



Hospital Referrals for Child Maltreatment-Related Concerns to the Ontario Child Welfare System in 2018

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Introduction

The Ontario Incidence Study of Reported Child Abuse and Neglect 2018 (OIS-2018)¹ is the sixth provincial study to examine the incidence of reported child maltreatment and the characteristics of children and families investigated by child welfare authorities in Ontario. Hospitals represent an important referral source to child welfare, particularly for young children who are less likely to interact with other formal societal structures such as schools.² During the COVID-19 pandemic, hospitals might be an especially important referral source as other social and educational services, including schools and daycares, are closed. On the other hand, families might be less likely to seek medical care during this time, and hospital personnel, like other professional referral sources, may be less able to identify children at risk of child maltreatment-related concerns. To better appreciate the nature of cases that are usually detected by hospitals and brought to the attention of child protection services, this Information Sheet describes the context and outcomes of hospital referrals to child welfare authorities in Ontario in 2018, including: the nature of the concern, functioning concerns for the primary caregiver, household income source, child age categories, child functioning concerns, referrals made to internal or external services at the conclusion of the investigation, and provision of ongoing services.

Findings

An estimated 158,476 children 0-17 years of age were referred for a child maltreatment-related concern to a child welfare authority in Ontario in 2018. Six percent of these investigations, or an estimated 8,884 child maltreatment-related investigations, were the result of a hospital referral.

¹ Fallon, B., Filippelli, J., Lefebvre, R., Joh-Carnella, N., Trocmé, N., Black, T., ... Stoddart, J. (2020). Ontario Incidence Study of Reported Child Abuse and Neglect-2018 (OIS-2018). Toronto, ON: Child Welfare Research Portal.

² Fallon, B., Filippelli, J., Joh-Carnella, N., Miller, S., & Denburg, A. (2019). Trends in investigations of abuse or neglect referred by hospital personnel in Ontario. *BMJ Paediatrics Open*, 9(3), e000386. doi:10.1136/bmjpo-2018-000386

Hospital-referred child maltreatment-related investigations were most likely to be focused on assessing risk of future maltreatment for the child, rather than assessing a particular incident or incidents of alleged maltreatment. Fifty-nine percent of child maltreatment-related investigations referred by hospitals were for concerns of risk of future maltreatment (an estimated 5,275 investigations). Sixteen percent of hospital-referred investigations were for neglect, 12 percent focused on exposure to intimate partner violence, seven percent were for concerns of physical abuse, three percent were for emotional maltreatment, and two percent were focused on a concern of sexual abuse. See Table 1.

Overall, in 39 percent of child maltreatment-related investigations referred by hospitals, the investigating worker substantiated maltreatment or indicated that the child was at significant risk of future maltreatment. Emotional maltreatment investigations were most likely to be substantiated (65 percent or an estimated 198 investigations). Hospital-referred investigations for sexual abuse were least likely to be substantiated; only 28 percent of these investigations were substantiated. See Table 1.

Table 1.
Primary Concern and Substantiation of Concern in Hospital-Referred Child Maltreatment-Related Investigations in Ontario in 2018

| Primary Concern | All Investigations | Percent of Hospital-Referred Investigations | Substantiated Investigations | Percent Substantiation |
|---|---------------------------|--|-------------------------------------|-------------------------------|
| Physical Abuse | 631 | 7% | 231 | 37% |
| Sexual Abuse | 185 | 2% | - | 28% |
| Neglect | 1,389 | 16% | 746 | 54% |
| Emotional Maltreatment | 303 | 3% | 198 | 65% |
| Exposure to Intimate Partner Violence | 1,101 | 12% | 663 | 60% |
| Risk of Future Maltreatment | 5,275 | 59% | 1,580 | 30% |
| Total Hospital-Referred Investigations | 8,884 | 100% | 3,470 | 39% |
| Based on a sample of 441 hospital-referred investigations with information on the primary concern of the investigation. Percentages of hospital-referred investigations are column percentages, and percentages of substantiation are row percentages. Columns may not add to totals due to rounding. | | | | |
| - Estimate was <100 investigations | | | | |

Sixty-eight percent of hospital-referred child maltreatment-related investigations involved a primary caregiver with at least one risk factor noted by the investigating worker. The most frequently noted risk factors were mental health issues (noted in 41 percent of hospital-referred investigations, or an estimated 3,665 investigations); few social supports (noted in 32 percent of hospital-referred investigations, or an estimated 2,834 investigations); and victim of intimate partner violence (noted in 29 percent of hospital-referred investigations, or an estimated 2,572 investigations). See Table 2.

Table 2.

Primary Caregiver Risk Factors in Hospital-Referred Child Maltreatment-Related Investigations in Ontario in 2018

| Primary Caregiver Risk Factor | Estimate | Percent |
|--|-----------------|----------------|
| Alcohol Abuse | 1,008 | 11% |
| Drug/Solvent Abuse | 1,697 | 19% |
| Cognitive Impairment | 520 | 6% |
| Mental Health Issues | 3,665 | 41% |
| Physical Health Issues | 603 | 7% |
| Few Social Supports | 2,834 | 32% |
| Victim of Intimate Partner Violence | 2,572 | 29% |
| Perpetrator of Intimate Partner Violence | 484 | 5% |
| History of Foster Care/Group Home | 754 | 9% |
| At Least One Noted Primary Caregiver Risk Factor | 6,052 | 68% |
| Total Hospital-Referred Investigations | 8,868 | 100% |
| Based on a sample of 440 hospital-referred investigations with information about primary caregiver risk factors. Percentages are column percentages. Columns may not add to totals because multiple or no caregiver risk factors could be noted. | | |
| This question was not applicable for a sample of one hospital-referred investigation in which the youth was living independently. | | |

In 45 percent of child maltreatment-related investigations referred by hospital personnel, the household's primary income source was from full-time work. In an additional 32 percent of these investigations, the household relied on social assistance, employment insurance, or another form of benefit as their primary source of income. See Table 3.

Table 3.

Household Income Source in Hospital-Referred Child Maltreatment-Related Investigations in Ontario in 2018

| Household Income Source | Estimate | Percent |
|---|-----------------|----------------|
| Full-Time | 3,995 | 45% |
| Part-Time/Seasonal/Multiple Jobs | 1,206 | 14% |
| Social Assistance/Employment Insurance/Other Benefit | 2,886 | 32% |
| Unknown | 281 | 3% |
| None | 516 | 6% |
| Total Hospital-Referred Investigations | 8,884 | 100% |
| Based on a sample of 441 hospital-based investigations with information about household income source. Percentages are column percentages. Columns may not add to totals because of rounding. | | |

Nearly one quarter of investigations referred by hospitals involved infants less than one year of age (an estimated 2,032 investigations). See Table 4. Comparatively, infants represented only five percent of the overall estimate of child maltreatment-related investigations conducted in Ontario in 2018.³

³ Fallon, B., Filippelli, J., Lefebvre, R., Joh-Carnella, N., Trocmé, N., Black, T., ... Stoddart, J. (2020). Ontario Incidence Study of Reported Child Abuse and Neglect-2018 (OIS-2018). Toronto, ON: Child Welfare Research Portal.

Table 4.

Child Age in Hospital-Referred Child Maltreatment-Related Investigations in Ontario in 2018

| Child Age Category | Estimate | Percent |
|--|-----------------|----------------|
| <1 Year | 2,032 | 23% |
| 1-3 Years | 1,651 | 19% |
| 4-7 Years | 1,515 | 17% |
| 8-11 Years | 1,337 | 15% |
| 12-15 Years | 1,797 | 20% |
| 16-17 Years | 552 | 6% |
| Total Hospital-Referred Investigations | 8,884 | 100% |
| Based on a sample of 441 hospital-referred investigations with information about child age. Percentages are column percentages. Columns may not add to totals because of rounding. | | |

Referrals to internal or external services were made in nearly half of the investigations referred from hospital sources. The referrals most frequently made were to: parent education or support services (made in 21 percent of hospital-referred investigations, or an estimated 1,844 investigations); psychiatric/mental health services (made in 19 percent of hospital-referred investigations, or an estimated 1,716 investigations); and family or parent counselling (made in 15 percent of hospital-referred investigations, or an estimated 1,306 investigations). See Table 5.

Table 5.

Five Most Frequently Made Service Referrals in Hospital-Referred Child Maltreatment-Related Investigations in Ontario in 2018

| Service Referral | Estimate | Percent |
|--|-----------------|----------------|
| Parent Education or Support Services | 1,844 | 21% |
| Psychiatric/Mental Health Services | 1,716 | 19% |
| Family or Parent Counselling | 1,306 | 15% |
| Drug/Alcohol Counselling or Treatment | 715 | 8% |
| Intimate Partner Violence Services | 581 | 7% |
| At Least One Service Referral Made | 4,201 | 47% |
| Total Hospital-Referred Investigations | 8,884 | 100% |
| Based on a sample of 441 hospital-referred investigations with information about referrals to services. Percentages are column percentages. Columns may not add to totals because of rounding. | | |

Thirty-six percent of hospital-referred investigations were transferred to ongoing services at the conclusion of the investigation (an estimated 3,216 investigations). The remaining 64 percent of cases (an estimated 5,668 investigations) were closed after the initial investigation. See Table 6. Overall in Ontario, 20 percent of cases were kept open after an investigation for the family to receive ongoing services.⁴

⁴ Fallon, B., Filippelli, J., Lefebvre, R., Joh-Carnella, N., Trocmé, N., Black, T., ... Stoddart, J. (2020). Ontario Incidence Study of Reported Child Abuse and Neglect-2018 (OIS-2018). Toronto, ON: Child Welfare Research Portal.

Table 6.

Provision of Ongoing Services in Hospital-Referred Child Maltreatment-Related Investigations in Ontario in 2018

| Provision of Ongoing Services | Estimate | Percent |
|--|-----------------|----------------|
| Case to Stay Open for Ongoing Services | 3,216 | 36% |
| Case to be Closed | 5,668 | 64% |
| Total Hospital-Referred Investigations | 8,884 | 100% |
| Based on a sample of 441 hospital-referred investigations with information about provision of ongoing services. Percentages are column percentages. Columns may not add to totals because of rounding. | | |

Methodology

The OIS-2018 used a multi-stage sampling design to select a representative sample of 18 child welfare agencies across Ontario and then to sample cases within these agencies. Information was collected directly from child protection workers on a representative sample of 7,590 child protection investigations conducted during a three-month sampling period in 2018. This sample was weighted to reflect provincial annual estimates. After two weighting procedures were applied to the data, the estimated number of maltreatment-related investigations (i.e., maltreatment and risk-only investigations) conducted in Ontario in 2018 was 158,476.

For maltreatment investigations, information was collected regarding the primary form of maltreatment investigated as well as the level of substantiation for that maltreatment (substantiated, suspected, or unfounded). Thirty-three forms of maltreatment were listed on the data collection instrument, and these were collapsed into five broad categories: physical abuse (e.g., hit with hand), sexual abuse (e.g., exploitation), neglect (e.g., educational neglect), emotional maltreatment (e.g., verbal abuse or belittling), and exposure to intimate partner violence (e.g., direct witness to physical violence). Workers listed the primary concern for the investigation and could also list secondary and tertiary concerns.

For each risk investigation, workers determined whether the child was at risk of future maltreatment. The worker could decide that the child was at risk of future maltreatment (confirmed risk), that the child was not at risk of future maltreatment (unfounded risk), or that the future risk of maltreatment was unknown.

Workers were asked about concerns related to caregiver risk factors and child functioning concerns. Where applicable, the reference point for identifying these concerns was the previous six months. This information only documents problems that were known to investigating child welfare workers. Workers were asked to indicate problems that had been confirmed by a diagnosis, directly observed by the investigating worker or another worker, and/or disclosed by the caregiver or child, as well as issues that they suspected were problems but could not fully verify at the time of the investigation.

Workers were asked to provide information on various other aspects of their investigations, including the characteristics of the household, caregivers, and children; history of previous child

welfare case openings; and short-term child welfare service dispositions, including referrals made to internal and external services and provision of ongoing services.

Limitations

The OIS collects information directly from child welfare workers at the point when they completed their initial investigation of a report of possible child abuse or neglect, or risk of future maltreatment. Therefore, the scope of the study is limited to the type of information available to them at that point. The OIS does not include information about unreported maltreatment nor about cases that were investigated only by the police. Also, reports that were made to child welfare authorities but were screened out (not opened for investigation) were not included. Similarly, reports on cases currently open at the time of case selection were not included. The study did not track longer-term service events that occurred beyond the initial investigation.

Three limitations to the estimation method used to derive provincial annual estimates should also be noted. The agency size correction uses service volume as a proxy for agency size; this does not account for potential variation in investigations across agencies. The annualization weight corrects for seasonal fluctuation in the volume of investigations, but it does not correct for seasonal variations in types of investigations conducted. Finally, the annualization weight includes cases that were investigated more than once in the year as a result of the case being re-opened following a first investigation completed earlier in the same year. Accordingly, the weighted annual estimates represent the child maltreatment-related investigations, rather than investigated children.

Comparisons across OIS reports must be made with caution. The forms of maltreatment tracked by each cycle were modified to take into account changes in investigation mandates and practices. Comparisons across cycles must, in particular, take into consideration the fact that the OIS-2008 was the first to explicitly track risk-only investigations.

Suggested Citation: Joh-Carnella, N., Vandermorris, A., Lefebvre, R. & Fallon, B. (2020). Hospital Referrals for Child Maltreatment-Related Concerns to the Ontario Child Welfare System in 2018. CWRP Information Sheet #201E. Toronto, ON: Canadian Child Welfare Research Portal.