1993. In a period of ten years the number of investigations of suspected child abuse and neglect have tripled. While service providers across the province are keenly aware of the increase in the demand for child welfare services, the OIS-2003 provides a unique opportunity to examine these changes at the provincial level and to analyze them in far more detail than possible Ontario's current administrative information systems.

The three OIS datasets will provide researchers with the opportunity to examine in more detail the factors underlying the changes in reported and substantiated maltreatment. Given the changes in the types of maltreatment being reported, it will be particularly important to examine the 1993-2003 changes within each category of maltreatment, as well as changes occurring at the level of specific sub-forms of maltreatment. It will also be important to conduct analyses specific to different age groups as well as to specific populations.

The preliminary analyses of the important changes that have occurred from 1993 and 2003 demonstrate the critical importance of public health datasets like the OIS. Findings from the Ontario portion of the OIS that included earlier 1993 province-wide study have already contributed to important policy changes in a number of jurisdictions across Ontario. The 2003 study provides an opportunity to compare three points in time of provincial child welfare data. Plans are being developed for another cycle of the CIS/OIS to be conducted in 2008.

Appendix A. OIS-2003 SITE RESEARCHERS

OIS-2003 Site Researchers provided training and data collection support at the 18 OIS sites. Their enthusiasm and dedication to the study were critical in ensuring its success.

The following is a list of Site Researchers who participated in the OIS-2003.

Marlyn Bennett

First Nations Child and Family
Caring Society

Tara Black

Faculty of Social Work
University of Toronto

Joanne Daciuk (Co-Manager)

Faculty of Social Work
University of Toronto

Richard de Marco

Public Health Agency of Canada

Katharine Dill

Ottawa Children's Aid Society

Barbara Fallon (Co-Manager)

Faculty of Social Work
University of Toronto

Caroline Felstiner

Faculty of Social Work
University of Toronto

Valerie Gaston

Public Health Agency of Canada

Heidi Kiang

Toronto Children's Aid Society

Theresa Knott

Faculty of Social Work
University of Toronto

Victor Montgomery

Faculty of Social Work
University of Toronto

Daniel Moore

Grey Children's Aid Society

Maria Mulloy

Faculty of Social Work
University of Toronto

Corbin Shangreux

First Nations Child and Family
Caring Society

Lil Tonmyr

Public Health Agency of Canada

Nico Trocmé (Principal Investigator)

Philip Fisher Chair in Social Work
Centre for Research on Children
and Families, McGill University

Data Entry

Data entry of the OIS-2003 Face Sheet was completed by Sharon George and Maria Mulloy in Toronto.

Data Analysis

Assistance in developing the sampling design, custom area files, weights, and confidence intervals was provided by Tahany Gadalla, Faculty of Social Work, University of Toronto.

Appendix B. GLOSSARY OF TERMS

The following is an explanatory list of terms used throughout the Scientific Report for the Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-2003).

Age group: The age range of children included in the OIS-2003 sample. Unless otherwise specified, all data are presented for children between newborn and 15 years of age. Table 6-2 presents data on adolescents between 16 and 19 years of age.

Annual Incidence: The number of child maltreatment investigations per 1000 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. These may be counted on a family basis or a child basis. Openings do not include referrals that have been screened-out.

Categories of Maltreatment: The five key classifications categories under which the 25 forms of maltreatment were subsumed: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence.

Child Maltreatment Investigations: Case openings that meet the OIS-2003 criteria for investigated maltreatment (see Figure 1-1, Major Findings Report)

Child Welfare: Refers to child protection services and other related services. The focus of the OIS-2003 is on services that address suspected child abuse and neglect.

Childhood Prevalence: The proportion of people maltreated at any point during their childhood.

CIS-2003: *Canadian Incidence Study of Reported Child Abuse and Neglect 2003.*

CIS-Cycle II: *Canadian Incidence Study of Reported Child Abuse and Neglect 2003.*

CWSA: A child welfare service area, which is a geographic area served by a distinct child welfare office. In some cases several agencies serve the same geographic area on the basis of children's religious or Aboriginal status. In such instances, all child welfare agencies sharing the same geographic boundaries are counted as a single child welfare service area.

Definitional Framework: The OIS-2003 provides an estimate of the number of cases (child-based, age under 16) of alleged child maltreatment (physical abuse, sexual abuse, neglect, and emotional maltreatment) reported to and investigated by Ontario child welfare agencies in 2003 (screened-out reports not included). The estimates are broken down by three levels of substantiation (substantiated, suspected, unsubstantiated). Cases opened more than once during the year are counted as separate investigations.

Forms of Maltreatment: Specific types of maltreatment (e.g., hit with an object, sexual exploitation, or exposure to domestic violence) that are classified under the five OIS-2003 Categories of Maltreatment. The OIS-2003 captured 25 forms of maltreatment.

Level of Identification and Substantiation: There are four key levels in the case identification process: detection, reporting, investigation, and substantiation (see Figure 1-1, Scientific Report). *Detection* is the first stage in the case identification process. Little is known about the relationship between detected and undetected cases. *Reporting* suspected child maltreatment is required by law in Ontario. The OIS-2003 does not document unreported cases. *Investigated* cases are subject to various screening practices, which vary across sites. The OIS-2003 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-2003 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.

NIS: U.S. *National Incidence Study of Report Child Abuse and Neglect.*

Non-maltreatment cases: Cases open for child welfare services for reasons other than suspected maltreatment (e.g., prevention services, parent-child conflict, services for young pregnant women, etc.).

OIS-2003: *Ontario Incidence Study of reported Child Abuse and Neglect 2003.*

Reporting year: The year in which child maltreatment cases were opened. The reporting year for the OIS is 2003.

Screened-out: Referrals that are not opened for an investigation.

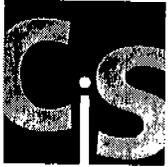
Two-parent Blended Family: A family in which one of the caregivers was identified as a step-parent, a common-law partner, or an adoptive parent who was not the biological parent of at least one of the children in the family.

Unit of Analysis: The denominator used in calculating maltreatment rates. In the case of the OIS-2003 the unit of analysis is the child investigation.

Appendix C. MALTREATMENT ASSESSMENT FORM

The Maltreatment Assessment Form consists of three pages:

- Intake Face Sheet;
- Household Information Sheet; and
- Child Sheet.



Canadian Incidence Study of Reported Child Abuse and Neglect – Cycle II

Étude canadienne sur l'incidence des cas signalés de violence et de négligence à l'égard des enfants – Cycle II

Funded by Health Canada and supported by the Provincial and Territorial Governments of Canada with additional funding from Bell Canada

CIS Maltreatment Assessment

INTAKE FACE SHEET (Please complete this face sheet for all cases)

CIS OFFICE USE ONLY									
		-			-				

1. Date referral was received:

2. Date case opened:

3. Date CIS Maltreatment Assessment form was filled out:

4. Source of allegation/referral (Fill in all that apply)

- | | | | | |
|---|--|---|---|--|
| <input type="radio"/> Custodial parent | <input type="radio"/> Neighbour/Friend | <input type="radio"/> Public health nurse | <input type="radio"/> Mental health professional | <input type="radio"/> Police |
| <input type="radio"/> Non-custodial parent | <input type="radio"/> Social assistance worker | <input type="radio"/> Physician | <input type="radio"/> Other child welfare service | <input type="radio"/> Community agency |
| <input type="radio"/> Child (subject of referral) | <input type="radio"/> Crisis service/Shelter | <input type="radio"/> School | <input type="radio"/> Day care centre | <input type="radio"/> Anonymous |
| <input type="radio"/> Relative | <input type="radio"/> Hospital | <input type="radio"/> Community/Recreation centre | <input type="radio"/> Other: _____ | |

5. Please describe referral and investigated maltreatment

CIS OFFICE USE ONLY	

This shaded area to be filled only by the Investigating worker

CIS OFFICE USE ONLY	6. a) List first names of <i>all</i> children in the home (19 years and under)	b) Age	c) Gender of child		d) Children	
			Male	Female	Referred	Investigated
<input type="checkbox"/>		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="checkbox"/>		<input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

7. Was child maltreatment alleged by the referral or suspected during the assessment period? Yes No

IF YES 8. Was an assessment/investigation initiated?

- Yes → Complete the remainder of the CIS Maltreatment Assessment
- No → Why? _____

CIS OFFICE USE ONLY	

Assessment worker's name: _____

First two letters of Family surname:

(Other Family surname, if applicable):

Case number:

CIS OFFICE USE ONLY									
		-			-				

Postal code

or address

This information will remain totally confidential, and no identifying information will be used outside of your own agency. This tear-off portion of the instrument will be destroyed at this location following the coded entry of this data by one of our researchers.

Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto 246 Bloor St. W., Toronto ON M5S 1A1 • tel: 416-978-2527 • fax: 416-978-7072

PROCEDURES

- 1. The **Intake Face Sheet** should be completed on every case that you assess/investigate, even if there is no suspected maltreatment.
- 2. The entire **CIS Maltreatment Assessment** form (*Intake Face Sheet, Household Information Sheet and the Child Information Sheet(s)*) should be completed for cases where maltreatment was alleged or suspected at any point during the assessment/investigation.

Note: Currently open/active cases with new allegations of child maltreatment are not included in the CIS.

COMPLETION INSTRUCTIONS

To ensure accuracy and minimize response time, the **CIS Maltreatment Assessment** should be completed when you complete the standard written assessment/investigation report for the child maltreatment investigation.

Unless otherwise specified, all information *must* be completed by the investigating worker.

Complete *all* items to the best of your knowledge. To increase accuracy of data scanning please avoid making marks beyond the fill in circles.

Thank you for your time and interest.

COMMENTS

Comments: Intake information

Comments: Household information

Comments: Child information

This information will remain totally confidential, and no identifying information will be used outside of your own agency.
This tear-off portion of the instrument will be destroyed at this location following the coded entry of this data by one of our researchers.

CIS Maltreatment Assessment: Household Information

CIS OFFICE USE ONLY

		-			-		
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<p>1. Caregiver A in the home</p> <p><input type="radio"/> Biological parent <input type="radio"/> Common-law partner <input type="radio"/> Foster parent</p> <p><input type="radio"/> Adoptive parent <input type="radio"/> Step-parent <input type="radio"/> Grandparent</p> <p><input type="radio"/> Other:</p>	<p>1. Caregiver B <input type="radio"/> No other caregiver</p> <p><input type="radio"/> Caregiver in home <input type="radio"/> Caregiver not in home</p> <p><input type="radio"/> Biological parent <input type="radio"/> Common-law partner <input type="radio"/> Foster parent</p> <p><input type="radio"/> Adoptive parent <input type="radio"/> Step-parent <input type="radio"/> Grandparent</p> <p><input type="radio"/> Other:</p>																																																																																																																								
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<p>9. Caregiver risk factors <small>(Fill in each item)</small></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th>Confirmed</th> <th>Suspected</th> <th>No</th> <th>Unknown</th> </tr> </thead> <tbody> <tr><td>Alcohol abuse</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Drug/solvent abuse</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Criminal activity</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Cognitive impairment</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Mental health issues</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Physical health issues</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Few social supports</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Maltreated as a child</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Victim of domestic violence</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Perpetrator of domestic violence</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> <tr><td>Other:</td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td><td><input type="radio"/></td></tr> </tbody> </table>		Confirmed	Suspected	No	Unknown	Alcohol abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Drug/solvent abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Criminal activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Cognitive impairment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Mental health issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Physical health issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Few social supports	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Maltreated as a child	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Victim of domestic violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Perpetrator of domestic violence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<p>9. 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<p>10. Other adults in the home <small>(Fill in all that apply)</small></p> <p><input type="radio"/> None <input type="radio"/> Grandparent</p> <p><input type="radio"/> Children >19 <input type="radio"/> Other:</p>	<p>15. Unsafe housing conditions</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p>	<p>19. Case will stay open for on-going child welfare services</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>																																																																																																																							
<p>11. Caregiver(s) outside the home <small>(Fill in all that apply)</small></p> <p><input type="radio"/> None <input type="radio"/> Father <input type="radio"/> Mother</p> <p><input type="radio"/> Grandparent <input type="radio"/> Other:</p>	<p>16. Home overcrowded</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p>	<p>20. Referral(s) for any family member <small>(Fill in all that apply)</small></p> <p><input type="radio"/> No referral made</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="radio"/> Parent support group</td> <td><input type="radio"/> Psychiatric/psychological services</td> </tr> <tr> <td><input type="radio"/> In-home parenting support</td> <td><input type="radio"/> Special education placement</td> </tr> <tr> <td><input type="radio"/> Other family/parent counselling</td> <td><input type="radio"/> Recreational services</td> </tr> <tr> <td><input type="radio"/> Drug/alcohol counselling</td> <td><input type="radio"/> Victim support program</td> </tr> <tr> <td><input type="radio"/> Welfare/social assistance</td> <td><input type="radio"/> Medical/dental services</td> </tr> <tr> <td><input type="radio"/> Food bank</td> <td><input type="radio"/> Child/day care</td> </tr> <tr> <td><input type="radio"/> Shelter services</td> <td><input type="radio"/> Cultural services</td> </tr> <tr> <td><input type="radio"/> Domestic violence services</td> <td><input type="radio"/> Other:</td> </tr> </table>	<input type="radio"/> Parent support group	<input type="radio"/> Psychiatric/psychological services	<input type="radio"/> In-home parenting support	<input type="radio"/> Special education placement	<input type="radio"/> Other family/parent counselling	<input type="radio"/> Recreational services	<input type="radio"/> Drug/alcohol counselling	<input type="radio"/> Victim support program	<input type="radio"/> Welfare/social assistance	<input type="radio"/> Medical/dental services	<input type="radio"/> Food bank	<input type="radio"/> Child/day care	<input type="radio"/> Shelter services	<input type="radio"/> Cultural services	<input type="radio"/> Domestic violence services	<input type="radio"/> Other:																																																																																																							
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<p>12. Child custody dispute at this time</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p>	<p>17. Approximate number of moves in past 12 months</p> <p><input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 or more</p> <p><input type="radio"/> Unknown</p>																																																																																																																								
<p>13. Household income estimated</p> <p><input type="radio"/> <\$15,000 <input type="radio"/> \$15-24,999 <input type="radio"/> \$25-40,000</p> <p><input type="radio"/> >\$40,000 <input type="radio"/> Unknown</p>	<p>18 a) Case previously opened</p> <p><input type="radio"/> Never <input type="radio"/> 1 time <input type="radio"/> 2-3 times</p> <p><input type="radio"/> >3 times <input type="radio"/> Unknown</p> <p>b) If yes, how long since previous opening</p> <p><input type="radio"/> <3 mo <input type="radio"/> 3-6 mo <input type="radio"/> 7-12 mo</p> <p><input type="radio"/> 13-24 mo <input type="radio"/> >24 mo</p>																																																																																																																								
<p>14. Housing</p> <p><input type="radio"/> Own home <input type="radio"/> Rental</p> <p><input type="radio"/> Public housing <input type="radio"/> Shelter/Hotel</p> <p><input type="radio"/> Unknown <input type="radio"/> Other:</p>																																																																																																																									



CIS Maltreatment Assessment: Child Information

CIS OFFICE USE ONLY

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First name: _____		21. Sex <input type="radio"/> Male <input type="radio"/> Female	
22. Age			
<input type="radio"/> <1 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 17 <input type="radio"/> 18 <input type="radio"/> 19			
23. Aboriginal status <input type="radio"/> Not Aboriginal <input type="radio"/> First Nation status <input type="radio"/> First Nation non-status <input type="radio"/> Métis <input type="radio"/> Inuit <input type="radio"/> Other:			
24. Child functioning <i>(Are you aware if any of the following apply to this child at this point in time?)</i>			
<i>(Fill in each item)</i>		Confirmed	Suspected
		No	Unknown
Depression/anxiety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ADD/ADHD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Negative peer involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Alcohol abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Drug/solvent abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-harming behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Violence toward others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Running (One incident)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Running (Multiple incidents)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inappropriate sexual behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other behav./ emotional problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learning disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Special education services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Irregular school attendance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Developmental delay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Physical disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Substance abuse related birth defects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Positive toxicology at birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other health conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Psychiatric disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Youth Criminal Justice Act involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
25. Maltreatment Codes			
Physical abuse 1 - Shake, push, grab or throw 2 - Hit with hand 3 - Punch, kick or bite 4 - Hit with object 5 - Other physical abuse	Sexual abuse 6 - Penetration 7 - Attempted penetration 8 - Oral sex 9 - Fondling 10 - Sex talk 11 - Voyeurism 12 - Exhibitionism 13 - Exploitation	Neglect 14 - Failure to supervise: physical harm 15 - Failure to supervise: sexual abuse 16 - Permitting criminal behaviour 17 - Physical neglect 18 - Medical neglect 19 - Failure to provide psych. treatment 20 - Abandonment 21 - Educational neglect	Emotional maltreatment 22 - Emotional abuse 23 - Non-organic failure to thrive 24 - Emotional neglect 25 - Exposed to domestic violence
Insert Maltreatment Codes in the boxes below <i>(Enter primary form of maltreatment first)</i> <input type="text"/> <input type="text"/> <input type="text"/>		CIS OFFICE USE ONLY <input type="text"/> <input type="text"/>	
1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/>	26. Alleged perpetrator <i>(Fill in all that apply)</i> Caregiver A: _____ Caregiver B: _____ Other: _____		
27. Substantiation <i>(Fill in only one per column)</i> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/>		27a. If unfounded, was the report a malicious referral? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	
28. Was maltreatment a form of punishment? 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/>		31. Physical harm a) Medical treatment required <input type="radio"/> Yes <input type="radio"/> No / N/A no harm b) Health or safety seriously endangered by suspected or substantiated maltreatment <input type="radio"/> Yes <input type="radio"/> No / N/A no harm c) History of undetected or misdiagnosed injuries <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	
29. Duration of maltreatment <i>(Fill in only one per column)</i> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/>		32. Mental or emotional harm a) No current signs, but mental or emotional harm is probable <input type="radio"/> Yes <input type="radio"/> No b) Child shows signs of mental or emotional harm <input type="radio"/> Yes <input type="radio"/> No c) Child requires therapeutic treatment <input type="radio"/> Yes <input type="radio"/> No	
30. Physical harm <i>(Fill in all that apply)</i> 1st <input type="radio"/> 2nd <input type="radio"/> 3rd <input type="radio"/>		33. Physician/nurse conducted a physical examination of the child as part of the investigation <input type="radio"/> Yes <input type="radio"/> No	
<input type="radio"/> No Harm <input type="radio"/> Bruises/Cuts/Scrapes <input type="radio"/> Burns and scalds <input type="radio"/> Broken bones <input type="radio"/> Head trauma <input type="radio"/> Fatal <input type="radio"/> Other health condition:		34. Placement during investigation <input type="radio"/> No placement required <input type="radio"/> Placement considered <input type="radio"/> Informal kinship care <input type="radio"/> Kinship foster care <input type="radio"/> Other family foster care <input type="radio"/> Group home <input type="radio"/> Residential/secure treatment	
35. Child welfare court <input type="radio"/> No court considered <input type="radio"/> Application considered <input type="radio"/> Application made		35. Child welfare court <input type="radio"/> No court considered <input type="radio"/> Application considered <input type="radio"/> Application made	
36. Previous reports a) Child previously reported to child welfare for suspected maltreatment <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown b) If yes, was the maltreatment substantiated? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown		a) Referral to mediation/alternative response <input type="radio"/> Yes <input type="radio"/> No	
37. Police involvement in child maltreatment investigation <input type="radio"/> None <input type="radio"/> Charges being considered <input type="radio"/> Investigation only <input type="radio"/> Charges laid		36. Previous reports a) Child previously reported to child welfare for suspected maltreatment <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown b) If yes, was the maltreatment substantiated? <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	
38. Police involvement in adult domestic violence investigation <input type="radio"/> None <input type="radio"/> Charges laid <input type="radio"/> Investigation only <input type="radio"/> Unknown <input type="radio"/> Charges being considered <input type="radio"/> N/A		37. Police involvement in child maltreatment investigation <input type="radio"/> None <input type="radio"/> Charges being considered <input type="radio"/> Investigation only <input type="radio"/> Charges laid	
39. Caregivers use spanking as a form of discipline <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown		38. Police involvement in adult domestic violence investigation <input type="radio"/> None <input type="radio"/> Charges laid <input type="radio"/> Investigation only <input type="radio"/> Unknown <input type="radio"/> Charges being considered <input type="radio"/> N/A	
39. Caregivers use spanking as a form of discipline <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown		39. Caregivers use spanking as a form of discipline <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	



Appendix D. CIS CYCLE II GUIDE BOOK

The following is the CIS-Cycle II Guide Book used by child welfare workers to assist them in completing the Maltreatment Assessment Form in Ontario.

THE CANADIAN INCIDENCE STUDY OF REPORTED CHILD ABUSE AND NEGLECT

CYCLE II GUIDEBOOK

BACKGROUND

The Canadian Incidence Study of Reported Child Abuse and Neglect-- *CIS-Cycle II* – is the second national study of child abuse and neglect investigations in Canada. Results from *CIS-Cycle I* (conducted in 1998) and its precursor the 1993 Ontario Incidence Study have been widely disseminated in conferences, reports, books and journal articles (see Centre of Excellence <http://www.cecw-cepb.ca/Pubs/PubsCIS.html> and Health Canada websites http://www.hc-sc.gc.ca/pphb-dgsp/cm-vee/cis_e.html) and have had an impact on the development of child welfare services and policies across Canada.

CIS Cycle II is funded by Health Canada. Additional funding has been provided by Bell Canada, the First Nations Child and Family Caring Society, and the Provinces of Alberta, Ontario, Québec and Prince Edward Island with significant in-kind support provided by every participating jurisdiction. The project is managed by a team of researchers at the Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto, the University of Calgary's Faculty of Social Work, and Laval University in Québec.

OBJECTIVES

The primary objective of the CIS-Cycle II is to provide reliable estimates of the scope and characteristics of reported child abuse and neglect in Canada. Specifically, the study is designed to accomplish the following objectives:

- q produce national estimates of the incidence of investigated abuse and neglect in Canada in 2003;
- q examine changes between 1998 to 2003 investigations of abuse and neglect;
- q enhance our understanding of the types and severity of reported child maltreatment;
- q collect information to help develop programs and policies for at risk children and youths, and to assist in the targeting of resources for children at risk of abuse;
- q explore the role of selected determinants of health (e.g. physical and social environments, social support, income, social status, healthy child development, and personal coping practices) on the incidence and characteristics of child abuse and neglect.

SAMPLE

Fifty-seven Child Welfare Service Areas (CWSA) across Canada were randomly¹ selected from the total number of child welfare offices and agencies. A minimum of one CWSA was chosen from each province and territory. Provinces were allocated additional CWSAs based on the provincial proportion of the Canadian child population and on oversampling funds provided in Alberta, Québec, Ontario and Prince Edward Island.

Information will be collected on all child maltreatment investigations opened during the three-month period between October 1st and December 31st, 2003.

CIS MALTREATMENT ASSESSMENT

The *CIS Maltreatment Assessment* form was designed to collect information from child welfare investigators on the results of their investigations. It consists of three yellow legal sized pages with the “Canadian Incidence Study of Reported Child Abuse and Neglect: CIS Maltreatment Assessment: Cycle II” clearly marked on the front sheet.

The *CIS Maltreatment Assessment* is made up of: an *Intake Face Sheet*, a *Comment Sheet* (which is on the back of the Intake Face Sheet), a *Household Information* sheet and a *Child Information* sheet (please refer to *Frequently Asked Question # 2*). The form is designed to be completed in ten minutes.

The *CIS Maltreatment Assessment* examines a range of family, child, and case status variables. This includes household demographics, caregiver profile, source of referral, health determinants, 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, child welfare and criminal court involvement.

TRAINING

Training sessions will be held during September and early October 2003 for all workers involved in the study. Your Site Researcher will visit your agency/office prior to the data collection period and will continue to make regular visits during the data collection process. These on-site visits will allow the Site Researcher to collect forms, enter data, answer questions, and resolve any instrumental problems that may arise. If you have any questions about the study, please contact your Site Researcher (see contact information on the inside of the front cover of the *CIS Guide Book*).

CONFIDENTIALITY

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

To guarantee client confidentiality, all near identifying information (located at the bottom of the *Intake Face Sheet*) will be coded at your agency/office. Near identifying information is data, which could potentially identify a family (e.g. agency/office case file number; the first two letters of the family name; and the first names of the children in the family). This information is required to for purposes of data verification only. This tear-off portion of the *Intake Face Sheet* will be stored in a locked area at your agency/office until the study is completed, and then it will be destroyed.

The completed *CIS Maltreatment Assessments* (with all identifying information removed) will be

¹ Because of differences in data collection methods, the eight CWSAs in Québec were not randomly selected.

sent to the University of Toronto site for data entry and will then be kept under double lock (a locked RCMP approved filing cabinet in a locked office at the University of Toronto). Access to the forms, for any additional verification purposes, will be restricted to select research team members authorized by Health Canada.

Published analyses will be conducted at the national level only and at the provincial level in Alberta, Ontario, Québec and Prince Edward Island. If requested by a site, specific data will be made available for an internal summary report; however, this information will not be externally shared. Worker or team specific data will not be made available to anyone, under any circumstances.

COMPLETING THE CIS MALTREATMENT ASSESSMENT

The *CIS Maltreatment Assessment* should be completed by the investigating worker when she/he is writing the standard investigation report. In most jurisdictions this report is required within 4 to 12 weeks of the date the case was opened.

It is essential that all items on the *CIS Maltreatment Assessment* be completed. Use the "Unknown" response if you are unsure. Please be sure that all items are completed. If the categories provided do not adequately describe a case, indicate the specific nature of the case in the available space, or use the additional information section on the *Comment Sheet*. If you have any questions during the study you are encouraged to contact your Site Researcher. The number is listed on the inside cover of **CIS-Cycle II Guide Book**.

FREQUENTLY ASKED QUESTIONS

#1 What cases should I complete a CIS Maltreatment Assessment on?

You should complete a *CIS Maltreatment Assessment* for all cases opened during the case selection period (October 1st to December 31st 2003). Generally, if your agency/office counts the case in its official opening statistics reported to a Ministry or government office, then the case is included in the sample and a *CIS Maltreatment Assessment* should be completed, unless your Site Researcher indicates otherwise.

#2 Should I complete a form on only those cases where abuse is suspected?

You should complete an *Intake Face Sheet* and the tear-off portion of the instrument for all cases opened during the data selection period at your agency office (e.g. pre-natal counseling, child/youth behaviour problems, request for services from another office or agency, and where applicable, screened out cases).

If maltreatment was suspected at any point during the investigation, and the case was opened for assessment investigation (not screened out) then you should complete the remainder of the *CIS Maltreatment Assessment* (both *Household Information* and *Child Information* sheets). Maltreatment may be alleged by the person(s) making the report, or by any other person(s), including yourself, during the investigation. For example, complete a *CIS Maltreatment Assessment* if a case was initially referred for parent/adolescent conflict, but later had suspicions regarding abuse and maltreatment during the investigation.

#3 Should I complete a CIS Maltreatment Assessment on screened out cases?

The procedures for screening cases vary considerably across Canada. While the CIS will not try to capture informally screened out cases, we will gather face sheet information on screened out cases that are formally counted as case openings by your agency/office. If in doubt, please contact your Site Researcher.

#4 When should I complete the CIS Maltreatment Assessment?

You should complete the *CIS Maltreatment Assessment* at the same time that you prepare the assessment/investigation report for your agency or office (usually within the first two months of a case being opened). For some child maltreatment investigations, you may find that this does not allow enough time to document the outcome of the full assessment, however, please complete the form to the best of your abilities.

#5 Who should complete the CIS Maltreatment Assessment if more than one person works on the investigation?

The *CIS Maltreatment Assessment* should be completed by the worker who conducts the intake assessment and prepares the assessment or investigation report. The worker with primary responsibility for the case should complete the *CIS Maltreatment Assessment*, if several workers investigate a case.

#6 What should I do if more than one child is investigated?

The *CIS Maltreatment Assessment* primarily focuses on the household, however, the *Child Information* sheet is specific to the individual child being investigated. Complete one child sheet for each investigated child. In jurisdictions where all children are automatically investigated, only include those children for whom maltreatment was actually suspected. Additional pads of *Child Information* sheets are available in your training package.

#7 Will I receive training for the CIS Maltreatment Assessment?

All workers who complete investigations in your agency/office will receive training prior to the start of the data collection period. If a worker is unable to attend the training session or is hired after the start of the Canadian Incidence Study, he/she should contact the Site Researcher regarding any specific questions about the form. Your Site Researcher's name and contact number is on the inside cover of the *CIS Guide Book*.

#8 What should I do with the completed forms?

Give the completed *CIS Maltreatment Investigation Form* to your local Agency/Office Contact Person. All forms will be reviewed by the Site Researcher during a site visit, and should he/she have additional questions they will contact you during this visit. Your Agency/Office Contact Person is listed on the *CIS Guide Book* cover.

#9 Is this information confidential?

The information you provide is confidential, and no identifying information will leave your agency/office. Your Site Researcher will code and enter any near identifying information from the bottom portion of the tear-off portion of the **Intake Sheet** of the *CIS Maltreatment Assessment*, and then destroy that portion of the sheet when the CIS concludes. Please refer to the section the previous section on Confidentiality.

DEFINITIONS: INTAKE FACE SHEET

Sections that are shaded require the clinical judgment of the investigating worker. Other information (18a, 18b, 19, 36a) may be completed by an agency/office clerical staff or Site Researcher.

QUESTION 1: DATE THAT REFERRAL WAS RECEIVED

This date refers to the day that the referral source made initial contact with your agency or office.

QUESTION 2: DATE THE CASE WAS OPENED IF NOT AT TIME OF REFERRAL

The date the case was opened.

QUESTION 3. DATE CIS MALTREATMENT ASSESSMENT WAS COMPLETED

Please complete the date that the **CIS Child Maltreatment Assessment Form** was completed.

QUESTION 4: SOURCE OF ALLEGATION/REFERRAL

Please fill in all sources of referral that are applicable for each case. This refers to separate and independent contacts with the Child Welfare agency or office. When a young person tells a school principal of abuse and the school principal reports this to Child Welfare you would fill in the circle for this referral as “School”. There was only one contact and referral in this case. If a second source (neighbour) contacted Child Welfare and also reported a form of maltreatment, then you would also fill in the circle for “Neighbour/friend”. Please use this section to fill in all sources of referral.

- q **Custodial parent:** Includes parent identified in Section (1) of “Caregiver A or B”.
- q **Non-custodial parent:** Contact from an estranged spouse (e.g. individual reporting the parenting practices of her/his spouse).
- q **Child:** A self-referral by any child listed on the *Intake Face Sheet* of the **CIS Maltreatment Assessment**.
- q **Relative:** Any relative of the child in question. If child lives with foster parents, and relative of the foster parents report maltreatment, please specify under “Other”.
- q **Neighbour/friend:** Includes any neighbour or friend of the children or his/her family.
- q **Social assistance worker:** Refers to a Social Assistance Worker involved with the household.
- q **Crisis service/shelter:** Includes any shelter or crisis service for domestic violence or homelessness.
- q **Hospital:** Referral originates from a hospital and is made by either a doctor, nurse or social worker rather than a family physician, or nurse.
- q **Public health nurse:** Includes nurses involved in services such as family support, family visitation programs and community medical outreach.
- q **Physician:** A report from any family physician with a single or ongoing contact with the child and/or family.
- q **School:** Any school personnel, (teacher, principal, teacher’s aide, etc.).
- q **Community/Recreation centre:** Refers to any form of recreation and community activity programs (e.g. organized sports leagues or Boys and Girls Clubs).

- q **Mental health professional/agency:** Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside of a school/hospital/Child Welfare/YJA setting.
- q **Other child welfare services:** Includes referrals from mandated Child Welfare service providers from other jurisdictions or provinces.
- q **Day care centre:** Refers to a child care or day care provider.
- q **Police:** Any member of Police Force, municipal, provincial/territorial or RCMP.
- q **Community agency:** Any other community agency or service.
- q **Anonymous:** A caller who is not identified.
- q **Other:** Please specify the source of referral in the section provided (e.g. foster parent, store clerk, etc.)

QUESTION 5: DESCRIBE REFERRAL AND INVESTIGATED MALTREATMENT

Provide a short description of the referral, including, as appropriate:

- ÿ the investigated maltreatment and major investigation results (e.g. type of maltreatment, substantiation, injuries);
- ÿ other reasons for referral, if not maltreatment (e.g. adoption home assessment, request for information);

QUESTION 6: LIST ALL CHILDREN IN THE HOME

Please include biological, step, adoptive and foster children.

A) List the first of the names of the children: List the first name of all children who are currently living in the home.

B) Age of all children in the home: Indicated the age of all the children in the home. Use 0 for children less than 1.

C) Sex of all children in the home: Indicate the sex of all the children in the home.

D) Subject of referral or investigation: Indicate which children were investigated because of suspected child maltreatment (abuse or neglect). In jurisdictions that require that all children be routinely interviewed for an investigation, only include those cases where in your clinical opinion maltreatment was suspected at some point (e.g. include three siblings ages 5 to 12 in a situation of suspected chronic neglect, but do not include the 3 year old brother of a 12 year old girl who was sexually abused by someone who does not live with the family and has not had access to the younger sibling).

QUESTION 7: WAS CHILD MALTREATMENT ALLEGED BY THE REFERRAL OR SUSPECTED AT ANY OTHER POINT?

Indicate if child maltreatment was suspected at any point prior to the referral. If you or a co-investigating worker suspected child maltreatment at any point during the referral or the investigation, or child maltreatment was alleged by the referral please fill in "Yes".

QUESTION 8: WAS AN ASSESSMENT/INVESTIGATION COMPLETED

If yes, and the case was opened for assessment and investigation, complete the remainder of the CIS Maltreatment Assessment (Household and Child information sheets).

If no, please specify why (e.g. youth older than investigation mandate, no maltreatment alleged, insufficient information).

TEAR-OFF PORTION OF COMMENT SHEET

The potentially identifying information on the tear-off section will be kept securely at your agency/office, for purposes of verification. It will be destroyed at the conclusion of the study².

ASSESSMENT WORKER'S NAME

This refers to the person completing the form. When more than one individual is involved in the investigation, the individual with overall case responsibility should complete the *CIS Maltreatment Assessment*.

FIRST TWO LETTERS OF FAMILY SURNAME

Use the reference name used for your agency/office filing system. In most cases this will be the primary caregiver's last name. If another name is used in the agency/office, please include it under "Alternate Surname". For example, if a parent's surname is "Thompson", and the two children have the surname of "Smith", then put "TH" and "SM". Use the first two letters of the family name only. Never fill in the complete name.

CASE NUMBER

This refers to the case number used by your agency/office.

POSTAL CODE OR ADDRESS

Although the postal code may be difficult to find, this is useful information that may allow us to examine critical community level characteristics. If it is not available, please provide the current address for the family. This information will not leave your office/agency.

DEFINITIONS: COMMENT SHEET

COMMENT SECTIONS

Should the *CIS Maltreatment Assessment* fail to capture any information about the child maltreatment investigation, please provide your additional comments under the three comment sections: **Intake Information**, **Household Information**, and **Child Information**.

² If a new protocol for keeping potentially identifying information is approved by your agency/office, some of this information may be used for follow-up research. At no time will any near-identifying information be available for other purposes.

DEFINITIONS: HOUSEHOLD INFORMATION SHEET

IDENTITY OF CAREGIVER (A) AND CAREGIVER (B)

The *Household Information* sheet will focus on the immediate household of the child(ren) who have been referred to child welfare. This household is made up of all adults and children living at the address of the investigation. Provide information for Caregiver (A) and Caregiver (B) for questions 1-12 if there are two adults/caregivers living in the household. Complete information on Caregiver (A) if there is only one caregiver in the household.

If you have a unique circumstance that does not seem to fit the categories provided, please write a note in the comment sections on the *Comment Sheet*.

QUESTION 1: CAREGIVER A/B IN THE HOME

Choose one category only. Identify the relationship between the caregiver and the children in the home. If a caregiver is both a biological and step-parent for different children in the household, please check “Step-parent” only.

In the event that there is only one caregiver residing in the household, and there is another significant caregiver residing outside of the home, then check “Other Adult (not in household)” and complete Caregiver (B) information on that individual.

QUESTION 2: SEX

Identify if caregiver is male or female.

QUESTION 3: AGE

Indicate the caregiver’s age range. If you are not certain of an individual’s age range, please provide your best estimate.

QUESTION 4: PRIMARY INCOME SOURCE

We are interested in estimating the primary source of the caregiver’s income. Please choose the category that best describes the caregiver’s source of income. Note that this is a caregiver specific question and does not include income from the second caregiver,

- q **Full time:** Individual is employed in a permanent, full-time position.
- q **Part time (Less than 30 hours/week):** Refers to a single part time position.
- q **Multiple jobs:** Caregiver has more than one part-time or temporary position.
- q **Seasonal:** This indicates that the caregiver works at either full or part time positions for temporary periods of the year.
- q **Employment insurance:** Caregiver is temporarily unemployed and receiving Employment Insurance Benefits.
- q **Social assistance:** Caregiver receives social assistance benefits at this point in time.
- q **Other benefit:** Refers to other forms of benefits or pensions (e.g., family benefits, long term disability insurance, child support payments).
- q **Unknown:** Check if you do not know the caregiver’s source of income.
- q **None :** if drugs, prostitution, or other illegal activity please specify in comments section.

QUESTION 5: EDUCATIONAL LEVEL

Select the category that best describes the caregiver's education level. Use provincial or territorial definitions for elementary and secondary levels.

- q **Elementary or less:** Caregiver attended some or all of elementary school.
- q **Some secondary:** Please check this category if caregiver attended high school, but did not complete.
- q **Completed secondary:** Please check this category if caregiver completed high school.
- q **College/University:** Caregiver attended College or University or other post secondary technical school, and has partially or totally completed a degree or diploma.
- q **Unknown:** Check if you do not know the educational level of the caregiver.

QUESTION 6: 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 not be published out of context. This section uses a checklist of ethno-racial categories used by Statistics Canada in the 1996 Census (Long Questionnaire).

Please check the ethno-racial category that best describes the caregiver and identify the primary language spoken at home by that individual. Select "Other" if you wish to identify two ethno-racial groups, and specify.

A) If Aboriginal: Is the caregiver residing "on" or "off" reserve.

B) Aboriginal caregiver status: If First Nations please indicate if the caregiver has formal Indian or treaty status (i.e. registered with the Department of Indian and Northern Affairs).

QUESTION 7: PRIMARY LANGUAGE

Please identify the primary language of the caregiver: English, French or Other and specify.

QUESTION 8: CONTACT WITH CAREGIVER IN RESPONSE TO INVESTIGATION

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

QUESTION 9: CAREGIVER RISK FACTORS

These questions pertain to Caregiver A and/or Caregiver B, and are to be rated as "Confirmed", "Suspected", "No" or "Unknown". Please fill in "Confirmed" if problem has been diagnosed, observed by you or another worker, or disclosed by the caregiver. Use the "Suspected" category if your suspicions are sufficient to include in a written assessment of the household or a transfer summary to a colleague. Fill in "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 functioning issues. Where applicable, use the past six months as a reference point.

- q **Alcohol abuse:** Use of alcohol poses a problem for household.
- q **Drug/solvent abuse:** Abuse of prescription drugs, illegal drugs, or solvents.
- q **Criminal activity:** Absent due to incarceration, involved in criminal activity (e.g. drug dealing, theft, prostitution, etc.).

- q **Cognitive impairment:** Cognitive ability of caregiver(s) has an impact on the quality of care giving provided in the household.
- q **Mental health issues:** Any mental health diagnosis or problem.
- q **Physical health issues:** Chronic illness, frequent hospitalizations, or physical disability.
- q **Few social supports:** Social isolation or lack of social supports.
- q **Maltreated as a child:** Indicate whether the caregiver suffered maltreatment as a child.
- q **Victim of domestic violence:** During the past six months the caregiver was a victim of domestic violence, include physical, sexual and verbal assault.
- q **Perpetrator of domestic violence:** During the past six months the caregiver was perpetrator of domestic violence.
- q **Other:** Identify other issues/concerns that describe caregiver functioning.

QUESTION 10: OTHER ADULTS IN THE HOME

Please fill in all categories that describe adults (excluding Caregiver A or B) who lived in the house at the time of the referral to child welfare. Note that children in the home have already been described on the **Intake Face Sheet**. If recent changes in household, describe the situation at the time of the referral. Please fill in all that apply.

QUESTION 11: CAREGIVER OUTSIDE THE HOME

Identify any other caregivers living outside of the home who provide care to any of the children in the household, including a separated parent who has some access to the child(ren). Please fill in all that apply.

QUESTION 12: CHILD CUSTODY DISPUTE AT THIS TIME

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

QUESTION 13: HOUSEHOLD INCOME ESTIMATED

Please provide an estimate of the family income. This is critical information to examine the effects of child poverty. Use the “Unknown” category only if you cannot provide any estimate of this figure.

QUESTION 14: HOUSING

These questions address the housing accommodations and conditions related to household (e.g. safety of housing and frequency of moves).

- q **Type of Housing:** Indicate the housing category that best describes the living situation of this household.
- q **Own home:** A purchased house, condominium, or townhouse.
- q **Rental:** A private rental house, townhouse or apartment.
- q **Public housing:** A unit in a public rental-housing complex (i.e. rent subsidized, government owned housing), a house, townhouse or apartment on a military base, or band housing.
- q **Shelter/Hotel:** A homeless or family shelter, SRO hotel (single room occupancy), or motel accommodations.

- q **Unknown:** Housing accommodation is unknown.
- q **Other:** Specify any other form of shelter.

QUESTION 15: UNSAFE HOUSING CONDITIONS

In your opinion, are children at risk for injury or impairment in this living situation (e.g. broken windows, insufficient heat, parents and children sharing single room)? Please check “Unknown” only if you have not been to the home or residence.

QUESTION 16: HOME OVERCROWDED

Indicate if household is made up of multiple families and/or overcrowded.

QUESTION 17: APPROXIMATE NUMBER OF MOVES WITHIN THE LAST 12 MONTHS

Indicate the number of family moves within the past twelve months.

QUESTION 18: CASE STATUS INFORMATION

Describe case status at the time that you are completing the form.

A) Case previously opened: Has this family previously had an open file with Child Welfare? Please respond if there is documentation, or if you are aware that there have been previous openings. Please estimate the number of previous openings. This would relate to case openings for any of the children identified as living in the home (listed on the **Intake Face Sheet**).

B) If yes, how long since previous opening: How many months between the time the case was last closed and this current opening?

QUESTION 19. CASES WILL STAY OPEN FOR ONGOING CHILD WELFARE SERVICES

At the time you are completing the *CIS Maltreatment Investigation Form*, do you plan to keep the case open to allow ongoing child welfare services?

QUESTION 20: REFERRAL(S) FOR ANY FAMILY MEMBER

Indicate referrals that have been made to programs designed to offer services beyond the parameters of “ongoing child welfare services”. Include referrals made internally to a special program provided by your agency/office as well as referrals made externally to other agencies/services. Note whether a referral was made and is part of the case plan, not whether the young person or family has actually started to receive services. Please fill in all that apply.

- q **Parent support program:** Any group program designed to offer support or education (e.g. Parent’s Anonymous, Parenting Instruction Course, Parent Support Association).
- q **In-home parenting support:** Home based support services designed to support families, reduce risk of out-of-home placement, or reunify children in care with their family.
- q **Other family/parent counseling:** Include programs for family therapy/counseling or couple counseling (e.g. family service bureau, mental health centre).
- q **Drug/Alcohol counseling:** Addiction program (any substance) for caregiver(s) or children.

- q **Welfare/Social assistance**: Referral for social assistance to address financial concerns of the household.
- q **Food bank**: Referral to any food bank.
- q **Shelter services**: Regarding domestic violence or homelessness.
- q **Domestic violence services**: Referral for services/counseling regarding domestic violence, abusive relationships, or the effects of witnessing violence.
- q **Psychiatric/Psychological services**: Child or parent referral to psychological or psychiatric services (trauma, high risk behaviour, or intervention).
- q **Special education referral**: Any specialized school program to meet a child's educational, emotional, or behavioural needs.
- q **Recreational program**: Referral to a community recreational program (e.g. organized sports leagues, community recreation, Boy's and Girl's Club).
- q **Victim support program**: Referral to a victim support program (e.g. sexual abuse disclosure group).
- q **Medical/Dental services**: Any specialized service to address the child's immediate medical or dental health needs.
- q **Child/day care**: Any paid child/day care services, including staff-run and in-home services.
- q **Cultural services**: Services to help children or families strengthen their cultural heritage.
- q **Other child/family referral**: Indicate and specify any other child or family focused referral.

DEFINITIONS: CHILD INFORMATION SHEET

QUESTION 21: CHILD NAME AND SEX

Indicate the first name and sex of the child for which the maltreatment assessment is being completed.

QUESTION 22: AGE

Indicate the child's age.

QUESTION 23: ABORIGINAL STATUS

Indicate the Aboriginal status of the child for which the maltreatment assessment is being completed.

QUESTION 24: CHILD FUNCTIONING

This section focuses on issues related to a child's level of functioning. Please fill in "Confirmed" if problem has been diagnosed, observed by you or another worker, or disclosed by the parent or child. Suspected means that, in your clinical opinion, there is reason to suspect that the conditions may be present, but they have not been diagnosed, observed or disclosed. Fill in "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 issues Where appropriate, use the past six months as a reference point.

- q ***Depression/anxiety***: feelings of depression or anxiety that persist for most of every day for two weeks or longer, and interfere with the child's ability to manage at home and at school.
- q ***ADD / ADHD***: Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder includes: distractibility (quickly moving attention from one thing to another); impulsivity (acting quickly without thinking of the consequences); hyperactivity (excessive activity and physical restlessness). These behaviors are very noticeable, occur over a long period of time in many situations, and are troublesome to others.
- q ***Negative peer involvement***: high-risk peer activities (e.g. gang activities, graffiti, vandalism).
- q ***Alcohol abuse***: problematic consumption of alcohol (consider age, frequency and severity)
- q ***Drug/solvent abuse***: include prescription drugs, illegal drugs and solvents.
- q ***Self-harming behaviour***: include high risk or life threatening behaviour, suicide attempts, and physical mutilation or cutting.
- q ***Violence toward others***: aggression and violence to other children or adults.
- q ***Running (one incident)***: has run away from home (or other residence) on one occasion, for at least one overnight period.
- q ***Running (multiple incidents)***: has run away from home (or other residence) on multiple occasions for at least one overnight period.
- q ***Inappropriate sexual behaviour***: child involved in inappropriate sexual behaviour.
- q ***Other emotional or behavioural problems***: significant emotional or behavioural problems not covered by the previous items.
- q ***Learning disability***: disability that is usually identified in schools. Children with learning disabilities have normal or above normal intelligence, but deficits in one or more areas of mental functioning (e.g. language usage, numbers, special, reading, work comprehension)
- q ***Specialized education services***: any special education program for learning disability, special needs, or behaviour problems.
- q ***Irregular school attendance***: irregular attendance and truancy (+5 days/month).
- q ***Developmental delay***: is characterized by delay intellectual development. It is typically diagnosed with a child does not reach his/her developmental milestones at expected times, such as speech and language, fine gross motor skills, and/or personal and social skills.
- q ***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.
- q ***Substance abuse related birth defects***: birth defects related to substance abuse of the biological parent (e.g. Fetal Alcohol Syndrome (FAS)/Fetal Alcohol Effect (FAE), cocaine addiction, solvent use).
- q ***Positive toxicology at birth***: when a toxicology screen for a newborn tests positive for the presences of drug or alcohol.
- q ***Other health condition***: ongoing physical health condition (e.g. chronic disease, frequent hospitalizations).
- q ***Psychiatric disorder***: psychiatric disorder, use the confirmed category only if diagnosed by a Psychiatrist (e.g. conduct disorder, anxiety disorder).

- q **Youth Criminal Justice Act involvement:** charges, incarceration or alternative measures with the Youth Justice system.
- q **Other:** specify any other conditions related to child functioning.

QUESTION 25: MALTREATMENT CODES

Select the applicable maltreatment codes from the list provided (1-25), and write these numbers clearly in the boxes beside Question 26. Please enter in the first box the primary form of maltreatment that best characterizes the investigated maltreatment.

The maltreatment typology developed here uses four major forms of maltreatment: **Physical Abuse, Sexual Abuse, Neglect, and Emotional Maltreatment**. These categories are comparable those used in the first cycle of the CIS, the Ontario Incidence Study, and the U.S. National Incidence Study.

Because there is significant variation in provincial and territorial child welfare statutes, we are using a broad typology. Please rate cases on the basis of your clinical opinion, not on provincial, territorial or agency/office specific definitions.

In cases of physical or sexual abuse where several codes may apply please select the code that you consider to be the most harmful to the child. For example, if sexual abuse involves fondling and penetration, you would most likely select penetration. If more than one code applies to the physical or sexual abuse, then enter the most harmful and circle the other codes that apply (circle the corresponding number from the list under #25).

All major forms of alleged, suspected or investigated maltreatment should be noted in the maltreatment code box regardless of the outcome of the investigation. For example, a three year old repeatedly found playing on a busy street is neglected even if harm has not yet occurred.

PHYSICAL ABUSE

The child has suffered, or is at substantial risk of suffering physical harm, at the hands of the child's caregiver. Include any alleged physical assault, including abusive incidents involving some form of punishment. If several types of physical abuse are involved, please identify the most harmful sub-type and circle the codes of other relevant descriptors.

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

SEXUAL ABUSE

The child has been, or is at substantial risk of being 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 types of sexual activity are involved, please identify the most intrusive sub-type. Include both intra-familial and extra-familial sexual abuse, as well as sexual abuse involving an older child or youth perpetrator.

- q **Penetration:** penile, digital or object penetration of vagina or anus.
- q **Attempted penetration:** attempted penile, digital or object penetration of vagina or anus.
- q **Oral sex:** oral contact with genitals either by perpetrator or by the child.
- q **Fondling:** touching or fondling genitals for sexual purposes
- q **Sex talk:** 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).
- q **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.
- q **Exhibitionism:** Include activities where the perpetrator is alleged to have exhibited himself/herself for his/her own sexual gratification
- q **Exploitation:** Include situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.

NEGLECT

The child has suffered harm or the child's safety or development has been endangered as a result of the caregiver(s)' failure to provide for or protect the child. Please note that the term "neglect" is not consistently used in all provincial/territorial statutes, but interchangeable concepts include: "failure to care and provide or supervise and protect"; "does not provide", "refuses or is unavailable or unable to consent to treatment".

- q **Failure to supervise: physical harm** The child suffered or is at substantial risk of suffering physical harm because of the caregiver's failure to supervise or protect 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).
- q **Failure to supervise: sexual harm:** 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.
- q **Permitting criminal behaviour:** A child has committed a criminal offence (e.g. theft, vandalism or assault) with the encouragement of the child's caregiver, or because of the caregiver's failure or inability to supervise the child adequately.
- q **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.
- q **Medical neglect:** 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.
- q **Failure to provide psych. treatment:** The child is at substantial risk of 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. The child's caregiver does not provide, or refuses, 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. Parent awaiting service should not be included in this category.

- q **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 child is in a placement and parent refuses/unable to take custody. .
- q **Educational neglect:** Caregivers knowingly permit chronic truancy (5+ days a month), or fail to enroll the child, or repeatedly keep the child at home. If child is experiencing mental, emotional, or developmental problems associated with school, and treatment is offered but caregivers do not cooperate with treatment, classify the case under failure to provide treatment as well.

EMOTIONAL MALTREATMENT

- q **Emotional abuse:** The child has suffered or is at substantial risk of suffering from mental, emotional or developmental problems caused by overtly hostile or punitive treatment, or habitual or extreme verbal abuse (e.g. threatening, belittling). If treatment is offered but caregivers do not cooperate, classify case under failure to provide treatment as well.
- q **Non-organic failure to thrive:** A child under three, who has suffered a marked retardation or cessation of growth for which no organic reasons can be identified. Failure to thrive cases where inadequate nutrition is the identified cause should be classified as physical neglect. Non-organic Failure to Thrive is generally considered to be a form of psychological maltreatment, however it has been classified as a separate category because of its particular characteristics.
- q **Emotional neglect:** The child has suffered or is at substantial risk of suffering from mental, emotional or developmental problems caused by inadequate nurturing or affection. If treatment is being offered but caregivers are not cooperating, classify case under failure to provide treatment as well.
- q **Exposed to domestic violence:** A child has been a witness to violence occurring between the caregivers (or a caregiver and his/her partner). This would include situations where the child indirectly witnessed the violence (e.g. saw the physical injuries on his/her caregiver the next day or overheard the violence).

QUESTION 26: ALLEGED PERPETRATOR

This section relates to the individual who is alleged, suspected or guilty of maltreatment towards the young person in question. Fill in either Caregiver A, Caregiver B or Other and please specify the relationship of the alleged perpetrator to the child. If you select Caregiver A or Caregiver B please write in a short descriptor (e.g. “mom”, “dad” or “boyfriend”) to allow us to verify consistent use of the label between the Household and Child sheets. Note that different people can be responsible for different forms of maltreatment (e.g. common-law partner abuses child, but other parent could possibly have prevented the abuse). If you responded with “Other”, please specify relationship to child (e.g. brother, uncle, grandmother, teacher, doctor, stranger, classmate, neighbour, family friend). Identify the alleged perpetrator regardless of the level of substantiation at this point of the investigation.

A) If “Other” Alleged Perpetrator, Age: If the alleged perpetrator is “Other”, please indicate the age of this individual. Age is essential information used to distinguish between child, youth and adult perpetrators. If there are multiple alleged perpetrators, please describe the perpetrator associated with the primary form of maltreatment.

B) If “Other” Perpetrator, Sex Please indicate the sex of the “Other” alleged perpetrator.

QUESTION 27: SUBSTANTIATION

Indicate the level of substantiation at this point in your investigation.

- q **Substantiated:** A case is considered “Substantiated” if the balance of evidence indicates that abuse or neglect has occurred.
- q **Suspected: Insufficient evidence:** A case is “Suspected” if you do not have enough evidence to substantiate maltreatment, but you also are not sure that maltreatment can be ruled out.
- q **Unfounded:** A case is “Unfounded” if the balance of evidence indicates that abuse or neglect has not occurred.

QUESTION 27A: IF UNFOUNDED, WAS REPORT A MALICIOUS 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 28: WAS ALLEGED MALTREATMENT A FORM OF PUNISHMENT?

Indicate if the alleged maltreatment was a form of punishment. This includes situations where abusive punishment was investigated but eventually unfounded.

QUESTION 29: DURATION OF MALTREATMENT

Check the duration of maltreatment, as it is known at this point of time in your investigation. This can include a single incident, multiple incidents for less than six months in duration, or multiple incidents longer than six months in duration. If this case is unfounded, then the duration needs to be listed as “Not Applicable (Maltreatment unfounded)”.

QUESTION 30. PHYSICAL HARM

Describe the physical harm suspected or known to have been caused by each of the investigated forms of maltreatment. Please include harm ratings even in accidental injury cases where maltreatment is unfounded, but the injury triggered the investigation.

- q **No harm:** There is no apparent evidence of physical harm to the child as a result of maltreatment.
- q **Bruises/Cuts/Scrapes:** The child suffered various physical hurts visible for at least 48 hours.
- q **Burns and scalds:** The child suffered burns and scalds visible for at least 48 hours.
- q **Broken bones:** The child suffered fractured bones.
- q **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).
- q **Fatal:** Child has died, maltreatment was suspected during the investigation as the cause of death. Include cases where maltreatment was eventually unfounded.
- q **Other health conditions:** Other physical health conditions, such as untreated asthma, failure to thrive or STDs.

QUESTION 31. PHYSICAL HARM

A) Medical treatment required for injury: In order to help us rate the severity of any documented physical harm, please indicate whether medical treatment was required as a result of the injury or harm for any of the investigated forms of maltreatments.

B) Health or safety seriously endangered by suspected or substantiated maltreatment: In cases of “suspected” or “substantiated” maltreatment indicate whether the child’s health or safety were endangered to the extent that the child could have suffered life threatening or permanent harm (e.g.: three year old child wandering on busy street, child found playing with dangerous chemicals or drugs).

C) History or undetected or misdiagnosed injuries: Indicate whether the investigation revealed a history of previously undetected or misdiagnosed injuries.

QUESTION 32: MENTAL OR EMOTIONAL HARM

A) No current signs, but mental or emotional harm is probable: Indicate if the child is showing no symptoms, but in your opinion mental or emotional harm is probable. If child is showing symptoms indicate no.

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

C) Exhibited mental or emotional harm requires treatment: Indicate whether child is exhibiting symptoms of mental or emotional harm requiring therapeutic treatment.

QUESTION 33: PHYSICIAN/NURSE CONDUCTED A PHYSICAL EXAMINATION OF THE CHILD

Indicate if a physician or nurse conducted a physical examination of the child over the course of the investigation.

QUESTION 34: OUT-OF-HOME PLACEMENT

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), please indicate the setting where the child has spent the most time.

- q **No placement required:** No placement is required following the investigation.
- q **Placement considered:** At this point of the investigation, an out-of-home placement is still being considered.
- q **Informal kinship care:** An informal placement has been arranged within the family support network (kinship care, extended family, traditional care), the child welfare authority does not have temporary custody.
- q **Kinship foster care:** A formal placement has been arranged within the family support network (kinship care, extended family, customary care), the child welfare authority has temporary or full custody and is paying for the placement.
- q **Other family foster care:** Include any family-based care, including foster homes, specialized treatment foster homes, and assessment homes.
- q **Group home placement:** Out of home placement required in a structured group living setting.
- q **Residential/secure treatment centre:** Placement required in a therapeutic residential treatment

centre to address the needs of the child.

QUESTION 35: CHILD WELFARE COURT

There are three categories to describe the current status of child welfare court at this time in the investigation. Select one category. If investigation is not completed, please answer to the best of your knowledge at this time. Please fill in one only.

QUESTION 36: PREVIOUS REPORTS

- A) *Child previously reported to child welfare for suspected maltreatment:*** This section collects information on previous reports to Child Welfare for the individual child in question. Please report if the child has been previously reported to Child Welfare authorities because of suspected maltreatment. Please use “Unknown” if you are aware of an investigation but cannot confirm this. Note that this is a child-specific question as opposed to the previous reports questions on the Household Information sheet.
- B) *If yes, was the maltreatment substantiated:*** Please indicate if the maltreatment was substantiated.

QUESTION 37: POLICE INVOLVEMENT IN CHILD MALTREATMENT INVESTIGATION

Indicate if there was a police investigation only or if charges were laid. If police investigation is ongoing and a decision to lay charges has not yet been made select the investigation only item.

QUESTION 38: POLICE INVOLVEMENT IN ADULT DOMESTIC VIOLENCE INVESTIGATION

Indicate if there was a police investigation only or if charges were laid. If police investigation is ongoing and a decision to lay charges has not yet been made select the investigation only item.

QUESTION 39: CAREGIVERS USE SPANKING AS A FORM OF DISCIPLINE

Indicate if the caregiver uses spanking as a form of discipline. Please use “Unknown” if you are unaware of the caregiver using spanking.

THANK YOU VERY MUCH FOR YOUR SUPPORT AND INTEREST
IN THE SECOND CYCLE OF THE CANADIAN INCIDENCE STUDY

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Appendix E. CASE VIGNETTES

The following are the case vignettes used during training sessions to ensure that workers understood how to complete the Maltreatment Assessment Form.

Intake Assessment: Vignette - Rebecca

File Number: 2345-234 G

Referring Source: School Vice- Principal **Date of Referral:** October 6

Family Name: Smith

Ethno-racial group: White

Mother's Name: Betsy Smith

Father's Name: Barry Smith

Children in the Family Home:

Rebecca

Date of Birth:

02//02/92

Address at Time of Referral:

222 Apple Street
Vancouver, Ontario
D3E F4G

Referral Summary:

Date: 06/10/03 Vice Principal Q called the office about an alleged sexual abuse involving a student at his school. Rebecca's mother had called Q after Rebecca had disclosed to her that her father had touched her breasts and had made Rebecca touch his penis.

The parents are divorced. Ms. Smith has had custody for a number of years. Rebecca lives with her mother in a rented townhouse. Mrs. Smith is 31 and she works full time as a grocery store clerk and makes \$20,000 annually. Mr. Smith is 32 and is presently unemployed but has worked as a computer software salesperson in the past. His receives monthly employment insurance. Rebecca visits her father every other weekend, Friday to Sunday at his apartment. There is also a Thursday evening visit.

Action Taken:

Date: 06/10/03 Police officer J. and Mrs. Smith were contacted and arrangements were made to interview Rebecca at the police station on October 7. The CAS has no previous record of this family. Mr. Smith has criminal convictions for drug possession and for driving while impaired. There is no record of any violence.

Date: 07/10/03 Constable J. of the Youth Bureau, Mrs. Smith and Rebecca were met at the police station. Mrs. Smith was interviewed alone. She explained that she has had custody of Rebecca for three years. Her father has been in Vancouver only one year; prior to that he was living in Calgary. Betsy has recently sought treatment for her own childhood sexual abuse, by her father. She is seeing a therapist weekly. Her father has not been charged but is being investigated by the police.

During Rebecca's interview both the police and I were present. The interview was videotaped. Rebecca stated that the first incident occurred a few weeks ago when she was sleeping over at her father's. Rebecca reported that shortly after she went to bed, her father came into the bedroom, bent over the bed and touched her breasts under her pyjamas, rubbing them with his fingers. Her father said "shh shh" but nothing else.

Rebecca reported that the second incident occurred on the most recent visit. Her father again came into the bedroom after she had been asleep. He reached for her hand and had her touch his penis. He whispered “ its okay, its okay” Rebecca provided details of both events remembering what pajamas she was wearing, and noting that during the second incident her father was only wearing his undershirt. Rebecca indicated that her father had an erection during the second incident.

Rebecca stated that she is afraid that something else will happen and that her father may try to hurt her again.

Later that evening the police officer indicated that Mr. Smith was charged with sexual assault. No contact is allowed between Mr. Smith and his daughter at this time. Both Rebecca and her mother are accepting a referral to the disclosure group.

Date 8/10/03: A follow-up visit to the home was conducted. The home is adequately equipped and tidy. Rebecca and her mother were feeling calm and still prepared to attend the disclosure group.

Date: 10/11/03: A message was left for Betsy Smith’s therapist to call me.

I spoke with the family doctor who has known Mrs. Smith for 8 years. The doctor indicated that Rebecca had met normal childhood milestones. She is functioning well in school and had no health problems. The doctor noted that the parents separated because of Mr. Smiths drug and alcohol use. He had no concerns about Mrs. Smith’s emotional health or her physical health.

A referral was made to the Sex abuse disclosure Group.

Investigation Conclusions:

Date: 11/11/03 This case involves the sexual abuse of Rebecca by her father; Barry. The mother presents as a concerned and supportive parent. Rebecca was very clear and credible when she was interviewed and the police have charged Mr. Smith. Rebecca felt relieved after she made the disclosure. She is not displaying signs of emotional distress at this time. Rebecca is close with her mother and has the support of her aunts and neighbourhood friends.

Investigation Recommendations:

- Interview Mr. Smith,
- To support and encourage both mother and daughter to attend the Disclosure Group

Outcome: Case to be transferred to Family Services

Intake Assessment: Vignette - Peter

<u>File Number:</u> 1234-567A	
<u>Referring Source:</u> Tom B – School Principal	<u>Date of Referral:</u> October 21, 2003
<u>Family Name:</u> Nyugen	<u>Date of Opening:</u> October 22, 2003
<u>Mother's Name:</u> Marla Nyugen	<u>Father's Name:</u> Martin Nyugen
<u>Children in the Family Home:</u> Peter Susan	<u>Date of Birth:</u> 28/02/97 5/03/89
<u>Address at Time of Referral:</u>	111 Anystreet, Apartment #1 Barrie, Ontario A1B C2D

Referral Summary:

Date: 21/10/03 Peter (6 years) came to school complaining that his father hit him with a shoe. He pointed to his upper back. The school principal said that Peter stated earlier in the year that his father hits him on the bottom. The principal indicated that Peter goes home from school with grade 5 and 6 students; D and N. D and N reported having seen Peter's father hit him outside of the family's store. The principal also noted that Peter had been telling other children his father had been in jail for fighting with the neighbours. He was unaware of any details of this incident.

D and N say Peter is hard to control on the daily walk home from school and see him as bullying and hitting his peers. Peter's teacher (L) reports that Peter is regularly disruptive in class and she wonders if Peter may have a learning disability as he has not yet learned basic routines and he can only follow a single instruction at a time. Peter misses approximately 2 or 3 days of school each month.

Action Taken:

Date: 21/10/03 Record check completed. No record found. I contacted the 1001 Division Youth Bureau to consult regarding this case. During this consultation the police verified that Mr Nyugen had recently been jailed on a warrant, which originated from a charge of "uttering death threats". The details of the charge were not available. The police advised that they would not be joining the investigation at this time. Should more serious concerns arise, I was advised to call again and consult with the duty sergeant.

Date: 22/09/03 Peter was in attendance at school and, in the presence of his teacher L, was interviewed in regards to the above referral report. Peter spoke with ease and explained that his father hit him with a shoe when he ran out of the family's store. Peter indicated that the shoe hit him on his right shoulder. Peter openly stated that his father hits him with his hand or a stick, the last incident was in the summer holiday. Peter stated that he has always been punished this way, since he was three. The child did not appear to be saddened or feel his father's behaviour was out of the norm. He did not appear frightened by his parents and was willing to have us talk with his father. Peter told us that his father had been in jail for fighting with some neighbourhood youth. He went into much detail about the fighting. The boy jumped around much in the conversation and had a difficult time concentrating on the questions he was asked.

The teacher and I examined Peter and found no bruising or injury to his back.

I called Peter's father and requested an interview. Mr Nguyen agreed and directed me to the Family's apartment the following evening. His wife would also be available to talk with me.

Date: 23/09/03: Mother and father appeared calm and pleasant. Mother is 40 and Mr. Nguyen is approximately five years older. The apartment appeared neat and orderly. The family has lived in this apartment for six years. Mr Nyugen described Peter as hard to manage and as a result he was primarily responsible for disciplining Peter. Peter is always asking for money from the till and trying to sneak candies. He does not listen to his mother. Mr. and Mrs. Nguyen work long hours, being the sole employees in the store. Peter accompanies his parents to the store in the mornings and joins them there after school. Mr. Nguyen told me that the store does not make much money and some months he has a hard time paying his bills. The father says he has never hit Peter and explains how much he values him, especially as he is the only male child.

Mrs. Nguyen was calm and quiet during the interview. She appeared somewhat depressed and struggled to express herself in English. She concurred that Mr. Nguyen is the disciplinarian and denied that he hit Peter. Neither Mr. nor Mrs. Nguyen drink alcohol nor do they keep any in the home. They report that their elder daughter is well behaved and attends high school.

Mr and Mrs. Nguyen emigrated to Canada 10 years ago. Their extended family remained in Vietnam. Mr. Nguyen was an accountant and has completed college in Vietnam. Mrs. Nguyen was a homemaker in Vietnam. Her level of education is not known. Mr. Nguyen and the children attend a local church on Sundays where Mr. Nguyen volunteers with the choir. Mrs. Nguyen has few social supports outside of her husband.

This worker contacted the family doctor who reported that Peter's development had been normal. She was aware that Mrs. Nguyen has difficulty in disciplining Peter and that Peter often acted up at school. She had no knowledge of physical abuse nor inappropriate discipline. The doctor reported that Mrs. Nguyen has diabetes but the parents are otherwise healthy.

Mr. Nguyen was interested in ongoing support from the agency and assured me he does not use physical discipline. Peter and his father appeared to have a warm relationship. I provided the Nguyen's with the phone number for the Southeast Asian Family Help Center for both recreation and parent support programs. The school social worker has been contacted to arrange a special education assessment.

Investigation Conclusions:

Date: 24/09/03 It is my opinion that the Nyugen family does use physical discipline and I have difficulty with their denial in this regard. At this time physical abuse cannot be confirmed, but ongoing monitoring is warranted given the conflicted evidence.

A referral to a child behaviour management program is required. Further assessment of the family history, family dynamics, and Mrs. Nguyen's emotional state are necessary. If possible, these assessments should be completed in the family's primary language.

Investigation Recommendations:

Child management
Develop community supports

Protection Concerns:

Child's behaviour
Parent's disciplinary measures
Possible supervision difficulties
Mrs. Nguyen's emotional state

Outcome: Case to be transferred to Family Services

Appendix F. WORKER INFORMATION FORM

The following is the information form completed by the investigating workers.



CIS OFFICE USE ONLY

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WORKER INFORMATION FORM

Thank you for taking the time to complete this Worker Information Form for the Canadian Incidence Study of Reported Child Abuse and Neglect. This information is confidential and you will not be identified in the study report or within your agency office. If you have any questions about completing this form, please contact your assigned Research Associate: _____

Tel: (____) _____

A. BACKGROUND INFORMATION

1. Name: _____

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Date:

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--	--

--	--

day

month

year

2. Age:

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3. Gender: Male Female

CIS OFFICE USE ONLY

4. Ethno-racial Group

- White Latin American Arab/West Asian (e.g. Armenian, Egyptian, Iranian, Lebanese, Moroccan)
- Chinese Aboriginal South Asian (e.g. East Indian, Pakistani, Punjabi, Sri Lankan)
- Black (e.g. African, Haitian, Jamaican) Southeast Asian other than Chinese (e.g. Filipino, Indonesian, Japanese, Korean, Laotian, Vietnamese)
- Other: _____

5. Primary Language: English French Other (specify): _____

6. Agency: _____

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CIS OFFICE USE ONLY

7. Team/Branch: _____

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CIS OFFICE USE ONLY

8. Which category best describes your current position?

- Intake worker (primarily investigations and referrals) Combination of ongoing and intake
- Ongoing service worker (primarily ongoing cases) Other (specify): _____

B. CASELOAD INFORMATION

9. What is your current caseload?

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 (# of open cases at this time)

10. What is the average size of your caseload?

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C. EDUCATION

11. Please check all diplomas that you have obtained College diploma BA/BSc BSW MSc MSW PhD

D. EXPERIENCE

12. Total years you have worked as a social worker?

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13. How many years of this were spent in child protection?

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E. CHILD PROTECTION TRAINING

14. Please fill in all specific training that you have received

- General child abuse Crisis intervention Neglect assessment Family preservation intervention
- Sexual abuse training Risk assessment Child development Cultural sensitivity training
- Physical abuse training Solution focussed interventions Other: _____



Appendix G. VARIANCE ESTIMATES AND CONFIDENCE INTERVALS

The following is a description of the method employed to develop the sampling error estimation for the OIS-2003. As well as the variance estimates and confidence intervals for the OIS-2003 estimates. Variance estimates are provided for the statistics in the “total” column for most tables in the Major Findings Report.

Sampling Error Estimation¹

The OIS-2003 uses a random sample survey method to estimate the incidence and characteristics of cases of reported child abuse and neglect across the country. The study estimates are based on the core OIS-2003 sample of 7,172 child investigations drawn from a total population of 4,175 family cases open for service in Ontario.

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, such as the number of reported cases of medical neglect or the number of children under four years of age placed in the care of child welfare services. For extremely rare events, such as voyeurism, the margin of error is very large, and such estimates should be interpreted as providing a rough idea of the relative scope of the problem rather than a precise number of cases.

Appendix G tables provide the margin of error for selected OIS-2003 estimates. For example, the estimated number of child maltreatment investigations in Ontario is 128,108. The lower 95 per cent confidence interval is 95,716 child investigations and the upper confidence interval is 160,500 child investigations. This means that there is a 95 per cent chance that the true number of substantiated maltreatment is between 95,716 and 160,500. In contrast, the estimated number of substantiated investigations involving head trauma is 148, but the 95 per cent confidence interval is

¹ Statistical consultation and sampling error estimation were provided by Health Canada, Social Survey Method Division, Jane Mulvihill, Senior Methodologist.

between 0 and 300 child investigations. The estimate of 148 is unlikely to be exactly correct; however, we can be reasonably sure that the actual number of cases involving head trauma investigated by child welfare services in Ontario is in the range of 0 to 300 investigations.

The error estimates do not account for any errors in determining the annual and regional weights. Nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from site to site. 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.

To assess the precision of the OIS-2003 estimates, sampling errors were calculated from the sample with reference to the fact that the survey population had been stratified and that a single cluster (or site) had been selected randomly from each stratum. From the selected cluster all cases in the three-month period were sampled. In a few situations, a shorter period of time was sampled or every random cases were sampled. An annualization weight was used to weight the survey data to represent annual cases. A regionalization weight was used to weight the survey data so that data from sites represented regions or strata.

Sampling errors were calculated by determining the sampling variance and then taking the square root of this variance. The sampling variability that was calculated was the variability due to the randomness of the cluster selected. Had a different cluster been selected, then a different estimate would have been obtained. The sampling variance and sampling error calculated are an attempt to measure this variability. Thus, the measured variability is due to the cluster. We did not measure the variability, however, because only three months were sampled, not a full year, and in some situations only every second case was sampled.

To calculate the variance, the stratified design allowed us to assume that the variability between strata was zero and that the total variance at the Ontario level was the sum of the variance for each strata.

Calculating the variance for each strata was a problem, because only one cluster had been chosen in each strata. To overcome this problem we used the approach given in Rust and Kalton (1987).²

This approach involved collapsing stratum into groups (collapsed strata); the variability among the clusters within the group was then used to derive a variance estimate. Collapsing of strata was done to maintain homogeneity as much as possible.

The estimated population of incidences ($\hat{\tau}$) with the characteristic of interest is:

$$\hat{\tau} = \sum_{h=1}^H \hat{\tau}_h$$

Where $\hat{\tau}_h$ is the population of incidences with the characteristic of interest for the hth stratum.

$$\hat{\tau}_h = \sum_i W_h y_{hi}$$

where:

W_h is the weight for the hth stratum

y_{hi} is 1 if the ith unit (case) in stratum h has the characteristic of interest, is 0 if the ith unit (case) in stratum h does not have the characteristic of interest, and we sum over all the i units (cases) in the hth stratum.

For our study the H strata were partitioned into J groups of strata, known as collapsed strata, and there were $H_j \geq 2$ strata in the collapsed stratum j. Stratum h within collapsed stratum j is denoted by h(j). The collapsed strata estimator of the variance $\hat{\tau}$ is

² Rust, K., & Kalton, G. (1987). Strategies for collapsing strata for variance estimation. Journal of Official Statistics, 3 (1): 69-81.

$$\text{var}(\hat{\tau}) = \sum_j^J \frac{H_j}{(H_j - 1)} \sum_h^{H_j} \left[\hat{\tau}_{h(j)} - \frac{\hat{\tau}_j}{H_j} \right]^2$$

Where $\hat{\tau}_{h(j)}$ denotes the unbiased estimator of $\tau_{h(j)}$, the parameter value for stratum h in collapsed stratum j, and

$$\hat{\tau}_j = \sum_h^H \hat{\tau}_{h(j)}$$

The following are the variance estimates and confidence intervals for OIS-2003 variables of interest. The tables are presented to correspond with the tables in the chapters of the OIS-2003 Major Findings Report. Each table reports the estimate, standard error, coefficient of variation, lower and upper confidence interval.

Appendix G: Table 3-1**Child Maltreatment Investigations in Ontario in 2003**

	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Investigations	128,108	16,526	12.90	95,716	160,500
Incidence Per Thousand	53.59	6.91	12.90	40.04	67.14

Appendix G: Table 3-3**Primary Category of Substantiated Child Maltreatment Investigations in Ontario in 2003**

	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Physical Abuse	14,054	2,518	17.91	9,119	18,989
Incidence per Thousand	5.88	1.05	17.91	3.82	7.94
Sexual Abuse	1,490	363	24.39	778	2,202
Incidence per Thousand	0.62	0.15	24.39	0.32	0.92
Neglect	15,660	1,623	10.36	12,480	18,840
Incidence per Thousand	6.55	0.68	10.36	5.22	7.88
Emotional Maltreatment	8,703	1,706	19.60	5,360	12,046
Incidence per Thousand	3.64	0.71	19.60	2.24	5.04
Exposure to Domestic Violence	18,518	2,672	14.43	13,280	23,756
Incidence per Thousand	7.75	1.12	14.43	5.56	9.94

Appendix G: Table 3-4

Single and Multiple Categories of Substantiated Child Maltreatment Investigations in Ontario in 2003

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Physical Abuse Only	11,077	2,326	21.00	6,518	13,543
Incidence per Thousand	4.63	0.97	21.00	2.72	6.54
Sexual Abuse Only	1,244	357	28.66	545	1,943
Incidence per Thousand	0.52	0.15	28.66	0.23	0.81
Neglect Only	13,573	1,592	11.73	10,453	16,694
Incidence per Thousand	5.68	0.67	11.73	4.37	6.99
Emotional Maltreatment Only	7,060	1,398	19.80	4,321	9,799
Incidence per Thousand	2.95	0.59	19.80	1.80	4.10
Exposure to Domestic Violence	16,669	2,612	15.67	11,551	21,788
Incidence per Thousand	6.97	1.09	15.67	4.83	9.11
Physical and Sexual Abuse	116	30	25.87	57.16	174.68
Incidence per Thousand	0.05	0.01	25.87	0.02	0.08
Physical Abuse and Neglect	857	191	22.34	481	1232
Incidence per Thousand	0.36	0.08	22.34	0.20	0.52
Physical Abuse and Emotional Maltreatment	1,203	358	29.75	501	1,904
Incidence per Thousand	0.50	0.15	29.75	0.21	0.79
Physical Abuse and Exposure to Domestic Violence	1,379	256	18.53	878	1,880
Incidence per Thousand	0.58	0.11	18.53	0.37	0.79
Sexual Abuse and Neglect	138	61	44.32	18	257
Incidence per Thousand	0.06	0.03	44.32	0.01	0.11
Sexual Abuse and Emotional Maltreatment	–	–	–	–	–
Incidence per Thousand	–	–	–	–	–
Sexual Abuse and Exposure to Domestic Violence	–	–	–	–	–
Incidence per Thousand	–	–	–	–	–
Neglect and Emotional Maltreatment	1,208	192	15.87	832	1,584
Incidence per Thousand	0.51	0.08	15.87	0.35	0.67
Neglect and Exposure to Domestic Violence	1,409	436	30.97	554	2,264
Incidence per Thousand	0.59	0.183	30.97	0.23	0.95
Emotional Maltreatment and Exposure to Domestic Violence	1,494	142	9.53	1,215	1,773
Incidence per Thousand	0.62	0.06	9.53	0.50	0.74
Physical Abuse, Sexual Abuse and Neglect					
Incidence per Thousand					

(continued on following page)

Appendix G: Table 3-4 (continued)

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Physical Abuse, Sexual Abuse and Emotional Maltreatment Incidence per Thousand					
Physical Abuse, Sexual Abuse and Exposure to Domestic Violence Incidence per Thousand					
Physical Abuse , Neglect, Emotional Maltreatment Incidence per Thousand	178	58	32.73	64	292
Physical Abuse, Neglect and Exposure to Domestic Violence Incidence per Thousand	0.07	0.024	32.734	0.02	0.12
Physical Abuse, Neglect and Exposure to Domestic Violence Incidence per Thousand	111	57	51.61	0	222
Physical Abuse, Emotional Maltreatment and Exposure to Domestic Violence Incidence per Thousand	0.05	0.024	51.606	0.00	0.10
Physical Abuse, Emotional Maltreatment and Exposure to Domestic Violence Incidence per Thousand	224	90	40.38	47	401
Sexual Abuse, Neglect and Emotional Maltreatment Incidence per Thousand	0.09	0.038	40.377	0.02	0.16
Sexual Abuse, Neglect and Exposure to Domestic Violence Incidence per Thousand					
Sexual Abuse, Emotional Maltreatment and Exposure to Domestic Violence Incidence per Thousand					
Neglect, Emotional Maltreatment and Exposure to Domestic Violence Incidence per Thousand	332	144	43.32	50	614
Neglect, Emotional Maltreatment and Exposure to Domestic Violence Incidence per Thousand	0.14	0.06	43.32	0.02	0.26

Appendix G: Table 4-1(a)**Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Physical Harm	53,435	6,880	12.88	39,949	66,921
Physical Harm	4,989	841	16.86	3,341	6,638

Appendix G: Table 4-1(b)**Nature of Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Physical Harm	53,435	6,880	12.88	39,949	66,921
Bruises, Cuts and Scrapes	3,602	666	18.49	2,297	4,907
Burns and Scalds	149	72	48.63	7	290
Broken Bones	–	–	–	–	–
Head Trauma	148	78	52.61	–	300
Fatality	–	–	–	–	–
Other Health Condition	1,102	258	23.40	596	1,607

Appendix G: Table 4-1(c)**Medical Treatment Required in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Medical Treatment not Required	3,628	720	19.83	2,217	5,038
Medical Treatment Required	1,362	132	9.71	1,103	1,621

Appendix G: Table 4-2**Emotional Harm in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Emotional Harm	47,969	6,913	14.41	34,419	61,519
Emotional Harm	10,241	1,177	11.49	7,934	12,548

Appendix G: Table 4-3**Duration of Maltreatment in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Single Incident	20,441	3,407	16.67	13,764	27,119
Less than Six Months	8,408	888	10.56	6,668	10,148
More than Six Months	19,770	2,755	13.94	14,370	25,171
Unknown	8,786	1,505	17.13	5,836	11,735

Appendix G: Table 5-1(a)**Previous Case Openings in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Previous Openings	24,245	4,036	16.65	16,333	32,156
One Previous Opening	12,106	1,585	13.09	9,000	15,212
2-3 Previous Openings	10,798	915	8.47	9,005	12,591
More than 3 Previous Openings	10,440	1,722	16.50	7,064	13,815
Unknown Record	801	261	32.53	290	1,312

Appendix G: Table 5-1(b)**Time Since Case Was Last Closed in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Previous Openings	24,245	4,036	16.65	16,333	32,156
Less than 3 Months	5,882	1,115	18.95	3,697	8,067
3-6 Months	6,517	711	10.91	5,124	7,911
7-12 Months	7,685	1,197	15.57	5,340	10,031
13-24 Months	5,972	902	15.10	4,204	7,739
More than 24 Months	6,980	549	7.86	5,904	8,055

Appendix G: Table 5-2**Ongoing Child Welfare Services in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Case to Stay Close	35,393	5,694	16.09	24,233	46,552
Case to Stay Open	23,012	2,619	11.38	17,879	28,146

Appendix G: Table 5-3**Referrals to Support Services in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Referrals	25,043	3,331	13.30	18,515	31,572
In Home Parenting Support	5,319	1,126	21.17	3,112	7,526
Parent Support Group	6,618	1,454	21.97	3,768	9,468
Other Family / Parent Counseling	17,294	2,266	13.10	12,852	21,736
Drug / Alcohol Counseling	5,756	1,026	17.82	3,746	7,766
Welfare / Social Assistance	2,039	375	18.39	1,304	2,774
Food Bank	1,990	343	17.26	1,316	2,663
Shelter Services	2,678	450	16.81	1,796	3,561
Domestic Violence Services	10,288	1,668	16.22	7,018	13,557
Psychiatric / Psychological Services	4,966	558	11.24	3,872	6,061
Special Education Referral	481	86	17.83	313	649
Recreational Program	1,128	270	23.91	600	1,657
Victim Support Program	3,860	658	17.04	2,571	5,149
Medical / Dental Services	2,249	329	14.64	1,603	2,894
Child/Daycare	1,439	327	22.69	799	2,079
Cultural services	1,359	324	23.82	725	1,993
Other Referral	4,090	780	19.08	2,561	5,620

Appendix G: Table 5-4**Out-of-Home Placement in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Placement Required	50,910	6,796	13.35	37,590	64,229
Placement Considered	1,823	338	18.56	1,160	2,486
Informal Kinship Care	2,175	313	14.41	1,560	2,789
Child Welfare Placement:					
Kinship Foster Care	475	105	22.00	270	680
Other Family Foster Care	2,213	369	16.67	1,490	2,936
Group Home	456	64	14.09	330	582
Residential / Secure Treatment	310	68	22.06	176	443

Appendix G: Table 5-5**Applications to Child Welfare Court and Mediation / Alternative Response in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Court Considered	52,359	6,971	13.32	38,695	66,022
Application Considered	2,670	833	31.20	1,037	4,303
Application Made	3,357	754	22.47	1,879	4,836
No Medation / Alternative Response	50,705	5,970	11.775	39,003	62,407
Referral to Mediation / Alternative Response	1,060	239	22.597	590	1,529

Appendix G: Table 5-6**Police Investigations and Charges Laid in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Police Investigation	47,967	6,472	13.49	35,282	60,652
Police Investigation, No Charges Laid	6,634	791	11.93	5,083	8,185
Police Investigation, Charges Considered	683	62	9.06	562	805
Police Investigation, Charges Laid	3,112	530	17.03	2,073	4,151

Appendix G: Table 6-1**Child Age and Sex in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Males 0-15 Years of Age	30,810	4,380	14.22	22,225	39,396
Females 0-15 Years of Age	27,614	3,245	11.75	21,255	33,974
Males <1 Years of Age	2,107	407	19.31	1,310	2,904
Females <1 Years of Age	2,042	246	12.03	1,561	2,523
Males 1-3 Years of Age	4,628	509	11.01	3,629	5,626
Females 1-3 Years of Age	4,300	635	14.76	3,056	5,544
Males 4-7 Years of Age	7,718	1,166	15.11	5,433	10,004
Females 4-7 Years of Age	7,038	872	12.39	5,329	8,746
Males 8-11 Years of Age	9,329	1,530	16.40	6,329	12,328
Females 8-11 Years of Age	7,110	871	12.26	5,402	8,818
Males 12-15 Years of Age	7,029	1,103	15.70	4,866	9,191
Females 12-15 Years of Age	7,125	859	12.05	5,442	8,808

Appendix G: Table 6-3(a)**Child Functioning (Physical, Emotional and Cognitive) in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Developmental Delay	4,785	804	16.81	3,208	6,361
Learning Disability	8,344	1,016	12.18	6,352	10,336
Physical Disability	967	157	16.18	661	1,274
Substance Abuse Related Birth Defect	432	118	27.42	200	664
Other Health Condition	2,665	434	16.27	1,815	3,515
Specialized Education Services	6,576	990	15.06	4,635	8,517
Depression or Anxiety	9,528	1,357	14.24	6,868	12,188
Self-harming Behaviour	2,004	224	11.18	1,565	2,443
Psychiatric Disorder	1,848	294	15.89	1,272	2,424
Positive Toxicology at Birth	280	75	26.95	132	428

Appendix G: Table 6-3(b)**Child Functioning (Behavioural) in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Negative Peer Involvement	7,369	905	12.28	5,596	9,143
Alcohol Abuse	1,520	143	9.39	1,240	1,799
ADD/ADHD	6,779	803	11.85	5,204	8,353
Drug/Solvent Abuse	1,928	258	13.40	1,422	2,435
Violence Towards Others	5,969	637	10.67	4,721	7,218
Running	3,038	360	11.85	2,332	3,743
Irregular School Attendance	5,417	751	13.86	3,945	6,888
Inappropriate Sexual Behaviour	2,352	350	14.86	1,667	3,037
Youth Criminal Justice Act Involvement	1,058	221	20.86	626	1,491
Other Behavioural Emotional Problems	13,911	1,690	12.15	10,598	17,224

Appendix G: Table 6-4**Aboriginal Heritage of Investigated Children in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Non-Aboriginal	55,532	7,259	13.07	41,304	69,760
First Nation, Status	1,903	670	35.21	590	3,216
First Nation, Non-Status	695	322	46.30	64	1,326
Metis	—	—	—	—	—
Inuit	—	—	—	—	—
Other Aboriginal	245	55	22.56	137	353

Appendix G: Table 7-1**Household Structure in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Two Parent-Biological	18,515	3,463	18.70	11,728	25,302
Two Parent-Blended/ Step	8,920	910	10.20	7,136	10,703
Biological Parent and Other	1,893	410	21.67	1,089	2,697
Lone Mother	24,358	3,047	12.51	18,385	30,330
Lone Father	2,351	425	18.08	1,518	3,184
Other	2,388	310	12.99	1,780	2,996

Appendix G: Table 7-3**Siblings of Children in Child Maltreatment Investigations in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Sibling	13,006	2,034	15.64	9,020	16,993
One Sibling	22,849	3,449	15.09	16,090	29,609
Two Siblings	13,515	1,720	12.73	10,143	16,886
Three Siblings	6,511	893	13.71	4,762	8,261
Four or More Siblings	2,543	291	11.44	1,973	3,113

Appendix G: Table 7-4**Investigated Siblings in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Sibling	13,006	2,034	15.64	9,020	16,993
One Sibling, Not Investigated	3,057	637	20.85	1,808	4,306
One Sibling, Investigated	19,793	2,899	14.65	14,110	25,475
Two or More Siblings, None Investigated	1,694	316	18.63	1,076	2,313
Two or More Siblings, At Least One Other Investigated	20,875	2,312	11.08	16,343	25,406

Appendix G: Table 7-5**Household Source of Income in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Full-Time Employment	37,299	5,415	14.52	26,686	47,912
Part-time/Multiple Jobs/Seasonal Employment	6,404	866	13.53	4,706	8,102
Benefits / Unemployment / Social Assistance	11,267	1,837	16.30	7,668	14,867
Unknown	3,091	610	19.73	1,895	4,286
No Source of Income	350	193	55.25	0	729

Appendix G: Table 7-6**Housing Type in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Own Home	21,695	3,232	14.90	15,360	28,030
Rental Accomodation	23,216	2,473	10.65	18,369	28,063
Public Housing	6,168	1,142	18.52	3,929	8,406
Shelter/Hotel	596	149	25.05	304	889
Other	1,835	310	16.87	1,228	2,442
Unknown	4,914	1,515	30.83	1,945	7,884

Appendix G: Table 7-7**Housing Conditions in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Safe Conditions	51,762	6,691	12.93	38,648	64,877
Unsafe Conditions	3,630	552	15.21	2,548	4,712
Unknown	3,032	556	18.33	1,943	4,122

Appendix G: Table 7-8**Family Moves Within the Last Twelve Months in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Moves in Last Twelve Months	29,632	3,887	13.12	22,013	37,250
One Move	10,459	1,206	11.53	8,095	12,824
Two or More Moves	5,298	932	17.59	3,471	7,124
Unknown	13,024	2,438	18.72	8,246	17,803

Appendix G: Table 7-10**Custody Dispute in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Custody Dispute	50,059	6,900	13.79	36,534	63,584
Custody Dispute	7,407	1,048	14.15	5,353	9,461
Unknown	959	178	18.60	609	1,308

Appendix G: Table 8-1**All Referral Sources (Non-Professional and Professional) in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Non-Professional Referral Sources					
Parent	5,424	236	4.35	4,961	5,886
Child	1,009	179	17.75	658	1,361
Relative	1,602	177	11.04	1,255	1,948
Neighbour/Friend	1,762	277	15.71	1,220	2,305
Other Referral Sources	2,966	385	12.97	2,212	3,720
Anonymous	1,854	188	10.15	1,485	2,223
Professional Referral Sources					
Police	21,743	3,676	16.91	14,538	28,948
School Personnel	11,558	2,328	20.15	6,994	16,121
Health Professional	3,572	594	16.63	2,408	4,736
Mental Health Professional	1,579	238	15.09	1,112	2,047
Other Child Welfare Service	2,986	454	15.21	2,096	3,876
Community Agency	4,392	618	14.07	3,181	5,604

Appendix G: 8-2(a)**Unsubstantiated and Malicious Reports of Child Maltreatment in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Substantiated Reports	58,425	7,502	12.84	43,722	73,128
Suspected Reports	13,032	1,999	15.337	9,114	16,949
Unsubstantiated Non-Malicious Reports	42,392	6,202	14.63	30,236	54,548
Unsubstantiated Malicious Reports	6,162	1,248	20.247	3,716	8,607
Unsubstantiated Reports, Malicious Intent Unknown	7,611	1,316	17.292	5,032	10,191

Appendix G: Table 8-3**Relative Size of Child Welfare Agency/Office in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Small (< 949)	8,823	6,089	69.01	0	20,758
Medium (950-2000)	21,449	7,150	33.33	7,436	35,463
Large (>2000)	28,152	7,516	26.70	13,420	42,884

Appendix G: Table 8-4**Urban/Rural Location of Child Welfare Agency/Office in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Large Metropolitan Service Area	32,260	11,126	34.49	10,454	54,067
Mixed Urban and Rural Service Area	20,292	8,151	40.17	4,316	36,269
Primarily Rural Service Area	5,872	5,683	96.78	0	17,010

Appendix G: Table 8-5**Job Position of Investigating Worker in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Intake and Investigation Specialists	43,123	6,760	15.68	29,873	56,372
Generalists with Mixed Intake and Ongoing Service Caseloads	2,821	1,751	62.07	0	6,254
Other	841	358	42.52	140	1,542

Appendix G: Table 8-6**Years of Child Welfare Experience of Investigating Workers in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
<1 Year	1,839	664	36.12	537	3,141
1 to 2 Years	17,382	4,773	27.46	8,027	26,738
3 to 4 years	13,962	2,941	21.06	8,198	19,726
5 to 6 Years	5,421	943	17.39	3,574	7,269
More than 6 Years	7,793	2,688	34.49	2,524	13,061

Appendix G: Table 8-7**Highest Completed Educational Level of Investigating Workers in Substantiated Child Maltreatment Investigations in Ontario in 2003**

Variable	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
MSW	3,599	1,341	37.27	970	6,228
BSW	27,590	6,201	22.48	15,435	39,744
MSc	1,440	728	50.56	13	2,867
BA/BSc	13,243	3,309	24.99	6,758	19,729
College Diploma or Certificate	1,778	895	50.33	24	3,533

Appendix H. SUPPORTING DATA FOR ADDITIONAL REPORT FINDINGS

The following are the data tables for the special variables mentioned throughout the Major Findings Report for the Ontario Incidence Study of Reported Child Abuse and Neglect, 2003.

Appendix H: Table 1(a)**Mean Number of Children under the Age of 19 per Household in Child Maltreatment Investigations in Ontario in 2003**

Number of Children	Child Investigations
One Child	26,134
Two Children	50,132
Three Children	30,929
Four Children	14,695
Five Children	4,485
Six Children	1,461
Seven Children	138
Eight Children	135
Total Children Under 19	128,108

Mean Number of Children Under 19 per Household in Child Maltreatment Investigations* 2.45

* The mean number of children per household was calculated by dividing the number of children under 19 living in the households by the total number of households.

Appendix H: Table 1(b)**Mean Number of Investigated Children per Household in Child Maltreatment Investigations in Ontario in 2003**

Number of Children	Child Investigations
One Child	38,218
Two Children	47,056
Three Children	26,937
Four Children	11,399
Five Children	3,433
Six Children	1,064
Total Child Investigations	128,108

Mean Number of Investigated Children per Household in Child Maltreatment Investigations* 1.71

* The mean number of investigated children was calculated by dividing the number of children investigated by the total number of families

Appendix H: Table 2**Investigated Children Under One Year of Age by Head Trauma in Primary Category Child Maltreatment Investigations in Ontario in 2003**

	Head Trauma	No Head Trauma	Total
Number of Children Less than One Year Old	98	8,139	8,237
Percentage	1%	99%	100%

Appendix H: Table 3**Parents Involved as Alleged Perpetrators in Child Maltreatment Investigations in Ontario in 2003**

	Child Investigations	Percentage
Either Parent Involved as Alleged Perpetrator	114,229	89%
Neither Parent Involved as Alleged Perpetrator	13,879	11%
Total Child Investigations	128,108	100%

Appendix H: Table 4**Parents as Perpetrators of Primary Substantiated Physical Abuse for Two-Parent Families in Child Maltreatment Investigations in Ontario in 2003**

	Physical Abuse Investigations	Percentage
Mother as Perpetrator in Two-Parent Families	4,127	52%
Father as Alleged Perpetrator in Two-Parent Families	5,182	65%
Total Two-Parent Families Investigated for Physical Abuse	7,913	

Appendix H: Table 5**Parents as Perpetrators of Primary Substantiated Neglect for Two-Parent Families in Child Maltreatment Investigations in Ontario in 2003**

	Neglect Investigations	Percentage
Mother as Perpetrator in Two-Parent Families	6,325	91%
Father as Perpetrator in Two-Parent Families	4,857	70%
Total Two-Parent Families	6,913	



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