

Responding to child maltreatment in Canada: Context for international comparisons

BARBARA FALLON, NICO TROCMÉ*, JOHN FLUKE, MELISSA VAN WERT, BRUCE MACLAURIN[†],
VANDNA SINHA*, SONIA HELIE[‡] AND DANIEL TURCOTTE[#]

University of Toronto, Toronto, Ontario, Canada; *McGill University, Montreal, QC, Canada;
[†]University of Calgary, Calgary, AB, Canada; [‡]Centre Jeunesse de Montréal – Institut Universitaire,
Montreal, QC, Canada; [#]Université Laval, Quebec, QC, Canada

ABSTRACT: *The purpose of this paper is to both describe the major findings from the Canadian Incidence Study of Reported Child Abuse and Neglect, 2008 (CIS-2008), and to compare these findings to data reported by Gilbert et al. (2011), who derived their estimates from the US National Child Abuse and Neglect Data System. The CIS-2008 tracked 15,980 maltreatment-related investigations of children under the age of 16 conducted in a representative sample of 112 child welfare organizations across Canada in the fall of 2008. Bivariate analyses were used to explore the differences in service dispositions, age, and referral sources by primary maltreatment category and risk. The Canadian/US comparison reveals that rates of investigated maltreatment are nearly identical. Rates of substantiated maltreatment are also comparable, although slightly higher in Canada when substantiated risk of maltreatment is included in the substantiation category. The variation in substantiation and service response rates across types of investigated maltreatment requires closer analysis and highlights the need for a detailed understanding of each type of maltreatment. The rapid expansion of reports over the last decade in Canada invites discussion of the extent to which a response focused exclusively on child protection is appropriate for all cases and optimal for addressing a broad array of needs. The complexity of comparing rates between Canada and the United States requires an understanding of both substantiation rates and thresholds.*

KEYWORDS: child maltreatment, child welfare, risk assessment, Canada, international comparisons, epidemiology

There is growing debate about the appropriate mix of policies and programs required to respond to concerns about child maltreatment. Child abuse and neglect has important implications for future health and mental health, and it is therefore important to understand the complex links among various forms of maltreatment, child and family factors, contact with the child welfare system, and child welfare service provision. The traditional child protection model, based on mandatory reporting to state authorities charged with investigating maltreatment and determining whether court-ordered interventions are required, is increasingly coming under question (Fallon, Trocmé, & MacLaurin, 2011; Freymond & Cameron, 2006; Gilbert, 1997; Gilbert, Parton, & Skivenes, 2011). Some jurisdictions have introduced differential response approaches that offer more flexible alternatives to investigation-driven mandated services (Merkel-Holguin, Kaplan, & Kwak, 2006; Public Health Agency of Canada [PHAC], 2010; Shusterman, Fluke, Hollinshead, & Yuan, 2005; Waldfogel, 2009). The efficacy

and relevance of mandatory reporting, the cornerstone of the traditional protection model, is being closely examined (Ainsworth, 2002; Gilbert et al., 2009; Melton, 2005). In their recent cross-national review of policies governing responses to child maltreatment, Gilbert et al. (2009) contrast the protection model typical of the United States, Canada and several Australian states, with the broader ‘child and family welfare’ model used in countries where child and family service agencies respond to a wider range of problems, maltreatment reports are not the sole reason for service provision, assessments are conducted by multi-disciplinary teams and reporting is not necessarily mandated by law (Gilbert et al., 2009). In a follow-up study examining trends and variations in maltreatment reports and related indicators in six countries, Gilbert et al. (2011) documented 5–10-fold differences in rates of investigations with no corresponding variation in rates of maltreatment-related injury or violent death. While these sorts of cross-national analyses are a critical first step to evaluating policy response options, differences

in the way statistics are gathered and reported have hampered the development of comparative child welfare policy analysis. Researchers collect data using a variety of methodologies and measures from samples that vary in representativeness, and there is a lack of consistency across jurisdictions in the presentation of maltreatment rates. Canada's provincially regulated child welfare system provides an interesting point of comparison. In most respects, Canada's system resembles the United States' approach: statutes and funding are the responsibility of the provinces and territories, reporting is mandatory, and child maltreatment is the primary entry point for receiving these services. However, Canada has lower child poverty rates, universal health care, and a more extensive network of social programs than the United States (Gornick & Jäntti, 2010). Comparing the results from the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) and the National Child Abuse and Neglect Data System (NCANDS) reveals interesting contrasts between Canada and the United States in rates of reported maltreatment. In 1998 (the first year national Canadian data were available), rates of investigation (21.52 per thousand children) and victimization (9.71 per thousand children) in Canada were lower than those reported in the United States (42.1 per thousand children and 12.9 per thousand children respectively) (Trocmé et al., 2001; US Department of Health and Human Services, 2000). In 2003, the rate of investigation in Canada was comparable to the United States (38.33 versus 45.9 per thousand children). From 1998 to 2003, the rate of victimization in Canada nearly doubled to 18.67 per 1,000 children, while during this same time period, the rate of victimization in the United States slightly declined to 12.4 per thousand children (Trocmé et al., 2005; US Department of Health and Human Services, 2005). The CIS-2003 was only able to include the province of Quebec in overall reporting rates (Trocmé et al., 2005) which has restricted the ability to understand some of the reasons for these differences, as complete national Canadian data were unavailable and a large proportion of Canada's child population resides in Quebec (Trocmé et al., 2005).

One of the explanations for the substantial increase in investigations in Canada between 1998 and 2003 was the dramatic increase in investigations involving exposure to intimate partner violence (IPV) (Black, Trocmé, Fallon, & MacLaurin, 2008; Trocmé et al., 2005). Using data from the CIS-2003, Black and her colleagues noted high rates of substantiation for cases involving exposure to domestic violence, yet few of these cases received child welfare services as a result of the investigation. Prior studies using the CIS have also documented differences in service responses depending on the nature of investigated maltreatment. In their examination of substantiation decisions using CIS-2003 data, Trocmé, Knoke, Fallon, and MacLaurin (2009) reported that maltreatment investigations of sexual abuse and neglect were less likely to be substantiated than those of physical abuse. However, these authors note considerable consistency in the case characteristics that increase the likelihood of substantiation, including housing risks (e.g., transient living situation), caregiver risks (e.g., substance misuse issues), and the presence of physical or emotional harm. Using data from the CIS-2008, an analysis comparing investigations of *future risk* of maltreatment (i.e., no event of maltreatment) to investigations of *events* of maltreatment revealed similar rates of service provision following both types of investigations (Fallon, Trocmé, MacLaurin, Sinha, & Black, 2011). When focusing on cases of emotional maltreatment in the CIS-2008, Trocmé et al. (2011) found that while these cases were substantiated at a lower rate than other types of maltreatment, a higher proportion of emotional maltreatment cases resulted in referrals to specialized services, transfers to ongoing child welfare services, out-of-home placements, and applications to child welfare court. In another study examining service dispositions in the CIS-2008, Jud, Fallon, and Trocmé (2012) reported an increased likelihood of service receipt for cases of substantiated or suspected exposure to IPV and for cases of substantiated risk assessments. The broader child welfare literature also demonstrates that variation in the nature of maltreatment is associated with variation in service dispositions

(e.g., Karski, 1999; Kohl, Edleson, English, & Barth, 2005; Merkel-Holguin et al., 2006; Rossi, Schuerman, & Budde, 1999) as well as the success of these services (e.g., Barber, Delfabbro, & Cooper, 2001; Connell et al., 2006; Webster, Barth, & Needell, 2000).

Although Canada – more specifically the province of Manitoba – was selected as one of the six countries in Gilbert et al. (2011) study, the authors did not have access to national statistics on child maltreatment investigations. International comparisons provide insight into worldwide trends in reported and investigated child maltreatment, and can advance theory and research in the field of child welfare, specifically through analyzing the links among policy approaches, service delivery, and the well-being of children and families in the population. If the goals of the child welfare system are to protect children from maltreatment and respond to the needs of vulnerable families, it is important to assess the contextual and systemic factors that allow child welfare agencies to reach these goals. Using recently released data from the 2008 cycle of the CIS, this paper addresses this gap by: (1) continuing to describe the response to child maltreatment reports in Canada by maltreatment typology (not reported in the CIS-2008 Major Findings Report); and (2) by comparing Canadian rates to those of the United States reported in Gilbert et al. (2011), using data from the CIS-2008 which included detailed data from all provinces and territories.

METHODOLOGY

The Canadian Incidence Study of Child Abuse and Neglect (CIS) is a cyclical survey that has been conducted every five years in Canada since 1998 by the Public Health Agency of Canada and a team of Canadian university-based researchers (PHAC, 2010). In addition to being the only national source of data on the characteristics of maltreatment investigations, the CIS provides a profile of the children and families investigated by child welfare services and documents short-term investigation outcomes including rates of substantiation, applications to court, out-of-home placement and provision of ongoing services. The CIS-2008 tracked 15,980 maltreatment-related investigations of

children under the age of 16¹ conducted in a representative sample of 112 child welfare organizations across Canada in the fall of 2008. Regionalization and annualization weights were applied to generate national estimates of the number of maltreatment-related investigations conducted in 2008 (Trocmé et al., 2010). Because the annualization weights are based on annual case counts that may include more than one investigation per child, the CIS annualized statistics are estimates of investigations, not of investigated children.

Information was obtained directly from child welfare workers using a three-page data collection form describing child, family and investigation-related information that workers routinely gather as part of their investigation. Workers participated in training sessions and also had access to the CIS-2008 Study Guidebook, in order to ensure that the constructs measured on the data collection form were clearly defined and interpreted consistently across Canada. Up to three forms of investigated maltreatment could be documented on the data collection instrument from 32 possible maltreatment codes as defined in the CIS-2008 Study Guidebook (Trocmé et al., 2010). For the purposes of this analysis, the 32 forms were subsumed under five major maltreatment categories: physical abuse; sexual abuse; neglect; emotional maltreatment; and exposure to IPV. Risk of maltreatment was also included as a maltreatment-related category. For each investigation, workers were asked to indicate the level of substantiation. An investigation was *substantiated* if the balance of evidence indicated that abuse or neglect had occurred. An allegation of maltreatment was *suspected* if there was not enough evidence to substantiate maltreatment but maltreatment could not be ruled out. An allegation of maltreatment was *unfounded* if the balance of evidence indicated that abuse or neglect had not occurred. In investigations that did not involve a specific allegation of maltreatment but where risk of future maltreatment was the concern, workers indicated whether there was significant risk of future maltreatment,

¹ Because mandates for investigating maltreatment range across Canada from children under 16 to children under 19, CIS estimates are limited to children under 16.

whether the risk was unknown or whether there was no risk of future maltreatment.

In addition to forms of maltreatment, risk and level of substantiation, workers documented a number of other child, family and investigation-related characteristics. Level of physical harm was documented for all maltreatment investigations, including situations where the maltreatment was unfounded but an unexplained injury may have triggered the investigation. Workers were asked whether the harm required medical treatment. All sources of referral (separate and independent contacts) were noted for each investigation. For the purposes of this article the 19 sources of referral tracked by the CIS were collapsed into nine categories: five professional referral sources (school, police, day care, other child welfare service, community/social/health services); three non-professional referral sources (child, custodial/non-custodial parent, neighbor/friend/relative); and an anonymous or other referral source category.

Workers were also asked to document any child welfare service activities that occurred during the investigation period. This included: (1) whether the family had been previously investigated by child welfare services; (2) whether at the conclusion of the investigation the case would be transferred to ongoing services; (3) whether differential response alternatives were offered in jurisdictions where available (i.e., flexible services customized to specific family situations); (4) whether a court application was made at the end of the investigation; and (5) whether the child had been placed in out-of-home care at any point during the investigation. Out-of-home placement included informal kinship care (arrangements made by the family without any involvement from child welfare authorities), foster care (kinship and non-kinship), and group care or residential treatment. For purposes of comparison to placement rates in the United States, the informal kinship placements were not included in the out-of-home placement count.

Bivariate analyses were used to explore the differences in service dispositions, age, and referral sources by primary maltreatment category and risk. All bivariate analyses tests of significance were completed weighting the estimates back to their original sample size to avoid inflation of the chi-square statistic.

COMPARISON WITH RATES OF MALTREATMENT IN THE US

For comparisons with US maltreatment rates we used the 2008 maltreatment rates reported by Gilbert et al. (2011), who derived their estimates from the 20 states that contributed data to the NCANDS from 2001–2007 (comprising 38% of the total child population). NCANDS data were at the child level and included: information about investigations for child protection (differential response referrals removed); officially recognized (substantiated) maltreatment; officially recognized neglect; officially recognized physical abuse; and out-of-home care for any reason (including kinship) for children investigated for maltreatment (placement at intake is estimated to be two-thirds of all out-of-home care). The results are annual child level estimates, meaning that a child is counted only once for each indicator during a 12 month period (see Gilbert et al. web appendix for further details).

RESULTS

There were an estimated 235,841 child maltreatment-related investigations in Canada in 2008, a rate of 39.16 investigations per 1,000 children (Table 1). Nearly three-quarters of these (74%) involved an investigation of an alleged incident of maltreatment, while the other 26% were assessments of the risk of future maltreatment. In an estimated 62,386 investigations, the primary form of

TABLE 1: TYPE OF INVESTIGATIONS IN CANADA IN 2008[^]

	Number of investigations	%	Rate per 1,000 children
Investigated incident of maltreatment	174,411	74	28.96
Physical abuse	45,047	19	7.48
Sexual abuse	10,172	4	1.69
Neglect	62,386	26	10.36
Emotional maltreatment	15,627	7	2.59
Exposure to intimate partner violence	41,179	17	6.84
Risk investigation only	61,430	26	10.20
Total	235,841	100	39.16

[^]Based on a sample of 15,980 maltreatment-related investigations

investigated maltreatment was neglect (26% of all maltreatment-related investigation), and in another 45,047 investigations, the primary form of investigated maltreatment was physical abuse (19%). In a small proportion of maltreatment-related investigations, the primary form of maltreatment identified was emotional maltreatment (7% or 15,627) or sexual abuse (4% or 10,172). In 17% of maltreatment-related investigations (41,179), the primary form of maltreatment identified was exposure to IPV.

Table 2 presents the levels of substantiation by the primary form of investigated maltreatment, and the subsequent short-term service dispositions made at the conclusion of the investigation. IPV investigations had the highest rate of substantiation, with 71% of IPV investigations being substantiated compared to 48% of emotional maltreatment investigations and 46% of neglect investigations. Slightly over a third of physical abuse investigations (38%) were substantiated, while sexual abuse investigations had the lowest substantiation rate at 26%. Emotional maltreatment investigations and sexual abuse investigations were more likely to have a finding of suspected maltreatment at the conclusion of the investigation. Twenty percent of risk investigations resulted in the worker confirming concerns for future risk of maltreatment. Differences in substantiation rates by maltreatment category were statistically significant ($p < 0.001$). Chi-square analysis does not allow for an understanding of where the significant differences exist, or in other words, which maltreatment categories are significantly different from which other maltreatment categories. Compared to other types of investigations, neglect investigations and, to a lesser extent, emotional maltreatment investigations, lead to more interventions: 33% of neglect investigations and 31% of emotional maltreatment investigations were opened for on-going services; 9% of neglect investigations and 5% of emotional maltreatment investigations lead to a formal placement; and applications for court-ordered interventions were made in 8% of neglect and emotional maltreatment investigations. Physical abuse and sexual abuse investigations were least likely to lead to on-going services (19% and 21%, respectively) while exposure to IPV investigations were least likely

to lead to formal out-of-home placement (under 3%). Few investigations in Canada received a differential service response. Risk investigations were most likely to receive a differential service response (6% of investigations).

Table 3 describes referral source across all types of maltreatment investigations and risk investigations. While the majority of referrals came from professional sources, there was variation among maltreatment-related investigations ($p < 0.001$). In 83% of exposure to IPV investigations, the referral source was a professional; 61% of IPV investigations were referred by the police. Almost half of the physical abuse investigations were referred by the school. In approximately one-third of maltreatment investigations focusing on neglect (33% or 20,325), emotional maltreatment (32% or 5,013), and sexual abuse (33% or 3,350), the referral source was a non-professional. In one-quarter of neglect investigations, the source of referral was a friend, relative or neighbor.

As shown in Table 4, there was significant variation in the primary categories of maltreatment by age group ($p < 0.001$). Investigations of physical abuse, sexual abuse and emotional maltreatment were more likely to involve older children, with 45% of physical abuse, 48% of sexual abuse and 49% of emotional maltreatment investigations involving children 10–15 years of age. In contrast, investigations involving neglect and risk-only assessments were fairly evenly distributed across all age groups, while younger children were disproportionately represented in investigations involving exposure to IPV, with 43% of these investigations involving children under five.

Table 5 describes the physical harm noted for all maltreatment investigations by level of substantiation. Six percent of all maltreatment investigations (10,682 investigations) noted some type of physical injury to the child. Most investigations did not involve harm that required medical treatment. In 4% of unfounded or suspected investigations, physical harm was noted.

NORTH AMERICAN COMPARISONS

Following the table format from the paper by Gilbert et al. (2011), Table 6 compares Canada to the United States, with respect to key child

TABLE 2: SUBSTANTIATION LEVEL AND SHORT-TERM SERVICE DISPOSITIONS IN MALTREATMENT-RELATED INVESTIGATIONS IN CANADA IN 2008[^]

	Physical abuse		Sexual abuse		Neglect		Emotional maltreatment		Exposure to intimate partner violence		Risk investigation		Total ^{***}	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Substantiation level														
Substantiated/confirmed	17,212	38	2,607	26	28,939	46	7,423	48	29,259	71	12,018	20	97,458	41
Suspected/unknown	3,593	8	1,452	14	5,529	9	2,973	19	4,371	11	10,122	17	28,041	12
Unfounded/no future risk	24,241	54	6,114	60	27,918	45	5,231	33	7,548	18	39,289	63	110,342	47
Provision of ongoing services														
Case to stay open for ongoing services	8,715	19	2,115	21	20,438	33	4,856	31	10,909	27	15,682	27	62,715	27
Case to be closed	36,246	81	8,038	79	41,892	67	10,751	69	30,229	74	45,626	73	172,782	73
Provision of differential response services														
Placement status	603	1	120	1	1,818	3	495	3	856	2	3,892	6	7,784	3
Child remained at home	41,850	93	9,166	91	53,494	86	14,192	91	39,207	95	57,969	92	215,878	92
Informal kinship care	1,497	3	586	6	3,204	5	700	5	1,115	3	1,612	4	8,714	4
Foster care (kinship and non-kinship)	1,327	3	319	3	4,758	8	677	4	812	2	1,559	4	9,452	4
Group home and residential/secure treatment	281	1	^^	<1	833	1	^^	<1	^^	<1	215	1	1,432	<1
Child welfare court														
No application to court	43,151	96	9,586	94	57,582	92	14,314	92	39,504	96	58,927	95	223,064	95
Application made	1,886	4	586	6	4,786	8	1,313	8	1,675	4	2,454	5	12,700	5
All investigations	45,047	100	10,172	100	62,386	100	15,627	100	41,179	100	61,430	100	235,841	100

***Difference significant at $p < 0.001$; [^]based on a sample of 15,980 maltreatment-related investigations with information about substantiation and a sample of 15,945 maltreatment-related investigations with information about provision of services; ^^estimate is not reportable, <100 investigations

TABLE 3: REFERRAL SOURCE IN CHILD MALTREATMENT-RELATED INVESTIGATIONS IN CANADA IN 2008[^]

Referral source	Physical abuse		Sexual abuse		Neglect		Emotional maltreatment		Exposure to intimate partner violence		Risk	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Any non-professional referral source***	10,048	22	3,350	33	20,325	33	5,013	32	6,749	16	16,356	27
Custodial and non-custodial parent***	4,821	11	1,984	20	6,532	10	1,753	11	2,632	6	8,891	14
Child***	1,063	2	231	2	287	0	430	3	635	2	961	2
Relative, neighbor, friend***	4,296	10	1,151	11	14,166	23	2,856	18	3,582	9	6,919	11
Any professional referral source***	34,301	76	6,171	61	35,500	57	9,692	62	34,248	83	42,106	69
Community, health, social service***	6,316	14	1,852	18	10,730	17	2,843	18	4,119	10	13,636	22
School***	22,251	49	2,143	21	12,427	20	3,199	20	2,828	7	13,406	22
Other child welfare service***	1,758	4	810	8	3,055	5	969	6	2,589	6	4,674	8
Day care center***	1,047	2	96	1	496	1	^^	0	289	1	482	1
Police***	3,394	8	1,349	13	9,487	15	2,828	18	24,968	61	10,765	18
Anonymous/other referral***	2,095	5	962	9	8,382	13	1,298	8	1,885	5	4,762	8
All investigations	45,047	100	10,172	100	62,386	100	15,627	100	41,179	100	61,430	100

***Difference significant at $p < 0.001$; [^]Based on a sample of 11,807 maltreatment investigations and 4,173 risk investigations with information about referral source; Totals add up to more than 100% because investigations could have more than one referral source; ^^Estimate is not reportable, <100 investigations

TABLE 4: AGE IN CHILD MALTREATMENT-RELATED INVESTIGATIONS IN CANADA IN 2008[^]

Child age group	Physical abuse		Sexual abuse		Neglect		Emotional maltreatment		Exposure to intimate partner violence		Risk		Total***	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
<1 year	1,190	3	-	-	4,913	8	600	4	3,966	10	6,733	11	17,501	7
1-4 years	7,750	17	1,802	18	16,766	27	2,874	18	13,616	33	15,000	24	57,808	25
5-9 years	15,554	35	3,439	34	19,439	31	4,474	29	13,242	32	17,401	28	73,549	31
10-15 years	20,552	45	4,833	48	21,269	34	7,679	49	10,354	25	22,296	36	86,983	37
Total	45,046	100	10,173	100	62,386	100	15,626	100	41,178	100	61,431	100	235,841	100

***Difference significant at $p < 0.001$; [^]based on a sample of 15,980 maltreatment-related investigations

TABLE 5: PHYSICAL HARM IN MALTREATMENT INVESTIGATIONS BY LEVEL OF SUBSTANTIATION IN CANADA IN 2008[^]

	No physical harm		Physical harm/no medical treatment		Physical harm/medical treatment		Total***
Unfounded/suspected investigations	85,326	96%	2,543	3%	1,071	1%	88,940
Substantiated investigations	78,080	92%	4,643	5%	2,415	3%	85,138
Total maltreatment investigations	163,406	94%	7,186	4%	3,486	2%	174,078

***Difference significant at $p < 0.001$; [^]Based on a sample of 11,774 maltreatment investigations with information about physical harm and medical treatment (risk category did not measure physical harm)

TABLE 6: ANNUAL RATES OF CHILD MALTREATMENT INDICATORS (PER 1,000) COMPARING CANADA TO THE UNITED STATES

	Canada (CIS-2008)			United States (NCANDS 2004–2006)		
	<1 year	1–4 years	5–9 years	<1 year	1–4 years	5–9 years
Measures of child maltreatment investigations						
Rate per 1,000 children	51.81	42.73	40.65	53.03	42.02	39.30
Substantiated maltreatment						
Rate per 1,000 children	17.09	15.34	14.90	21.63	13.20	11.39
Substantiated and substantiated risk of maltreatment						
Rate per 1,000 children	24.01	17.55	12.13			
Officially recognized neglect						
Rate per 1,000 children	6.23	5.53	4.83	14.62	9.13	6.89
Officially recognized physical abuse						
Rate per 1,000 children	1.61	1.44	3.14	3.93	1.54	1.94
Out-of-home care						
Rate per 1,000 children	5.02	2.06	1.24	6.31	2.49	1.80

Table format adapted from Gilbert et al. (2011)

maltreatment indicators. For each age category (infants, 1–4 years and 5–9 years), rates of investigation and substantiation are very similar. There is a higher rate of substantiated maltreatment for infants in the United States (17.1 per 1,000 infants versus 21.6 per 1,000 infants), although when the substantiated risk category is included, Canada reports more infants with a verified maltreatment concern (24 per 1,000 infants) than the United States. Rates of officially recognized neglect and physical abuse are higher in the United States than in Canada for every age category, with the exception of verified physical abuse for children 5–9 years of age in Canada (1.94 per 1,000 children versus 3.14 per 1,000 children). In the United States, infants are recognized as victims of neglect at over twice the rate of Canadian infants

(6.23 per 1,000 infants versus 14.62 per 1,000 infants). Rates of placement in out-of-home care are similar, although infants are placed in out-of-home care in the United States more often than in Canada.

DISCUSSION

This analysis presented key findings from the CIS-2008 in order to more fully describe the nature of child maltreatment investigations in Canada in 2008. Neglect is the most often investigated maltreatment type at 26% of investigations, although assessing risk of future maltreatment is also the focus in 26% of investigations. Substantiation rates vary enormously for maltreatment types, with IPV having the highest rate of substantiation at 71% of investigations. As a result, the

rate of victimization attributed to exposure to IPV is identical to the rate of neglect. The most infrequently investigated maltreatment typologies are sexual abuse (10,172 investigations) and emotional maltreatment (15,627 investigations) although the rate of victimization is markedly different. Just over one-quarter of sexual abuse investigations are substantiated compared to just under half of emotional maltreatment investigations.

Differences in rates of investigations for maltreatment typologies compared to victimization rates or substantiation rates should continue to be explored. Rates of documented physical harm continue to be very low (8% of all investigations) and explain very little about the substantiation process. Similarly, although professional referral sources account for 67% of investigations, there are important variations among maltreatment typologies. School and police referrals account for nearly half of all referrals made to the child welfare system in 2008.

Interestingly, an examination of the short-term service dispositions in the CIS-2008 reveals little variation by maltreatment typologies with the exception of neglect and emotional maltreatment. Transfers to ongoing services range from a low of 19% for physical abuse investigations to a high of 33% for neglect investigations. With the exception of neglect where 9% of investigations are likely to result in a formal out-of-home placement, the percentage of out-of-home placements is very similar across other maltreatment typologies. Use of child welfare court is more often reported for neglect and emotional maltreatment typologies (8% of investigations, respectively), but an application to child welfare court is made in only 5% of all investigations. The relationship between investigations, substantiation and service decisions and their nested relationship is an important area for future research.

Over the past 10 years, rates of victimization have been documented as considerably higher in Canada than the United States (Fallon et al., 2010). The Canadian/United States comparison in this analysis reveals some surprising findings. Rates of investigated maltreatment for each of the three age groups examined are nearly identical. Rates of substantiated maltreatment are also comparable, although slightly higher in Canada when substantiated risk

of maltreatment is included in the substantiation category. The inclusion of the risk category in the CIS-2008 complicates the comparison to overall incidence rates, but it is likely that investigations focusing not on specific events of maltreatment, but on assessing future risk of maltreatment may be reflected in the overall rates reported in the United States. Indeed, the National Incidence Study of Reported Child Abuse and Neglect included caregiver functioning concerns such as substance abuse and mental health in their forms of emotional maltreatment (Sedlak et al., 2010). These concerns were typical of a risk-only investigation in the CIS-2008 (Fallon et al., 2011).

When comparing the countries directly, the ability to unduplicate children should be considered. Data from NCANDS represent child-based counts, whereas data from the CIS contain some duplication in the annualization weight (children re-referred in the calendar year are included in the yearly count of investigations) although the three month sample used to calculate the estimate is unduplicated. Based on the estimated duplication rate in the 2008 NCANDS data of 10%, Canadian rates of investigated *children* may be approximately 10% lower than the child maltreatment investigation unit of analysis used in the CIS.

Gilbert and colleagues illustrated (see Table 1 in the 2011 article) that the Canadian population fares better than the United States population across a variety of economic, health and social indicators. For example, in 2008, the rate of child poverty in Canada was 15.1% versus 21.6% in the United States (OECD), the Gini coefficient of income inequality was 0.32 in Canada versus 0.38 in the United States and the rate of spending on health expenditures was 70.4% in Canada versus 46% in the United States (for more information see the Organization for Economic Cooperation and Development²). Given these social and economic differences, and yet a similar approach to child protection, one would expect to see dramatically lower rates of investigations and victimization in Canada than the United States. Although IPV is identified at a much higher rate in Canada than the United States (Fallon et al., 2011), there is evidence that there are

² www.oecd.org

different thresholds for investigations which will be the subject of future analyses by the study's authors.

LIMITATIONS

Data collected using the CIS-2008 instrument are not independently verified and represent the clinical judgments of the investigating worker. The data reflect only the findings from the first 4–6 weeks of an investigation. The CIS does not account for possible fluctuations in seasonal variation in maltreatment typology. Several factors limit the comparability of the data from Canadian and US sources. As Gilbert et al. (2011) note, it is important to consider the specificity of the maltreatment indicators, the timeframe of data collection, and the impact of policy changes. The comparisons presented in this study represent slightly different time-frames.

CONCLUSION

As is often the case with descriptive data, the profile of child maltreatment investigations presented in this article raises more questions than answers. Three general lines of inquiry emerge from the data presented in this article. First, the variation in substantiation and service response rates across forms of investigated maltreatment requires closer analysis: exposure to IPV having the highest substantiation rate (71%); sexual abuse the lowest (26%); while neglect had the highest ongoing service rate (33%); and physical abuse the lowest (19%). These differences limit the extent to which one can describe a single approach, and point to the importance of examining in more detail the child welfare response to each form of maltreatment. Second, given the rapid expansion of reports over the last decade, questions arise with respect to the extent to which a child protection response is appropriate for all cases. Less than half of the estimated 235,841 child maltreatment-related investigations conducted across Canada in 2008 were substantiated, a little over a quarter were opened for on-going services, and physical harm, possibly due to maltreatment, was documented in only 6% of investigations, less than a quarter of these situations being severe enough to require medical attention. While there has been some movement toward differential response options, the vast majority of these reports continue to be addressed through

a forensically focused investigation that may not be optimal for addressing a broader array of needs. Third, the complexity of comparing rates between Canada and the United States points to the importance of analyzing differences in more detail, both with respect to the forms of maltreatment covered under different mandates as well as the thresholds for substantiating maltreatment.

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