A commentary on national child maltreatment surveillance systems: Examples of progress

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This commentary addresses country surveillance systems drawn from the experience of professionals engaged in developing, implementing, and analyzing sector specific response data regarding child maltreatment as participants in the International Society for the Prevention of Child Abuse and Neglect’s Working Group on National Child Maltreatment Data Collection (WG). In this issue of Child Abuse and Neglect several more detailed descriptions of surveillance systems are provided. In contrast the purpose of this commentary is to briefly suggest the range, status and goals through ten examples based on systems across several countries.

National programs of child maltreatment surveillance tend to be of two sorts; those that capture data about specific behaviors known to place children at risk of maltreatment; and those that describe children and families who have come to attention of social services or legal authorities. Ideally both types of data are collected and analyzed because they help countries fill out the range of country specific policy imperatives from prevention to intervention. Roles for the systems include raising societal awareness, optimizing use of resources, and monitoring overall progress toward policy goals. Finally, both types of systems have applicability in addressing their obligations under the UN Convention on the Rights of the Child (CRC). In particular, the UN Committee on the implementation of the CRC views data as a key tool in its monitoring efforts. Sector specific surveillance data based on programs of intervention, the topic of this commentary, has many other applications as well.

For purposes of this paper we define a national sector specific child maltreatment data collection system as one that is based on information recorded as part of an intervention addressing child maltreatment. Sometimes these are referred to as administrative or operational data. Since child maltreatment responses are multi-faceted, data can be collected in the context of any number of sectors, but most often these are social, health, and judicial services. Depending on the country, often one sector is deemed to have the primary authority for addressing matters of child maltreatment, and consequently data are obtained through the operations of that sector. Most of the examples presented here are based on data obtained from the social services sector.

The country examples that follow are not meant to be representative of the global status of these systems, but rather a self-selected scan. The process for selecting the countries included here is based on communications among countries that are currently participating in the International Society for Prevention of Child Abuse and Neglect’s (ISPCAN) Working Group on National Child Maltreatment Data Collection (WGCMC), a network of individuals who are addressing the collection and
analysis of child maltreatment data in their respective countries. While not representative the authors do share a common commitment to the improvement of the data collection picture globally and to be as inclusive as possible with respect to regions of the world.

Some countries have been collecting and analyzing such data for decades. Many countries are in the process of developing more formalized systems of sector specific data collection. Likewise, several of the examples describe systems that are first steps toward comprehensively national coverage. All are attempting to improve their systems. The country examples are organized alphabetically within sectors (social service, health, and judicial) in an effort to help the reader understand the data collection context.

**Social service sector**

**Australia**

Since 1993, the Australian Institute of Health and Welfare (AIHW) has worked closely with the states and territories to undertake national reporting of child protection data. The AIHW is Australia’s national statistical agency for health and welfare related information. At present, aggregate level administrative child protection data are collected on an annual basis in four areas:

- Notifications, investigations and substantiations.
- Children on care and protection orders.
- Children in out-of-home care.
- Intensive family support services.

The data are published annually in two key national reports—*Child protection, Australia* published by the AIHW and the *Report on Government Services* by the Australian Government Productivity Commission. Child Protection information is used by governments and researchers to inform and analyze the development of policy and practice. Over the next few years, the AIHW will be working with the states and territories to develop a unit record (child) level collection, with the aim of replacing the current aggregate level collection.

**Belgium**

**Flemish Dutch speaking region.** Although the Flemish government is creating opportunities to set up a Regional Child Observatory for the Prevention of Child Maltreatment, at this point in time there is no national data collection program in the Flemish region. However, a regional data collection has been in existence since 1991, but it is mainly based on the cases on children who are reported and referred to one of the six Confidential Child Abuse Centers for alleged child maltreatment Flemish and Brussels region and is called *Reports at the Confidential Child Abuse Centers*. Information is collected and reported about the family, child characteristics, first impressions of the referral service that refers to the confidential child abuse center, steps to be taken in taking care of the child(ren), whether or not the case is (to be) referred to court, child and family functioning, considerations made during the diagnostic process, and conclusion about whether it is a substantiated case of child maltreatment.

In the near future, January 2011 at the latest, the Child and Family Agency will have developed, together with the confidential child abuse centers, a central electronic database to be used by all social workers in their team. It will make registration and reporting of all cases referred both more uniform and efficiently accessible. Of course, all legislation is addressing the privacy of the families and children.

Data are published yearly in a brief report, edited by Child and Family Agency of the Flemish government in Brussels. The information reported in this yearly publication is used for setting priorities for planning, policy development and resource allocation.

Obviously there are some problematic obstacles to comprehensive data collection throughout Belgium. For one, there are contradictions within legislation. The three communities—the Wallonian, the German and the Flemish community—have their own parliament and their own government and their own jurisdiction in education matters, as well as cultural and individual matters (e.g., youth care, school and family welfare). On the other hand, the Belgian Federal government and parliament stay responsible for health care, justice, internal affairs *(Bursens, 2002)*. This uncertain and complex Belgian political context makes it very difficult to coordinate with all social services and magistrates who are considering and dealing with alleged child maltreatment. Both regional and federal policy makers have responsibility for child maltreatment.

**Canada.** A unique child maltreatment surveillance program was established by the Public Health Agency of Canada (PHAC) and provincial and territorial governments with the advent of the *Canadian Incidence Study of Reported Child Abuse and Neglect (CIS)* in 1998. The data are gathered every five years from child protection workers across the country on children who are reported and investigated for alleged child maltreatment by child welfare. In addition to child maltreatment data, information was collected about family and child characteristics, child functioning, emotional and physical harm experienced by the maltreated children and short-term service outcomes *(Trocmé et al., 2005)*.
The child maltreatment surveillance data are collected to support decision-makers in setting priorities for planning, policy development and resource allocation primarily in child protection but also in the health and education sectors (Jack et al., 2009). The CIS has already had an impact on policy development and it is anticipated that the effects will increase, as more cycles of the study are implemented and analyzed. Among other areas, the data have addressed the following:

- Informed professional practice in child welfare across Canada (McCourt, 2004).
- Used to challenge discrepancies in funding between indigenous and mainstream child welfare agencies (Tonmyr, Jack, Brooks, Kennedy, & Dudding, 2008).
- Provided evidence for secondary information products that have increased public awareness and understanding of child maltreatment.
- Supplied a resource for enhancement/innovations in other sectors such as university and high school education (McCourt, 2004).
- Contributed to the international knowledge base including support of Canada’s participation in the Convention on the Rights of the Child (Tonmyr & Doering, 2003).

Researchers can apply for access to the data for analysis through PHAC.

**England.** The child protection statistical return includes data on the number of children who are the subject of a child protection plan in all 150 Local Authorities. There are four major categories of abuse and neglect—physical, sexual, emotional and neglect. The time period between which these data are collected is April 1 and March 31. The collection uses a template which is completed by local authority statistics section and uploaded to a secure website belonging to the responsible government department—the Department for Children, Schools and Families (DCSF). The same data collection has been repeated annually since 1988 (DCSF, 2008).

The data collected about children who are the subject of child protection concerns follow the processes set out in the Government’s inter-agency guidance *Working Together to Safeguard Children* (www.dcsf.gov.uk/rsgateway/DB/SFR/s000811/index.shtml). They begin with a referral to the Local Authority through to the point where the child ceases to be the subject of a child protection plan (previously this was referred to as the child’s name being removed from the child protection register). Government statisticians meet regularly with LA representatives to review the data items collected and their utility, as well as to propose changes to future data collections. These changes will have been agreed with policy colleagues. They reflect changes in legislation, guidance and policy and also those requested by local authorities. Thus, making changes to national data collections is an iterative process involving statisticians, policy makers and local authorities.

Government statisticians aim to ensure the data are ready for publication in a timely manner. Trend data is reported and commented upon. This is particularly useful for policy makers, particularly if the findings are related to policy changes.

The resulting statistical publications provide:

- feedback to Local Authorities to inform their service planning and delivery;
- data for policy makers;
- information for use in assessing the performance of Local Authorities;
- information for use by those involved in research and evaluation.

**New Zealand.** New Zealand has a wide range of high quality information that is used to inform social work practice, understand life course pathways and factors contributing to outcomes for children, understand demand for child abuse services and assist with wider sector planning. In 2000 New Zealand introduced a comprehensive electronic social work practice database (CYRAS) which provides administrative Youth Justice and Child Protection practice focused information. New Zealand has recently improved data analysis capability and technology and built a comprehensive child and needs focused model of demand. Data is published annually in New Zealand in the:

- Ministry of Social Development Social Report,
- and for the first time this year in the Ministry of Social Development Annual Statistical Report.

New Zealand has also invested in longitudinal research through the internationally recognized “Dunedin Study” which provides a rich source of information on child abuse, the causes of antisocial behavior and resulting life course outcomes. Projects of particular interest from a child protection context will be research into the relationship between genetic and environmental factors, and how they interact to predispose people to conditions like hyperactivity, violence and alcoholism. A parenting study is also underway looking at how the study members themselves nurture their own children. [Source Dunedin Study Web site: http://dunedinstudy.otago.ac.nz/index.html].

**United States.** The National Child Abuse and Neglect Data System (NCANDS) data collection program collects data on based on all reported child maltreatment. The US has a mandatory reporting system. NCANDS began collecting data in 1988 and its first report was published in 1990. Data are collected from child protective service (CPS) agencies in all 50 states, the District...
of Columbia, and Puerto Rico. These data are collected annually and cover October 1st to September 30th. Data consist of aggregate state-wide and child-specific case level information (USDHHS, 2009).

NCANDS data are used for a wide range of purposes, including the comprehensive annual report Child Maltreatment (http://www.acf.hhs.gov/programs/cb/stats_research/index.htm#can), published by the federal government and findings are selectively published in other federal documents. Other key uses include:

- Development and monitoring of outcome measures related to child safety (recurrence of maltreatment, maltreatment in foster care) as part of the Child and Family Service Reviews (CFSR) conducted by the federal government.
- Constructing sampling frames and supplementary analysis for other related federal data collection programs.
  - National Incidence Study (NIS)
  - National Study on Child and Adolescent Wellbeing (NSCAW)
- Data are also available in other federal documents including
  - U.S. Census Bureau, Statistical Abstract of the United States http://www.census.gov/compendia/statab/
  - Centers for Disease Control and Administration for Children and Families, Nonfatal Maltreatment of Infants—United States, October 2005–September 2006 http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5713a2.htm
- Data are available for secondary analyses through the National Data Archive on Child Abuse and Neglect (NDACAN) and have been used to support a wide range of studies

**Justice sector**

**Lebanon**

The child maltreatment [CAN and VAC] surveillance is based on disclosures and referral cases to courts of justice. This process is based on the presence of courts and offices for children in the 6 regions of Lebanon. The agency that runs the program, instituted in 1936, has been contracted to do so by the Ministry of Justice since 2002. The data are gathered every year from child protection workers across the country on children who are reported and investigated for alleged child maltreatment by child welfare. In addition to child maltreatment data, information is collected about family. Little information is however collected about child characteristics, child functioning, emotional harm experienced by the maltreated children, short-term physical or mental consequences or about service outcomes.

Many obstacles to data collection are due to discrepancies in definitions, recognition and cultural understanding of CAN, as well as exposure to armed conflicts. Therefore, there are competences to be developed within the professional sectors, in terms of skills, capacities and knowledge, leading to disclosures, referrals and networking as well as evidence-based approaches.

Obstacles to comprehensive data collection are: absence of – or contradictions in – legislation, access of children to health care facilities, organizational contexts that are physically not secure, burnout of – and threats to – professionals, and even discrimination. Furthermore, there are no national independent structures for child rights monitoring and no Child Helpline.

Past efforts have addressed the following:

- The evidence base for professional and multidisciplinary practice in child maltreatment (Gerbaka, 2006).
- Comparative studies on Lebanese laws and their compliance with the CRC.
- Increasing public awareness and understanding of child maltreatment.
- A resource for reducing corporal punishment.
- Field testing of the I-CAST and implementation of the Child Instrument.

**Health services**

**Philippines**

The Child Protection Management Information System is designed to reflect standard practice in the University of the Philippines PGH Child Protection Unit in a user-friendly way while ensuring data accuracy through the use of built-in mandatory fields and safeguards. Measures to ensure patient confidentiality and data security are integral features of the system. The information system has the capacity to track common patients and perpetrators as well as a scheduler system for tracking patient visits and appointments.

Research capability is enhanced through the availability of programmed queries. The data can also be saved in a format that can be used in with statistical software. The CPMIS has the facility to aggregate data from other units to obtain a comprehensive picture of the child abuse and child protection situation in the Philippines.

Although based in the health care sector the CPMIS has modules for use of the following members of the multidisciplinary child protection team:
Several Child Protection Units (CPUs) in the Philippines are in the process of installing the CPMIS into their system. The vision is to have all CPUs in the country connected to a centralized database. The goal, once fully implemented, is to have a national surveillance system that will provide ongoing systematic collection, analysis, and interpretation of child maltreatment data for the use in the planning, implementation and evaluation of the services included in the care continuum for child abuse and neglect.

Health and social services

Saudi Arabia

A National Family Safety Registry (NFSR) was established in Saudi Arabia by the Saudi National Family Safety Program in 2009. The web-based application provides electronic forms designed and implemented to accept Child Abuse and Neglect case demographics, abuse patterns and short-term services outcomes. Registered users in 38 Hospital-based Child Protection Centers across the country had hands-on training on accessing the secured registry system, electronic data entry and modification, and utilization of the application search engine. Different reports can be generated through the system showing the number of cases using dimensions such as age or gender. Also, it generates charts in order to display the distribution of data in graphical form.

The annual report of the analyzed registry data will provide evidence-based knowledge about the magnitude and characteristics of child maltreatment presenting to the health sector. Eventually, these data will support decision-makers in strategic planning and policy development. Moreover, the reports based on registry data will assist in developing awareness campaigns and designing professional capacity building training programs. Also, the registry data can be utilized to promote research in the field serving as a national data collection tool. In the future, the registry will be expanded to accommodate multi-sectoral data (e.g., social welfare, education, and law enforcement facilities). Development of the national registry meets the recommendations of the United Nations Secretary General Study on Violence Against Children, and its outcome support the active participation of Saudi Arabia in the Convention on the Rights of the Child. The data collection program has supported the following efforts:

- The United Nations Secretary General Study on Violence Against Children, 2006.
- Child Helpline, since 2008.
- Child Observatory, since 2007.
- Definitions of CAN in the provisions of law, 2009.

Sector undetermined

Germany

In contrast to many other countries, Germany so far refrains from collecting data on child maltreatment at a national level. In a recently performed national child health survey the assessment of exposure to abuse and neglect and potential harmful consequences of traumatisation were excluded. Considering the specific German history during Nazi times, there are multiple concerns against systematic data collection by the authorities, and many child welfare workers and healthcare professionals are reluctant or not sufficiently trained in collecting data by means of standardized instruments or procedures. Germany has neither mandatory reporting nor is there an established collaboration between the child welfare system and the healthcare system. Many professionals fear that assessment and data collection might be harmful by stigmatizing families rather than helpful for children in danger. Further obstacles against national data collection programs are due to relatively strict data protection laws and the responsibility of communities to guarantee child protection. More educational efforts and political initiatives are needed to establish an understanding among German professionals and child welfare policy makers that data collection and analyses on a national level might be useful to improve child protection and to allocate resources where they are needed.
Conclusion

The 10 data system examples presented in this commentary give some sense of the range of developmental stage, capacity, and comprehensiveness of coverage of the systems. The example from Germany also illustrates a situation where social and political constraints may slow or prevent the development of a system, despite the recognition of child maltreatment as an important concern. Of these examples, six of the systems are maintained within the social service sector, and the combined health and social service sector framework identified in Saudi Arabia may push the number toward seven.

The availability of social service sector data related to child maltreatment may also require an antecedent through the development of a reasonably well resourced and systematically organized social service sector engaged in the delivery of services throughout the country. In the absence of such a system of service delivery, countries may face greater challenges in developing corresponding administrative systems. In countries with fragile social service sectors, health or judicial sector services may offer a more feasible starting point for developing a data system.

In the future, general improvements such as the implementation of standard instruments for assessment, case definition, and documentation should be addressed more effectively by systems in order to improve the validity and usefulness of data aggregated on a national level. The relative feasibility of implementing such methods within and across different systems of service delivery is an important precondition for acceptance of these as standard procedures in routine data gathering. The international discussion of the experience with different approaches within the WG, considering culture specific aspects within each country, might help to improve the impact of national data systems on the development of child protection services.

It is also interesting to note that in fulfilling their expectations data collection programs in operation over an extended period of time are supporting many important policy and research related analyses. The level of utilization is likely to be based on a combination of gradual improvements in data quality and availability over an extended period of time as well as an understanding of how use of the systems can help to improve policy. Further, the capacity to enhance the value of such systems within countries is already being improved through increased global communication and dialogue.

References

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