


ONTARIO INCIDENCE STUDY OF REPORTED CHILD ABUSE AND NEGLECT — 2018

MAJOR FINDINGS

Barbara Fallon, Joanne Filippelli, Rachael Lefebvre, Nicolette Joh-Carnella, Nico Trocmé, Tara Black, Bruce MacLaurin, Sonia Hélie, Yves Morin, John Fluke, Bryn King, Tonino Esposito, Delphine Collin-Vézina, Kate Allan, Emmaline Houston, Maria Harlick, Nicole Bonnie, Krista Budau, Deborah Goodman, Mark Kartusch, Tina Malti, Brenda Moody, Jolanta Rasteniene, Henry Parada, Kenn Richard, Kate Schumaker, Theresa Stevens, and Jill Stoddart*

**Subsequent authors are listed alphabetically.*



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The Ontario Incidence Study of Reported Child Abuse and Neglect – 2018 (OIS-2018) reflects a truly provincial effort by a group of child welfare service providers, researchers, and policy makers committed to improving services for children and families who are served by Ontario child welfare services.

The OIS-2018 was conducted by a team of researchers who demonstrated an exceptional ability to keep focused on the objectives of this collective effort while bringing their own expertise.

Ontario's Ministry of Children, Community and Social Services (MCCSS) provided funding for the OIS-2018. All participating agencies contributed significant in-kind support, which included not only the time required for child protection workers to attend training sessions, complete forms, and respond to additional information requests, but also coordinating support from team administrative staff, supervisors, managers, and data information specialists.

The child welfare workers and managers who participated in the study deserve special recognition for finding the time and the interest to participate in the study while juggling their ever-increasing child welfare responsibilities. Although for reasons of confidentiality we cannot list their names, on behalf of the OIS-2018 Research Team I wish to thank the child welfare professionals who participated in the OIS-2018 and for their service to children.

Barbara Fallon, MSW, PhD
OIS-2018 Principal Investigator

Professor
Canada Research Chair in Child Welfare
Factor-Inwentash Faculty of Social Work
University of Toronto

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EXECUTIVE SUMMARY

The OIS-2018 is the sixth provincial study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by child protection services in Ontario. The OIS-2018 tracked 7,590 child maltreatment-related investigations (7,115 investigations involving children less than one to 15 years old and 475 investigations involving 16 and 17 year olds) conducted in a representative sample of 18 child welfare service agencies across Ontario in the fall of 2018. In order to make this report comparable with previous OIS reports, the data presented are based on a sample of child investigations involving children under 16.¹ Future analyses specifically looking at 16 and 17 year olds will be developed in subsequent reports and articles.

Objectives and Scope

The primary objective of the OIS-2018 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2018. Specifically, the OIS-2018 is designed to:

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

¹ One exception to this is Table 5-1b, which describes estimates and incidence rates for 16 and 17 year olds.

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

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

- » investigations involving children aged 15 and under are included in the sample used in this report;²
- » the unit of analysis is a child investigation;
- » the study is limited to reports investigated by child welfare agencies and does not include reports that were screened out, only investigated by the police, or never reported;
- » the study is based on the assessments provided by investigating child welfare workers that were not independently verified;
- » as a result of changes in the way cases are identified, the OIS-2018 report can only be directly compared to the OIS-2013 and OIS-2008, but not previous OIS reports; and
- » all estimates are weighted, annual estimates for 2018, presented either

² *Ibid.*

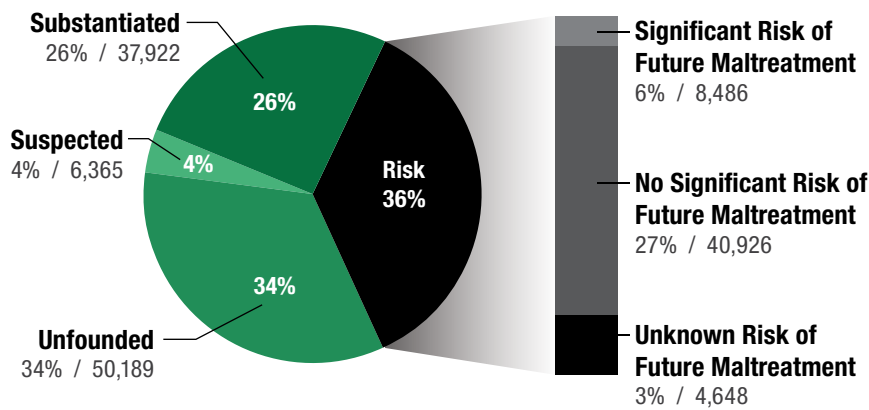
as a count of child maltreatment-related investigations (e.g., 12,300 child maltreatment-related investigations) or as the annual incidence rate (e.g., 3.1 investigations per 1,000 children).³

Caution is also required in comparing the OIS-2018 Major Findings Report with reports from previous cycles of the study because of changes in procedures for tracking investigations made in 2008. Changes in investigation mandates and practices over the last fifteen years have further complicated what types of cases fall within the scope of the OIS. In particular, child welfare authorities are receiving many more reports about situations where the primary concern is that a child may be at risk of future maltreatment but where there are no specific concerns about a possible incident of maltreatment that may have already occurred. Because the OIS was designed to track investigations of alleged incidents of maltreatment, it is important to maintain a clear distinction between risk of future maltreatment and investigations of maltreatment that may have already occurred. Beginning in the 2008 cycle, the OIS was redesigned to separately track both types of cases; however, this has complicated comparisons with past cycles of the study. Thus, comparisons with previous cycles, prior to 2008, in Chapter 3 of this report are limited to comparisons of rates of all maltreatment-related investigations including risk-only investigations. In contrast, risk of future maltreatment cases are excluded from the 2018 estimates of rates and characteristics of substantiated maltreatment in Chapters 4 and 5.⁴

³ Please see Chapter 2 of this report for a detailed description of the study methodology.

⁴ Two exceptions to this are Table 5-1a and 5-1b, which include risk of future maltreatment investigations.

FIGURE 1: Type of Investigation and Level of Substantiation in Ontario in 2018



Investigated and Substantiated Maltreatment in 2018

As shown in Figure 1, of the 148,536 maltreatment-related investigations conducted in Ontario in 2018 (a rate of 62.89 per 1,000 children), 64 percent were maltreatment investigations which focused on a concern of abuse or neglect (an estimated 94,476 child maltreatment investigations or 40.00 investigations per 1,000 children), and 36 percent of investigations were concerns about risk of future maltreatment (an estimated 54,060 investigations or

22.89 investigations per 1,000 children). Twenty-six percent of all investigations were substantiated, an estimated 37,922 child investigations. In a further four percent of investigations (an estimated 6,365 child investigations or 2.69 investigations per 1,000 children) there was insufficient evidence to substantiate maltreatment; however, maltreatment remained suspected by the investigating worker at the conclusion of the investigation. Thirty-four percent of investigations (an estimated 50,189 child investigations or 21.25 investigations per 1,000 children) were unfounded. In six percent of all investigations, the investigating worker concluded there was a significant risk of future maltreatment (3.59 per 1,000 children, an estimated 8,486 child investigations). In

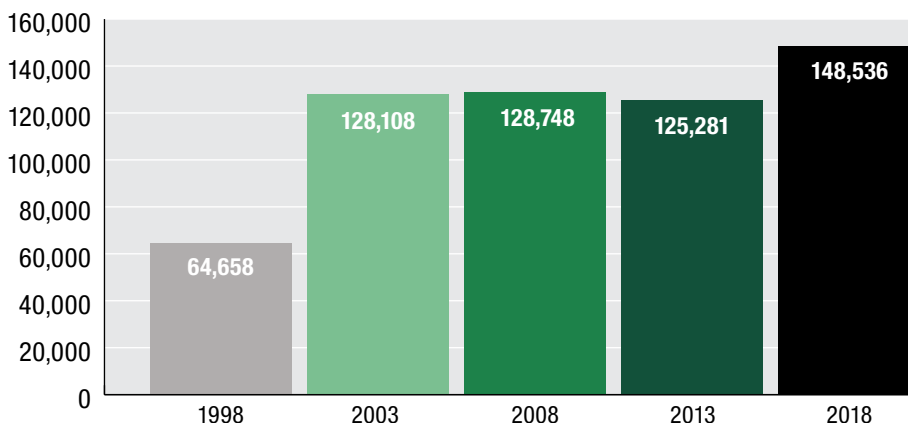
27 percent of investigations, no significant risk of future maltreatment was indicated (an estimated 40,926 investigations or 17.33 investigations per 1,000 children). In three percent of investigations, workers did not know whether the child was at significant risk of future maltreatment (an estimated 4,648 investigations or 1.97 per 1,000 children).

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

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

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

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



As shown in Figure 2, in 1998, an estimated 64,658 investigations were conducted in Ontario, a rate of 27.43 investigations per 1,000 children. In 2003, the number of investigations doubled, with an estimated 128,108 investigations and a rate of 53.59 per 1,000 children. In contrast, the number of investigations did not change significantly between 2003 and 2008, 2008 and 2013, and 2013 and 2018. In 2018, an estimated 148,536 maltreatment-related investigations were conducted, representing a rate of 62.89 investigations per 1,000 children.

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

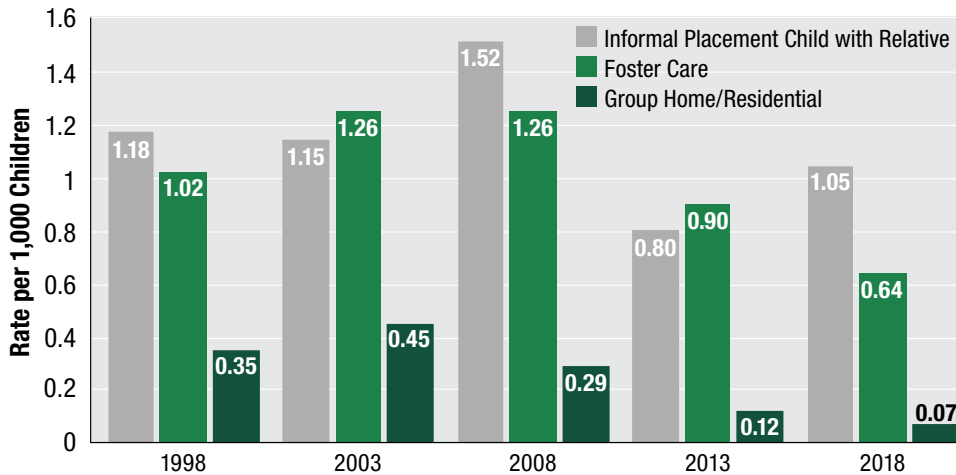
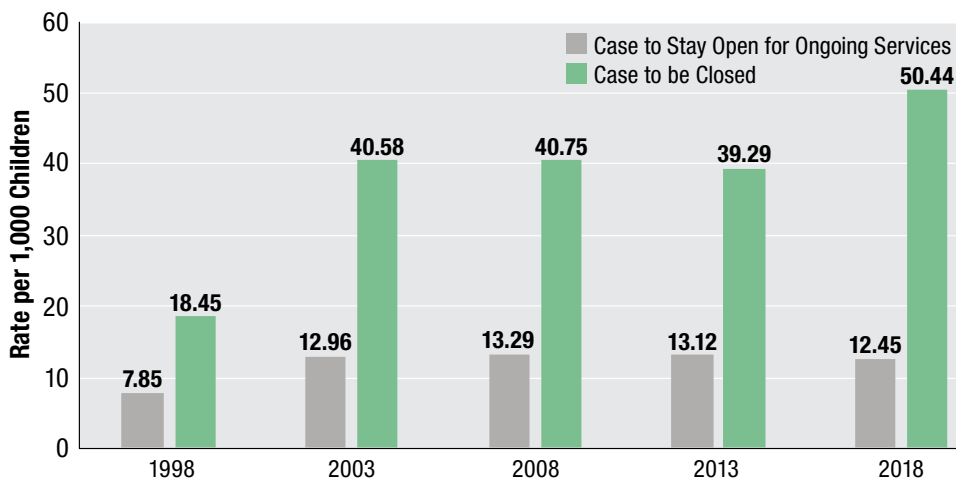


FIGURE 4: Provision of Ongoing Services Following Child Maltreatment Investigations in 1998 and 2003, and Following Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, and 2018



Placements

The OIS tracks out-of-home placements that occur at any time during the investigation. Investigating workers are asked to specify the type of placement. In cases where there may have been more than one placement, workers are asked to indicate the setting where the child spent the most time. In 2018, there were no placements in 97 percent of the investigations (an estimated 144,351 investigations). Three percent of investigations resulted in a change of residence for the child: two percent to informal kinship care (an estimated 2,488 investigations or 1.05 investigations per 1,000 children); one percent to foster care (an estimated 1,523 investigations or 0.64 investigations per 1,000 children); and less than one percent to residential/secure treatment or group homes (an estimated 174 investigations or 0.07 investigations per 1,000 children).

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

Ongoing Services

Investigating workers were asked whether the investigated case would remain open for further child welfare services after the initial investigation (Figure 4). Twenty percent of investigations in 2018 (an estimated 29,407 investigations) were identified as remaining open for ongoing services while 80 percent of investigations (an estimated 119,129 investigations) were closed.

KEY DESCRIPTIONS OF SUBSTANTIATED MALTREATMENT INVESTIGATIONS IN ONTARIO IN 2018

Categories of Maltreatment

Figure 5 presents the incidence of substantiated maltreatment in Ontario, by primary category of maltreatment.

There were an estimated 37,922 substantiated child maltreatment investigations in Ontario in 2018 (16.06 investigations per 1,000 children). Exposure to intimate partner violence represents the largest proportion of substantiated maltreatment investigations. Nearly half (45 percent) of all substantiated investigations identified exposure to intimate partner violence as the primary form of maltreatment (an estimated 17,051 investigations or 7.22 investigations per 1,000 children). In 21 percent of substantiated investigations, neglect was identified as the overriding concern, an estimated 8,082 investigations (3.42 investigations per 1,000 children). In 19 percent of substantiated investigations, or an estimated 7,081 investigations, the primary form of maltreatment identified was physical abuse (3.00 investigations per 1,000 children). Emotional maltreatment was identified as the primary form of maltreatment in another 12 percent of substantiated investigations (an estimated 4,689 investigations or 1.99 investigations per 1,000 children). In a small proportion of substantiated investigations (three percent), sexual abuse was identified as the primary maltreatment form (an estimated 1,019 investigations or 0.43 investigations per 1,000 children).

Physical and Emotional Harm

The OIS-2018 tracked physical harm identified by the investigating worker. Information on physical harm was collected using two measures, one describing severity of harm as measured by medical treatment

FIGURE 5: Primary Category of Substantiated Child Maltreatment in Ontario in 2018

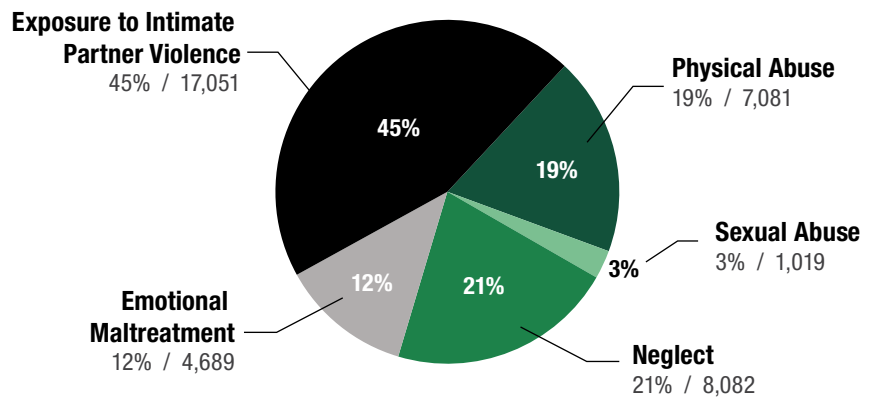
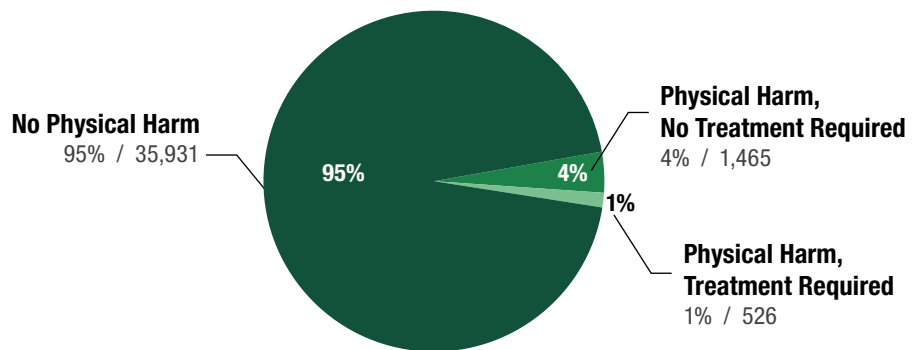


FIGURE 6: Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2018



needed and one describing the nature of harm.

Physical harm was identified in five percent of cases of substantiated maltreatment (Figure 6). In four percent of substantiated investigations (an estimated 1,465 substantiated investigations, or 0.62 investigations per 1,000 children), physical harm was noted but no medical treatment was required. In a further one percent of substantiated investigations (an estimated 526 substantiated investigations, or 0.22 investigations per 1,000 children), harm was sufficiently severe to require treatment.

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

Figure 7 presents documented emotional harm identified during the child maltreatment investigations. Emotional harm was noted in 36 percent of all substantiated maltreatment investigations, involving an estimated 13,559 substantiated maltreatment investigations (5.74 investigations per 1,000 children). In 21 percent of substantiated investigations (an estimated 7,791 investigations or 3.30 investigations per 1,000 children), symptoms were severe enough to require treatment.

Children's Indigenous Heritage

Children's Indigenous heritage was documented by the OIS-2018 in an effort to better understand some of the factors that bring children into contact with the child welfare system. Indigenous children were identified as a key group to examine because of concerns about overrepresentation of Indigenous children in the foster care system. Indigenous children are approximately two and a half times more likely to be substantiated than non-Indigenous children (38.03 per 1,000 Indigenous children versus 15.15 per 1,000 non-Indigenous children).

Ten percent of substantiated maltreatment investigations involved children of Indigenous heritage (Figure 8). Four percent of substantiated maltreatment investigations involved children with First Nations status, three percent involved First Nations Non-Status children, one percent involved Métis children, one percent involved Inuit children, and one percent involved children with "other" Indigenous heritage.

Child Functioning Concerns

Child functioning classifications that reflect physical, emotional, cognitive, and behavioural issues were documented on the basis of a checklist of 17 challenges that child welfare workers were likely to be aware of as a result of their investigations. The checklist only documents problems that child welfare workers became aware of during their investigations and, therefore, undercounts the occurrence of child functioning problems. Investigating workers were asked to indicate problems that had been confirmed

FIGURE 7: Documented Emotional Harm in Substantiated Child Maltreatment Investigations in Ontario in 2018

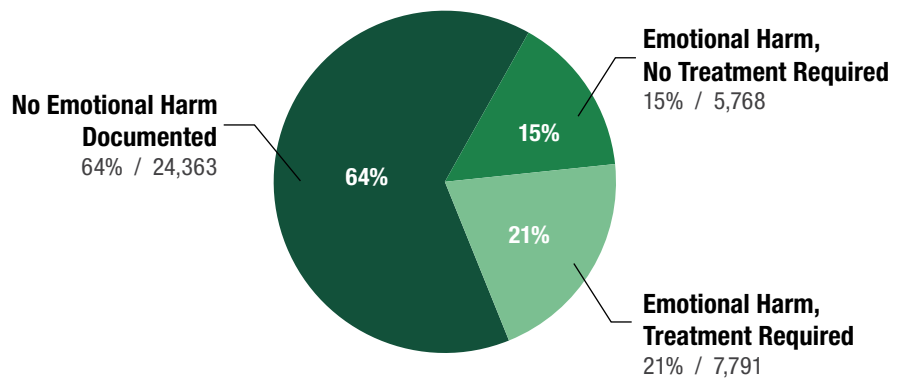
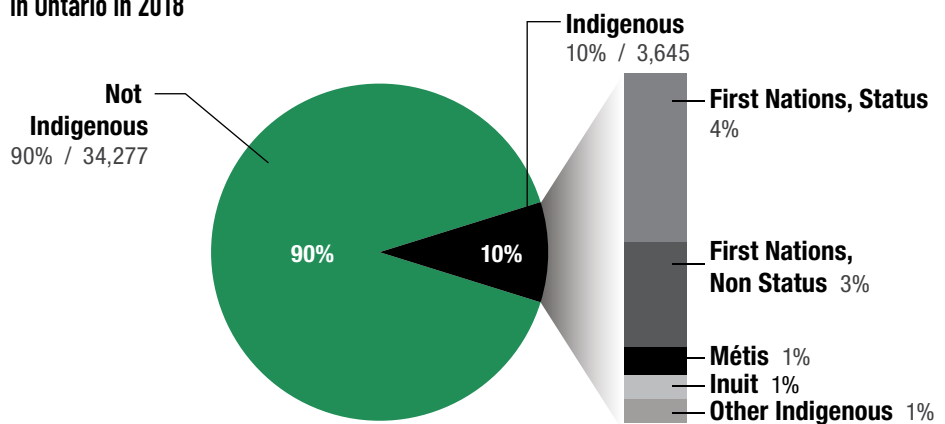


FIGURE 8: Indigenous Heritage of Children in Substantiated Child Maltreatment Investigations in Ontario in 2018



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

In 37 percent of substantiated child maltreatment investigations (an estimated 13,966 child investigations or 5.91 investigations per 1,000 children), at least one child functioning issue was indicated by the investigating worker.

Depression/anxiety/withdrawal was the most frequently reported child functioning concern (16 percent of substantiated maltreatment investigations), and the second most common

was academic or learning difficulties (15 percent of substantiated maltreatment investigations). Ten percent of substantiated maltreatment investigations involved a child with ADHD, and 10 percent involved a child with aggression or conduct issues. In nine percent of substantiated maltreatment investigations, the worker indicated that the child had an intellectual/developmental disability, and the worker noted attachment issues for the child in eight percent of these investigations. It is important to note that these ratings are based only on information available to the child welfare worker during the initial investigation (Figure 9).

FIGURE 9: Major Child Functioning Concerns Documented in Substantiated Child Maltreatment Investigations in Ontario in 2018

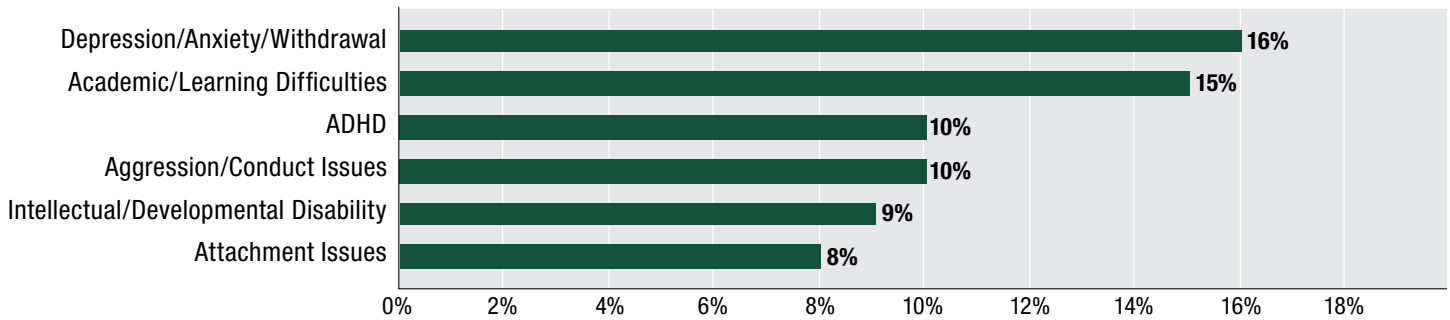
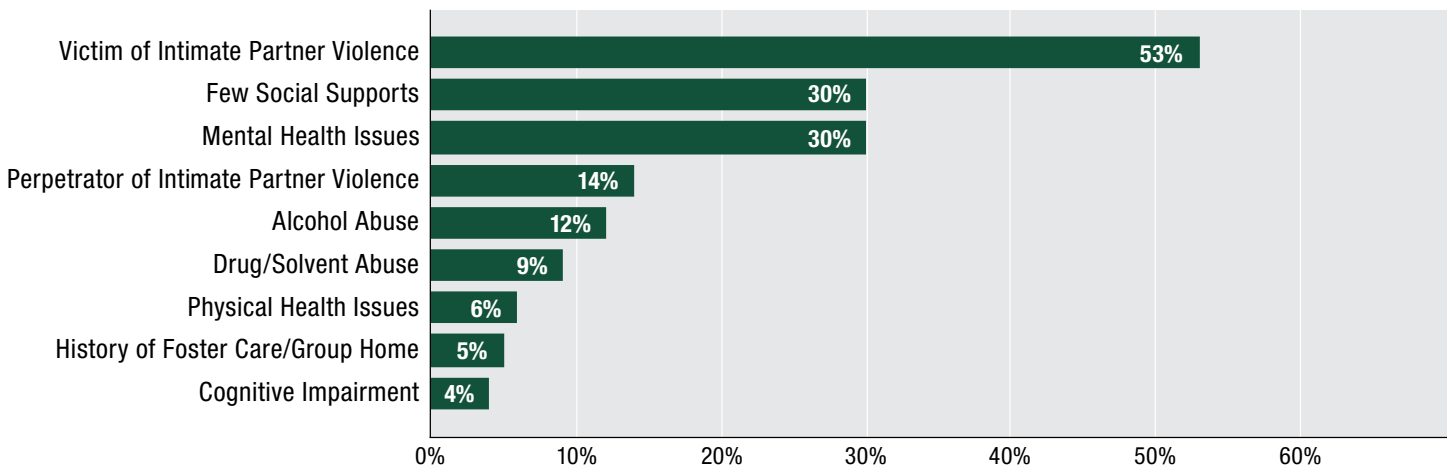


FIGURE 10: Primary Caregiver Risk Factors in Substantiated Child Maltreatment Investigations in Ontario in 2018



Primary Caregiver Risk Factors

For each investigated child, the investigating worker was asked to indicate who the primary caregiver was. Concerns related to caregiver risk factors were reported by investigating workers using a checklist of nine items that were asked about each caregiver. Where applicable, the reference point for identifying concerns about caregiver risk factors was the previous six months. At least one primary caregiver risk factor was identified in 78 percent of substantiated maltreatment investigations (an estimated 29,113 substantiated investigations). The most frequently noted concerns were victim of intimate partner violence (53 percent), few social supports (30 percent), mental health issues (30 percent), perpetrator of intimate partner violence (14 percent), and alcohol abuse (12 percent).

Household Risk Factors

The OIS-2018 tracked a number of household risk factors including social assistance as the household income, two or more moves in the last 12 months, and unsafe living conditions. Twenty-six percent of investigations involved children whose families received social assistance/employment insurance/ other benefits as their primary source of income (9,669 substantiated maltreatment investigations), and 11 percent of families relied on part-time work, multiple jobs, or seasonal employment. Nineteen percent of substantiated maltreatment investigations involved families that had moved once in the previous year, and eight percent involved families that had moved two or more times. Nine percent of substantiated maltreatment investigations involved families living in public housing. Unsafe housing conditions were noted in seven percent of substantiated

maltreatment investigations

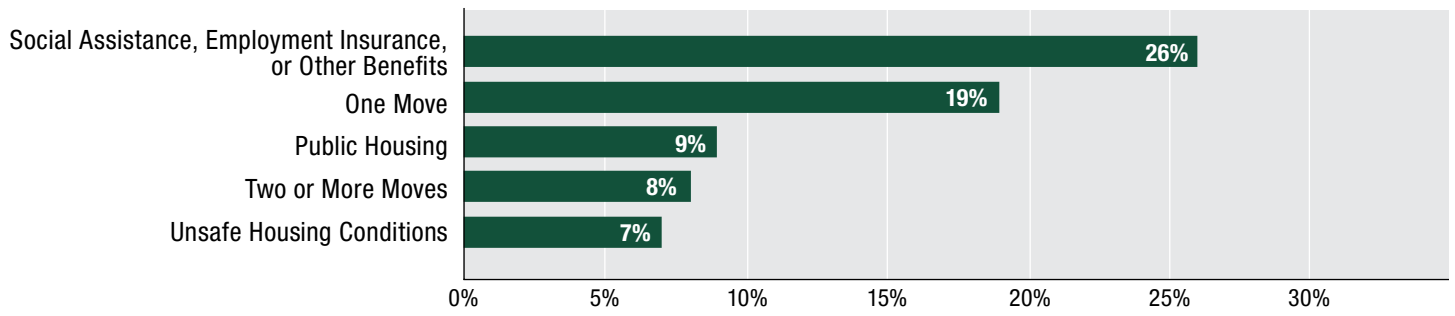
Future Directions

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

Changes to the procedure for classifying investigations beginning in 2008 continues to allow analysts to examine the differences between investigations of maltreatment incidents and investigations of situations reported because of risk of future maltreatment.

For updates on the OIS and for more detailed publications visit the Canadian Child Welfare Research Portal at <http://www.cwrp.ca>.

FIGURE 11: Household Risks in Substantiated Child Maltreatment Investigations in Ontario in 2018



CHAPTER 1: INTRODUCTION

The following report presents the major findings from the Ontario Incidence Study of Reported Child Abuse and Neglect-2018 (OIS-2018). The OIS-2018 is the sixth provincial study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by child protection services in Ontario. The estimates presented in this report are based on information collected from child protection workers on a representative sample of 7,115 child protection investigations conducted across Ontario during a three-month period in 2018. The OIS-2018 report also includes comparisons with estimates from the 1998, 2003, 2008, and 2013 cycles of the study, and select data from the OIS-1993 (Chapter 3).

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

Background

At the time of OIS-2018 sampling, responsibility for protecting and supporting children at risk of abuse and neglect fell under the jurisdiction of the 48 child protection agencies in Ontario (see Table 1-1), including a system of Indigenous child welfare agencies which increasingly have responsibility for protecting and supporting Indigenous children and their families. Because of variations in the way service statistics are kept, it is difficult to obtain a province-wide profile of the children and families receiving child welfare services. The Ontario Incidence Study of Reported Child Abuse and Neglect (OIS) is designed to provide such a profile by collecting information on a periodic basis from child protection agencies across Ontario using a standardized set of definitions.

The OIS-2018 is funded by Ontario's Ministry of Children, Community and Social

Services (MCCSS). All participating agencies contributed significant in-kind support, which included the time required for child protection workers to attend training sessions, complete forms, and respond to additional information requests, in addition to coordinating support from team administrative staff, supervisors, managers, and data information specialists.

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

Please see Appendix A and Appendix B for a full list of all the researchers and advisors involved in the OIS-2018.

Findings from the previous five cycles of the OIS 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. For example, the studies drew attention to the large number of investigations involving exposure to intimate partner violence. Findings from the studies have assisted in better adapting child welfare policies to address the array of difficulties faced by victims of maltreatment and their families.

Objectives and Scope

The primary objective of the OIS-2018 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2018. Specifically, the OIS-2018 is designed to:

1. determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence as well as multiple forms of maltreatment;
2. investigate the severity of maltreatment as measured by forms of maltreatment, duration, and physical and emotional harm;
3. examine selected determinants of health that may be associated with maltreatment;
4. monitor short-term investigation outcomes, including substantiation, out-of-home placement, and use of child

TABLE 1-1: Ontario Children's Aid Societies

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

welfare court; and

5. compare selected rates and characteristics of investigations across the 1993, 1998, 2003, 2008, 2013, and 2018 cycles of the OIS.
6. The OIS collects information directly from a provincial sample of child welfare workers at the point when an initial investigation regarding a report of possible child abuse or neglect is completed. The scope of the study is, therefore, limited to the type of information available to

workers at that point. As shown in the OIS Iceberg Model (Figure 1-1), the study only documents situations that are reported to and investigated by child welfare agencies. The study **does not** include information about unreported maltreatment nor does it include cases that **are only investigated by the police**. Similarly, the OIS does not include reports that are made to child welfare authorities but are **screened out** before they are investigated. While the study reports on short-term outcomes of child welfare investigations, including substantiation

status, initial placements in out-of-home care, and court applications, the study **does not track service events that occur beyond the initial investigation**.

Changes in investigation mandates and practices over the last 15 years have further complicated what types of cases fall within the scope of the OIS. In particular, child welfare authorities are receiving more reports about situations where the primary concern is that a child may be at risk of future maltreatment but where there are no specific concerns about a possible

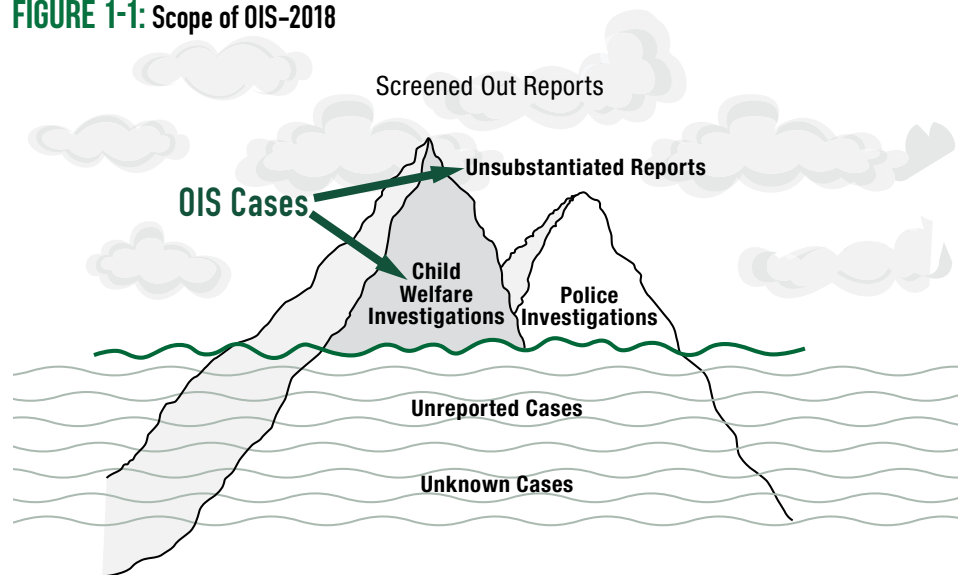
incident of maltreatment that may have already occurred. Because the OIS was designed to track investigations of alleged incidents of maltreatment, it is important to maintain a clear distinction between risk of future maltreatment and investigations of maltreatment that may have already occurred. Beginning in the 2008 cycle, the OIS was redesigned to separately track both types of cases; however this has complicated comparisons with past cycles of the study. For the purpose of the present report, comparisons with previous cycles are limited to comparisons of rates of all investigations including risk-only cases. In contrast, **risk-only cases are not included in the OIS-2018 estimates of rates and characteristics of substantiated maltreatment.**

Child Welfare Services: A Changing Mosaic

The objectives and design of the OIS-2018 are best understood within the context of the decentralized structure of Canada's child welfare system and with respect to changes over time in mandates and intervention standards. Child welfare legislation and services are organized in Canada at the provincial and territorial levels. Child welfare is a mandatory service, directed by provincial and territorial child welfare statutes. Although all child welfare systems share certain basic characteristics organized around investigating reports of alleged maltreatment, providing various types of counselling and supervision, and looking after children in out-of-home care, there is considerable variation in the organization of these service delivery systems. Some provinces and territories operate under a centralized, government-run child welfare system; others have opted for decentralized models run by mandated agencies. A number of provinces and territories have recently moved towards regionalized service delivery systems.

In Ontario, the Child, Youth and Family Services Act governs child welfare services and outlines principles for promoting the best interests of children. Alleged maltreatment

FIGURE 1-1: Scope of OIS-2018



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

is reported directly to a local Children's Aid Society or Child and Family Service Agency. Child welfare agencies are private, non-profit organizations funded by the provincial Ministry of Children, Community and Social Services. At the time of sampling for the OIS-2018, there were 48 agencies in Ontario that provided child protection services, and several of these agencies were providing services to specific communities based on religious affiliation or Indigenous heritage. The autonomous private service delivery model supports the development of strong community links with innovative programs that reflect local needs. Child abuse and neglect statistics are kept by each child welfare agency in Ontario and comprehensive aggregate provincial statistics are scarce.

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

the federal government under the guidelines of the 1965 Indian Welfare Agreement. The federal government pays the province an established share of its costs to deliver child welfare services to on-reserve First Nations people, including the cost for children in care. The structure of Indigenous child welfare services is changing rapidly. In addition to regular funding, Crown-Indigenous Relations and Northern Affairs Canada provides funding directly to First Nations as well as mandated and non-mandated child welfare agencies operated by First Nations for enhanced preventative services. A growing number of services are being provided either by fully mandated Indigenous agencies or by Indigenous counselling and prevention services that work in conjunction with mandated services.

In addition to variations in mandates and standards between jurisdictions, it is important to consider that these mandates and standards have been changing over time. Between 1998 and 2003, the OIS found that rates of investigated maltreatment had nearly doubled. Most of the available data point to the increase as a result of changes in detection, reporting, and investigation practices rather than an increase in the number of children being abused or neglected.

Using the analogy of the iceberg (Figure 1-1), there is no indication that the iceberg has increased in size; rather, it would appear that the detection line (depicted as the water line on the iceberg model) has dropped, leading to a higher number of reports and substantiated cases. The OIS-2003 findings revealed four important changes: (1) an increase in reports made by professionals; (2) an increase in reports of emotional maltreatment and exposure to intimate partner violence; (3) a larger number of children investigated in each family; and (4) an increase in substantiation rates. These changes are consistent with changes in legislation and investigation standards in Ontario where statutes and regulations have been broadened to include more forms of maltreatment and more investigation standards, requiring that siblings of reported children be systematically investigated.

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

2018 are designed to separately track these risk-only cases.

Numerous developments over the past 20 years have led to an evolving focus for child welfare in Ontario. The Child and Family Services Act underwent revisions in the year 2000 which resulted in: increased funding to compensate for a lack of uniform and centralized child welfare services in Ontario, increased focus on responding to neglect and emotional maltreatment, a lower threshold for determining “risk of harm” to the child, and increased clarity in the requirements for the “duty to report” for professionals and the public. In 2003, the Ministry of Children and Youth Services was created in Ontario, followed by the introduction of the Child Welfare Secretariat and the Child Welfare Transformation Agenda in 2004/2005. These changes initiated a new focus for child welfare in Ontario, which included an emphasis on prevention, early detection, and intervention, as well as improved coordination among the three fields of child welfare, youth justice, and children’s mental health. In addition, the Ontario Risk Assessment Model was adopted in 1998, and the Differential Response Model was adopted in 2005. Following this, new standards were developed in 2007 that increased the emphasis on customized response and promoted a wider range of informal and formal supports for families in the system. Since the inception of these models, the number of families referred to Ontario child welfare agencies has doubled, and the nature of the cases referred has changed considerably. In 2009, a Commission to Promote Sustainable Child Welfare was established to develop and implement changes to the Ontario child welfare system over a period of three years. Sustainable child welfare is defined as a system that can adapt to evolving challenges, effectively utilize resources to maximize positive outcomes for children and youth, and balance both short- and long-term demands. As a result of this Commission, several Children’s Aid Societies have recently been amalgamated and there has been an increased focus on accountability and strong governance. The Commission has also informed the development of provincial performance indicators and a new funding

model for Ontario Children’s Aid Societies. In June 2017, the Child, Youth and Family Services Act replaced the Child and Family Services Act. In January 2018, the age of protection in Ontario increased from 15 to 17 years of age. In April 2018, the new act was formally proclaimed. The current act requires child welfare services to be provided to children, youth, and families with the following directions, services must: be child and youth-centered; build on a family’s strengths through prevention, early intervention, and community support to reduce the need for more disruptive services and interventions; respect diversity and inclusion, as set out in the Ontario Human Rights Code and the Canadian Charter of Rights and Freedoms; be informed by the need to address systemic racism and the barriers it creates; and help maintain connections between children, families, and their communities. In order to make this report comparable with previous OIS reports, the data presented are based on a sample of child investigations involving children under 16.¹ Future analyses specifically looking at 16 and 17 year olds will be developed in subsequent reports and articles.

Using a standard set of definitions, the OIS-1993, 1998, 2003, 2008, 2013, and 2018 provide the best available estimates of the incidence and characteristics of reported child maltreatment in Ontario over a 25-year period.

Organization of the Report

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

The **OIS-2018** report is divided into five chapters and six appendices. Chapter 2

¹ One exception to this is Table 5-1b, which describes estimates and incidence rates for 16 and 17 year olds.

describes the study's methodology. Chapter 3 presents the difference in the incidence of investigations and the types of investigations conducted by child welfare agencies in Ontario in 1993, 1998, 2003, 2008, 2013, and 2018. Chapter 4 examines the characteristics of substantiated maltreatment investigations by type of maltreatment in Ontario in 2018, including severity and duration of injury and the identity of the alleged perpetrators. Chapter 5 examines the child and family characteristics of substantiated investigations in Ontario in 2018.

Readers should note that because of changes in the way child welfare investigations are conducted in Ontario and in the way the OIS tracks the results of these investigations, the findings presented in this report are **not directly comparable to findings presented in the OIS-2003, OIS-1998, and OIS-1993 reports**. In particular, it should be noted that previous reports do not separately track investigations of cases where future risk of maltreatment was the only concern. More detailed analyses will be developed in subsequent reports and articles.

The Appendices include:

- » Appendix A: OIS-2018 Site Researchers
- » Appendix B: OIS-2018 Advisory Committee
- » Appendix C: Glossary of Terms
- » Appendix D: OIS-2018 Maltreatment Assessment
- » Appendix E: OIS-2018 Guidebook
- » Appendix F: Description of the Estimation Procedures

CHAPTER 2: METHODOLOGY

The OIS-2018 is the sixth provincial study examining the incidence of reported child abuse and neglect in Ontario. The OIS-2018 captured information about children and their families as they came into contact with child welfare services over a three-month sampling period. Children who were not reported to child welfare services, screened-out reports, or new allegations on cases currently open at the time of case selection were not included in the OIS-2018.

A multi-stage sampling design was used, first 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 investigating workers at the conclusion of the investigation. The OIS-2018 sample of 7,590 child maltreatment-related investigations was used to derive estimates of the annual rates and characteristics of investigated maltreatment in Ontario. In order to maintain comparability between cycles of the OIS, this report primarily provides descriptive data based on the 7,115 investigations of children 0-15 years of age. In Ontario, the age of protection was amended to include 16 and 17 year olds in 2018, and a basic table for this age group (475 investigations) is provided in Table 5-1b.

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-2018 methodology and discusses its strengths, limitations, and impact on interpreting the OIS-2018 estimates.

Sampling

The OIS 2018 sample was drawn in three stages: first, a representative sample of child welfare agencies from across Ontario was selected, then cases were sampled over

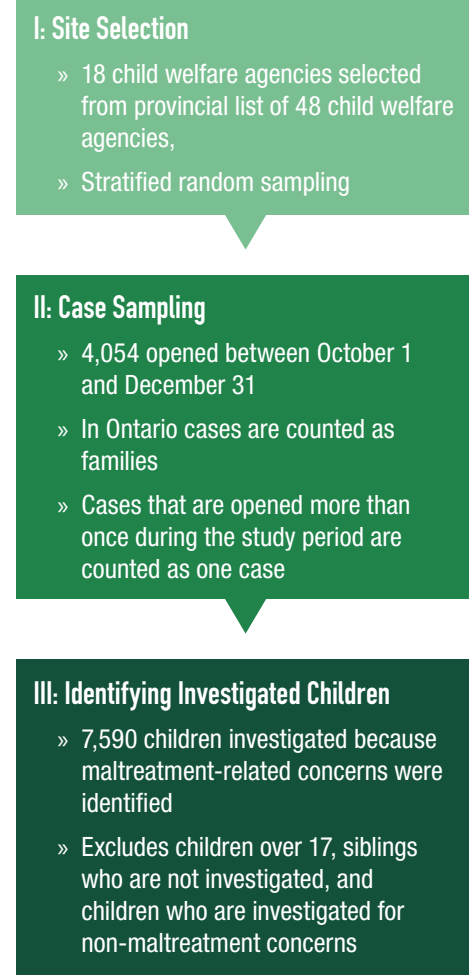
a three-month period within the selected agencies, and, finally, child investigations that met the study criteria were identified from the sampled cases. The sampling approach was developed in consultation with a statistical expert.

Agency Selection

Child welfare agencies are the Primary Sampling Units (PSU) for the OIS-2018. The term “child welfare agency” describes any organization that has the authority to conduct child protection investigations. In Ontario, agencies serve the full population in a specific geographic area; however, in some instances several agencies may serve different populations in the same area on the basis of religion or Indigenous heritage. There are specific agencies in Ontario which only provide services to Indigenous children and families, and other agencies can be considered mainstream child welfare agencies. A final count of 48 agencies constituted the sampling frame for the 2018 study (see Figure 2-1). A representative sample of 18 child welfare agencies was selected for inclusion in the OIS-2018 using a stratified random sampling approach.

Child welfare agencies in Ontario were allocated to five strata from which the OIS-2018 participating agencies were sampled. Agencies were stratified by whether they provided mainstream child welfare services or services to Indigenous children and families. There were three strata for mainstream agencies and two for Indigenous agencies. Agencies were allocated to these strata by size (large, medium, or small for mainstream agencies) and (large or medium/small) for Indigenous agencies). Sizes were determined by the total number of investigations provided by the Ministry of Children, Community and Social Services from the past fiscal year. All agencies allocated in the large stratum for both Indigenous and mainstream agencies

FIGURE 2-1: Three Stage Sampling



were selected. Within each medium and small stratum, systematic sampling was used.

Directors of the sampled agencies were sent letters of recruitment, which introduced the study and requested participation. Participation was voluntary. Three agencies declined to participate due to their particular circumstances and three did not respond to the request for participation leading to replacement agencies being selected from the remaining agencies within their respective stratum.

Case Selection

The second sampling stage involved selecting cases opened in the participating agencies during the three-month period of October 1, 2018 to December 31, 2018. 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 a whole year. However, follow-up studies are needed to systematically explore the extent to which seasonal variation in the types of cases referred to child welfare agencies may affect estimates that are based on a three-month sampling period.

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

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

- » situations that were reported but **screened out** before the case was opened were not included (Figure 1-1). There is too much variation in screening procedures to feasibly track these cases within the budget of the OIS;
- » reports on **already open cases** were not included; and

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

- » only the first report was included for cases that were **reported more than once** during the three-month sampling period

These procedures led to 4,054 family-based cases being selected in Ontario.

Identifying Investigated Children

The final sample selection stage involved identifying children who were investigated as a result of concerns related to possible maltreatment or risk of future maltreatment. Since cases in Ontario are opened at the level of a family, procedures had to be developed to determine which child(ren) in each family were investigated for maltreatment-related reasons. Furthermore, cases can be opened for a number of different reasons that do not necessarily involve maltreatment-related concerns. These can include children with behavioural problems, pregnant women seeking supportive counselling, or other service requests that do not involve a specific allegation of maltreatment or risk of future maltreatment.

In Ontario, children eligible for inclusion in the final study sample were identified by having investigating workers complete the *Intake Information* section of the online *OIS-2018 Maltreatment Assessment*. The *Intake Information* section allowed the investigating worker to identify any children who were investigated because of maltreatment-related concerns (i.e., investigation of alleged incidents of maltreatment or assessment of risk of future maltreatment). These procedures yielded a final sample of 7,590 child investigations in Ontario because of maltreatment-related concerns. This included 7,115 child maltreatment-related investigations involving children less than one to 15 years old, and 475 investigations involving 16 and 17 year olds. As of 2018, the age of protection in Ontario was increased from under 16 to under 18.

Investigating Maltreatment vs. Assessing Future Risk of Maltreatment

The primary objective of the OIS is to document investigations of situations where there are concerns that a child may have been abused or neglected. While investigating maltreatment is central to the mandate of child protection authorities, their mandates can also apply to situations where there is no specific concern about past maltreatment but where the risk of future maltreatment is being assessed. As an aid to evaluating future risk of maltreatment, a variety of risk assessment tools and methods have been adopted in Ontario, including the Ontario Risk Assessment Model, an Eligibility Spectrum, a Risk Assessment Tool, and more formalized differential response models.² Risk assessment tools are designed to promote structured, thorough assessments and informed decisions. They measure a variety of factors that include child strengths and vulnerabilities, sources of familial support and stress, and caregiver addictions and mental health concerns. Risk assessment tools are intended to supplement clinical decision making and are designed to be used at multiple decision points during child welfare interventions.

Due to changes in investigation mandates and practices over the last 15 years, the OIS-2018 tracked risk assessments and maltreatment investigations separately. To better capture both types of cases, the OIS-2008 was redesigned to separately track maltreatment investigations versus cases opened only to assess the risk of future maltreatment. Before the OIS-2008, cases that were only being assessed for risk of future maltreatment were not specifically included.

For the OIS-2008, OIS-2013, and OIS-2018, investigating workers were asked to complete a data collection instrument for both types of cases. For cases involving

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

alleged maltreatment, workers described the specific forms of maltreatment that were investigated and whether the maltreatment was substantiated. In cases that were only opened to assess future risk of maltreatment, investigating workers were asked to indicate whether the risk was confirmed, but not to specify the forms of future maltreatment about which they may have had concerns. Specifying the form of future maltreatment being assessed was not feasible given that risk assessments are based on a range of factors including child strengths and vulnerabilities, caregiver addictions, caregiver mental health concerns, and sources of familial support and stress.

While this change provides important additional information about risk-only cases, it has complicated comparisons with early cycles of the study. For the purposes of this report, Chapter 3 comparisons with previous cycles are limited to comparisons of rates of all maltreatment-related investigations, including risk-only investigations. In contrast, risk-only cases are not included in the Chapter 4 and 5 estimates of 2018 rates and characteristics of substantiated maltreatment.³

Forms of Maltreatment Included in the OIS-2018

The OIS-2018 definition of child maltreatment includes **33 forms of maltreatment** subsumed under **five categories** of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence.

A source of potential confusion in interpreting child maltreatment statistics lies in inconsistencies in the categories of maltreatment included in different statistics. Most child maltreatment statistics refer to both physical and sexual abuse, but other categories of maltreatment, such as neglect and emotional maltreatment, are not systematically included. There is even less consensus with respect to subtypes or forms

³ Two exceptions to this are Tables 5-1a and 5-1b, which include risk of future maltreatment investigations.

of maltreatment. The OIS-2018 is able to track up to three forms of maltreatment for each child investigation.

Investigated Maltreatment vs. Substantiated Maltreatment

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

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

Risk of Harm vs. Harm

Cases of maltreatment that draw public attention usually involve children who have

⁴ For more information on the distinction between these three levels of substantiation, please see: Stoddart, J. K., Fallon, B., Trocmé, N., & Fluke, J. (2018). *Substantiated child maltreatment: Which factors do workers focus on when making this critical decision?* *Children and Youth Services Review*, 87, 1-8.

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

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 harmed, but are at risk of harm. For instance, a toddler who has been repeatedly left unsupervised in a potentially dangerous setting may be considered to have been neglected, even if the child has not been harmed. The OIS-2018 includes both types of situations in its definition of maltreatment. The study also gathers information about physical and emotional harm attributed to substantiated or suspected maltreatment (Chapter 4).

The OIS-2018 documents both physical and emotional harm; however, definitions of maltreatment used for the study do not require the occurrence of harm.

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

Instrument

The OIS-2018 survey instrument was designed to capture standardized information from child welfare workers conducting maltreatment investigations or investigations of risk of future maltreatment. Given the time constraints faced by child welfare workers, the instrument had to be kept as short and simple as possible.

The research team engaged in several tasks in preparation for data collection. One major

task involved updating the paper-and-pencil *Maltreatment Assessment Form* used in the OIS-2013 to an online instrument, the *OIS-2018 Maltreatment Assessment*. The online data collection system was housed on a secure server at the University of Toronto with access only through the internet, through secure logins and connections. The *OIS-2018 Maltreatment Assessment* was the main data collection instrument used for the study. This instrument was completed by the primary investigating child welfare worker upon completion of each child welfare investigation (Appendix D). This data collection instrument consists of an *Intake Information* section, a *Household Information* section, and a *Child Information* section.

Intake Information Section

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

Household Information Section

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

Child Information Section

The third section of the instrument, the *Child*

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

Guidebook

All items on the *OIS-2018 Maltreatment Assessment* were defined in an accompanying *OIS-2018 Guidebook* (Appendix E).

Revising and Validating the OIS-2018 Maltreatment Assessment

The OIS-2018 data collection instrument was based on the OIS-2013, OIS/CIS-2008, OIS/CIS-2003, OIS/CIS-1998, and OIS-1993 data collection instruments in order to maximize the potential for comparing OIS findings across cycles of the study. A key challenge in updating instruments across cycles of a study is to find the right balance between maintaining comparability while making improvements based on the findings from previous cycles. In addition, changes in child welfare practices may require that updates be made to data collection instruments to ensure that the instruments are relevant to current child welfare practices.

Validation Focus Groups

In the summer of 2018, focus groups were conducted in Ontario to gather feedback

on proposed revisions to the OIS-2013 data collection instrument. A convenience sample of three agencies was recruited for participation in the focus groups. One focus group was held in each agency, with four to six intake workers in attendance at each. The process was iterative. One focus group occurred at a participating Indigenous agency.

Changes to the OIS-2013 version of the instrument were made in close consultation with the *OIS-2018 Advisory Committee*, which is composed of Children's Aid Society administrators; a representative from the Ontario Ministry of Children, Community and Social Services; a representative from the Ontario Association of Children's Aid Societies; a representative from the Association of Native Child and Family Services Agencies of Ontario (ANCFSAO); and scholars (Appendix B).

Changes to the data collection instrument included: adding a question about whether or not the caregiver(s) moved to Canada in the last five years; expanding the question regarding referrals made to internal or external services to include why referrals were not made (if applicable), and what was specifically done with respect to referrals that were made (if applicable); updating the list of child functioning concerns to reflect current terminology used in the field; and including suicide attempts as a child functioning concern.

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

Data Collection and Verification Procedures

Each participating agency was offered a training session conducted by a Site Researcher to introduce participating child welfare workers to the OIS-2018 instruments and procedures. The majority of agencies opted to receive the training session. In addition, many agency representatives requested one-on-one support for participating child welfare workers completing

the OIS-2018 instruments throughout the data collection period. Additional support was built into the OIS-2018 online platform, including direct access to the *OIS-2018 Guidebook* (Appendix E), which includes definitions for all of the items and study procedures; written instructions for each item on the instrument available through a help pop-up; and audio instructions for a selection of items.

Site Researchers were assigned to coordinate data collection activities at each agency participating in the OIS-2018. Site Researchers were trained on the study instruments and procedures and each Site Researcher was assigned between three to six agencies. Site Researchers visited their agencies on a regular basis to provide participating workers with one-on-one support in completing their data collection instruments, to respond to questions, and to monitor study progress. Since the instrument for this cycle of the study was online for the first time, additional support strategies were developed, and many workers preferred to complete the instruments over the phone with their assigned Site Researcher.

Completion of the data collection instrument was designed to coincide with the point when investigating workers complete their written report of the investigation; typically required within 45 days of beginning the investigation.

Data Verification and Data Entry

Completed data collection instruments were verified by two Site Researchers and the Principal Investigator for inconsistent responses. Consistency in instrument completion was examined by comparing the data collection instrument to the brief case narratives provided by the investigating worker. Workers were instructed not to include any identifying information on the study forms. The data were extracted from the online platform and entered into SPSS Version 26. Inconsistent responses and miscodes were systematically identified and cleaned. Duplicate cases were screened and deleted on the basis of agency identification numbers and date of opening.

Participation and Item Completion Rates

The *OIS-2018 Maltreatment Assessment* was as short and simple as possible to minimize the response burden and ensure a high completion rate. Item completion rates were over 99 percent for all items.⁶ The online instrument could not be submitted until all items were completed. The participation rate was estimated by comparing actual cases opened during the case-selection period with the number of cases for which data collection instruments were completed. The overall participation rate was over 99 percent.

Estimation Procedures

Design

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

Weighting

The data collected for the OIS-2018 were weighted in order to derive provincial, annual incidence estimates. Design weights

were applied to each case selected in sampled agencies during the three-month case selection period. In order to increase the precision and accuracy of estimates for the overall agency volume for 2018, calibration factors, based on known numbers of investigations, were applied. Provincial incidence estimates were calculated by dividing the weighted estimates by the child population in Ontario by age (less than one to 17 years). Child population numbers are based on 2016 Census data⁷ (see Tables 5-1a and 5-1b). Please see Appendix F for a detailed description of the weighting and estimation.

Case Duplication

Although cases reported more than once during the three-month case sampling period were unduplicated, the weights used to develop the OIS annual estimates include an unknown number of “duplicate” cases, i.e., children or families reported and opened for investigation two or more times during the year. Although each investigation represents a new incident of maltreatment, confusion arises if these investigations are taken to represent an unduplicated count of children. To avoid such confusion, the OIS-2018 uses the term “child investigations” rather than “investigated children,” since the unit of analysis is the investigation of the child’s alleged maltreatment.

Sampling Error Estimation

Although the OIS-2018 estimates are based on a relatively large sample of 7,590 child maltreatment-related investigations, sampling error is primarily driven by the variability between the 18 participating agencies. Sampling error estimates were calculated to reflect the fact that the survey population had been randomly selected from across the province. Standard error estimates were calculated for select variables at the p

⁶ *The high item completion rate can be attributed to the design of the data collection instrument, the verification procedures, and the one-on-one support offered to participating workers by OIS-2018 Site Researchers. In designing the Maltreatment Assessment, careful attention was given to maintaining a logical and efficient format for all 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.*

⁷ *Statistics Canada. (2016). Age (in Single Years) and Average Age and Sex for the Population of Canada, Provinces and Territories, Census Divisions, Census Subdivisions and Dissemination Areas, 2016 Census - 100% Data, Statistics Canada Catalogue no. 98-400-X2016003. Statistics Canada: Ottawa, Ontario.*

<0.05 level. Most coefficients of variation were in the acceptable and reliable level, with the exception of low frequency events. The estimate for placement in group home/residential secure treatment should be interpreted with extreme caution as the CV was over 33. See Appendix F.

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

Ethics Procedures

The OIS-2018 data collection and data handling protocols and procedures were reviewed and approved by the University of Toronto Research Ethics Board.

The study utilized a case file review methodology. The case files are the property of the Indigenous or mainstream agency. Therefore, the permission of the agency 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 Information* section collected partially identifying information about the children, including their first names, ages, and first two letters of their family surname. The *Intake Information* section also included the file/case number the agency assigns. This information was used only for verification purposes. Any names on the forms were deleted during verification. The OIS-2018 used a secure, web-based delivery system for data collection.

This report contains only provincial estimates of child abuse and neglect and does not

identify any participating agency.

Indigenous Ethics

The OIS-2018 adhered to the principles of Ownership of, Control over, Access to, and Possession of research (OCAP principles), which must be negotiated within the context of individual research projects. In the case of the OIS-2018, adherence to OCAP principles is a shared concern that shapes the collaborative relationship between the *OIS-2018 Advisory Committee* and the research team. Representatives from ANCFSAO were invited to be members of the *OIS-2018 Advisory Committee*, which guided the research design and implementation. A separate report about First Nations children in Ontario will be produced at the direction of ANCFSAO in 2020.

Ethno-racial Data Analyses

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

Study Limitations

Although every effort was made to make the OIS-2018 estimates precise and reliable, several limitations inherent to the nature of the data collected must be taken into consideration:

- » as a result of changes in the way risk-only cases are identified in the OIS-2008, OIS-2013, and OIS-2018, comparisons between study cycles must be done with caution. While tables in the OIS-2018, OIS-2013, and OIS-2008 may be compared, tables in the OIS-2018 report **cannot be directly compared** to tables in the OIS-2003, OIS-1998, and OIS-1993 reports. Chapter 3 presents select comparisons across study cycles, please interpret this chapter with caution;
- » the weights used to derive annual estimates include counts of children investigated more than once during

the year; therefore, the unit of analysis for the weighted estimates is a **child investigation**;

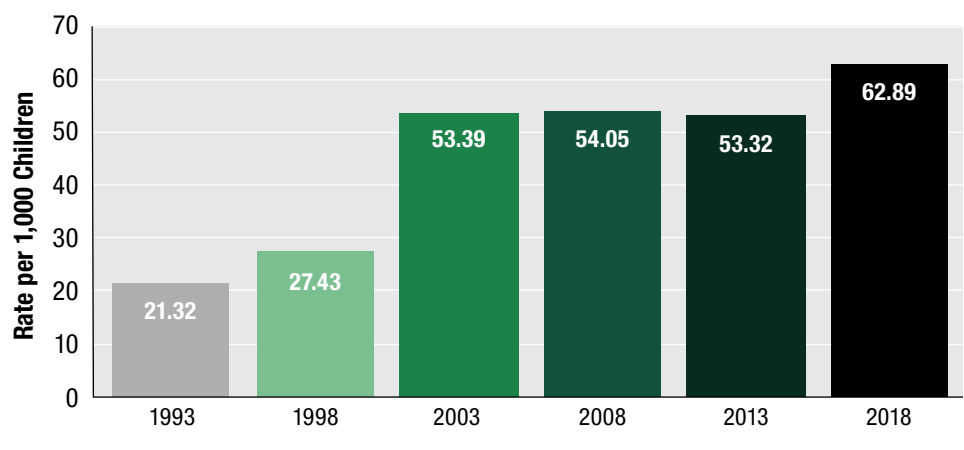
- » the OIS tracks **information during approximately the first 45 days** of case activity; service outcomes such as out-of-home placements and applications to court only include events that occurred during those first approximately 45 days; Table 3-6a, Table 3-6b, and Table 3-8 were affected by this limitation;
- » the provincial counts presented in this report are **weighted estimates**. In some instances sample sizes are too small to derive publishable estimates. For example, Table 4-4 presents the nature of physical harm; the number of substantiated investigations involving broken bones, burns and scalds, or head trauma could not be reported due to the small sample sizes;
- » the OIS **only tracks reports investigated by child welfare** agencies and does not include reports that were screened out, cases that were only investigated by the police, and cases that were never reported. For instance, Table 4-1 presents the estimated number of substantiated incidents of exposure to intimate partner violence that were investigated and does not include incidents of intimate partner violence that were reported only to police or never reported; and
- » the study is based on the assessments provided by the investigating child welfare workers and *could not be independently verified*. For example, Table 5-2 presents the child functioning concerns documented in cases of substantiated maltreatment. The investigating workers determined if the child demonstrated functioning concerns, for instance depression or anxiety. However, these child functioning concerns are not verified by an independent source.

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

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

The estimates presented in this chapter are weighted estimates derived from child investigations conducted in 1993, 1998,

FIGURE 3-1: Incidence of Child Maltreatment-Related Investigations in Ontario in 1993, 1998, 2003, 2008, 2013, and 2018



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

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

Data in this chapter are presented in terms of the estimated annual number of investigations, as well as the incidence of investigations per 1,000 children aged less than one to 15. These statistics refer to child investigations and not to the number of investigated families. Investigations include all maltreatment-related investigations, including cases that were investigated because of risk of future maltreatment. Because risk-only cases were not tracked separately in the 1993, 1998, and 2003 cycles of the OIS, comparisons that go beyond a count of investigations are outside of the scope of this report.

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

Chapter 3 presents some select comparisons between the six provincial cycles of the OIS. Comparisons focus on changes in rates and key characteristics of investigations. Statistical tests of significance were used to test the significance of differences between the 2013 and 2018 estimates. Tests of significance for 1998 to 2003 differences are presented in the OIS-2003 Report, tests of significance for 2003 to 2008 differences are presented in the OIS-2008 Report, and tests

of significance for 2008 to 2013 differences are presented in the OIS-2013 Report.

Number and Rate of Investigations

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

per 1,000 children. The number of child maltreatment-related investigations did not change between 2003, 2008, 2013, and 2018. In 2008, an estimated 128,748 maltreatment-related investigations were conducted across Ontario, representing a rate of 54.05 investigations per 1,000 children. In 2013, the rate of investigation remained consistent. An estimated 125,281 investigations were conducted in 2013, a rate of 53.32 investigations per 1,000 children. There was no statistically significant increase in the rate of maltreatment-related investigations between 2013 and 2018. In 2018, an estimated 148,536 investigations were conducted, representing a rate of 62.89 investigations per 1,000 children.

TABLE 3-1A: Number and Rate of Child Maltreatment Investigations in Ontario in 1993, 1998, and 2003, and Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, and 2018

Child Welfare Investigations											
1993		1998		2003		2008		2013		2018	
#	Rate per 1,000 children	#	Rate per 1,000 children	#	Rate per 1,000 children	#	Rate per 1,000 children	#	Rate per 1,000 children	#	Rate per 1,000 children
46,860	21.32	64,658	27.43	128,108	53.59	128,748	54.05	125,281	53.32	148,536	62.89ns

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

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

Type of Response	2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Customized Response	96,347	40.45	75%	101,919	43.38	82%	125,305	53.05ns	84%
Traditional Response	32,321	13.57	25%	23,128	9.84	18%	23,231	9.84ns	16%
Total Investigations	128,668	54.02	100	125,047	53.22	100%	148,536	62.89ns	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

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

Child Age Group	1998			2003			2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
<1 Year	6,154	43.31	10%	8,237	65.71	6%	9,286	70.25	7%	7,915	58.44	6%	8,488	63.00ns	6%
1-3 Years	8,412	19.17	13%	19,638	48.63	15%	22,199	55.08	17%	21,801	51.25	17%	22,743	54.50ns	15%
4-7 Years	17,023	28.01	26%	32,847	54.84	26%	31,222	55.93	24%	36,730	64.29	29%	41,217	69.43ns	28%
8-11 Years	16,736	28.27	26%	36,124	56.52	28%	32,939	53.07	26%	29,907	51.48	24%	41,177	67.60ns	28%
12-15 Years	16,333	28.33	25%	31,262	50.15	24%	33,102	49.56	26%	28,928	45.45	23%	34,911	57.51ns	24%
Total Investigations	64,658	27.43	100%	128,108	53.59	100%	128,748	54.05	100%	125,281	53.32	100%	148,536	62.89ns	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

Type of Response for Investigations

Table 3-1b describes the type of response for the investigations. The type of investigation (customized or traditional response) has only been collected since the 2008 cycle. There was a non-significant increase in the rate of customized investigations in 2018 compared to 2013. In Ontario in 2018, 84 percent (125,305 investigations or 53.05 per 1,000 children) of investigations involved a customized response, while 16 percent of investigations involved a traditional approach (23,231 investigations or 9.84 per 1,000 children). In 2013, 82 percent of investigations (101,919 investigations or 43.38 per 1,000 children) involved a customized approach. Similarly, in 2008, 75 percent of investigations (96,347 investigations or 40.45 per 1,000 children) involved a customized approach.

Child Age in Investigations

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

In 2018, an estimated 28 percent of investigations involved children aged four to seven years old (41,217 investigations or 69.43 investigations per 1,000 children aged four to seven). Another 28 percent of investigations involved children aged eight to eleven years old (41,177 investigations or 67.60 per 1,000 children aged eight to eleven). In 2013, 29,907 investigations (or 51.48 per 1,000 children aged eight to eleven) involved children aged eight to eleven. A small proportion (six percent) of investigations in 2018 involved infants under one; the overall incidence of infant child maltreatment-related investigations was 63.00 investigations per 1,000 children under one in Ontario. The rate of investigation has remained relatively constant from 2013 to 2018 for children aged one to three years old. In 2018, 54.50 investigations per 1,000 children aged one to three were conducted in Ontario (this is compared to a rate of 51.25 investigations per 1,000 children aged one to three in 2013). Just under one quarter of investigations in Ontario in 2018 involved children aged 12 to 15 years old (34,911 investigations or 57.51 investigations per 1,000 children aged 12 to 15).

Readers should note that comparisons between age groups should always be made

on the basis of incidence rates that take into consideration variations in age rates in the general population, rather than on the basis of the count of investigations.

Types of Investigations and Substantiation Decisions

Figure 3-2 describes types of investigations and substantiation decisions resulting from maltreatment-related investigations conducted across Ontario in 2018.

The OIS-2018 tracks two types of investigations: those conducted because of a concern about a maltreatment incident that may have occurred and those conducted to assess whether there is a significant risk of future maltreatment where there is no alleged or suspected maltreatment.

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

- » **Substantiated:** the balance of evidence indicates that abuse or neglect has

occurred;

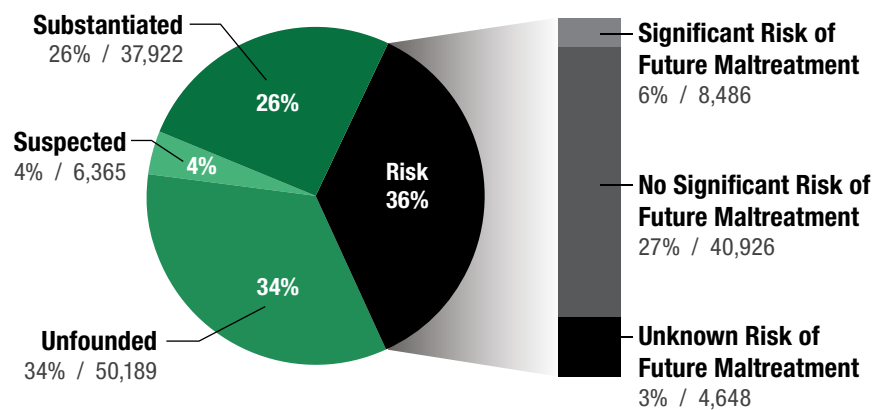
- » **Suspected:** insufficient evidence to substantiate abuse or neglect, but maltreatment cannot be ruled out;
- » **Unfounded:** the balance of evidence indicates that abuse or neglect has not occurred (unfounded does not mean that a referral was inappropriate or malicious; it simply indicates that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

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

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

Of the 148,536 investigations conducted in Ontario in 2018, 64 percent were maltreatment investigations which focused on a concern of abuse or neglect (an estimated 94,476 child maltreatment investigations or 40.00 investigations per 1,000 children), and 36 percent of investigations were concerns about risk of future maltreatment (an estimated 54,060 investigations or 22.89 investigations per 1,000 children).

FIGURE 3-2: Type of Investigation and Level of Substantiation in Ontario in 2018



Twenty-six percent of all investigations were substantiated, an estimated 37,922 child investigations. In a further four percent of investigations (an estimated 6,365 child investigations or 2.69 investigations per 1,000 children) there was insufficient evidence to substantiate maltreatment; however, maltreatment remained suspected by the investigating worker at the conclusion of the investigation. Thirty-four percent of investigations (an estimated 50,189 child investigations or 21.25 investigations per 1,000 children) were unfounded.

In six percent of all investigations, the investigating worker concluded there was a significant risk of future maltreatment

(3.59 investigations per 1,000 children, an estimated 8,486 child investigations). In 27 percent of investigations, no significant risk of future maltreatment was indicated (an estimated 40,926 investigations or 17.33 investigations per 1,000 children). In three percent of investigations, workers did not know whether the child was at significant risk of future maltreatment (an estimated 4,648 investigations or 1.97 per 1,000 children).

TABLE 3-3: Substantiation Decisions in Ontario in 1998, 2003, 2008, 2013, and 2018

Child Maltreatment Investigations	1998			2003			Maltreatment and Risk-Only Investigations	2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%		#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Substantiated Maltreatment	23,145	9.82	36%	58,425	24.44	44%	Substantiated Maltreatment	38,571	16.19	30%	43,067	18.33	34%	37,922	16.06ns	26%
							Risk of Future Maltreatment	8,237	3.46	6%	5,089	2.17	4%	8,486	3.59ns	6%
Total Substantiated Maltreatment	23,145	9.82	36%	58,425	24.44	44%	Total Substantiated Maltreatment and Risk of Future Maltreatment	46,808	19.65	36%	48,156	20.50	38%	46,408	19.65ns	31%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

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

As shown in Table 3-3, rates of substantiated maltreatment more than doubled from 1998 to 2003. Relative to this dramatic expansion, the rate of substantiated maltreatment appeared to decrease from 24.44 per 1,000 children in 2003 to 16.19 per 1,000 children in 2008. This comparison, however, is complicated since the 1998 and 2003 cycles of the OIS did not specifically track risk-only investigations. As a result, it is not possible to determine the extent to which confirmed future risk of maltreatment investigations were classified as “substantiated maltreatment.” As noted in Chapter 1, a case file validation study using a sub-sample of OIS-2003 investigations found that several cases had been coded in this manner. In 2008, investigations with confirmed risk of future maltreatment (8,237 cases at a rate of 3.46 confirmed cases of risk per 1,000 children) combined with substantiated investigations (16.19 per 1,000 children) yield a rate of 19.65 investigations per 1,000 children where either maltreatment was substantiated or future risk was confirmed. Similarly, the rate of cases with substantiated maltreatment or confirmed risk in Ontario was 20.50 per 1,000 children in 2013, and in 2018 the rate was 19.65 per 1,000 children.

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

The *OIS-2018 Maltreatment Assessment* included 18 pre-coded referral source categories and an open “other” category. Table 3-4a combines these into three main categories; any non-professional referral, any professional referral, and other or anonymous referral sources.

Non-Professional Referral Sources:

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

Child: A self-referral by any child listed on the

Intake Information Section of the OIS-2018 Maltreatment Assessment.

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

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

Professional Referral Sources:

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

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

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

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

Referral Source	1998			2003			2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Any Non-Professional	18,493	7.85	29%	26,610	11.13	21%	29,722	12.49	23%	25,465	10.84	20%	32,786	13.88ns	22%
Any Professional	39,563	16.78	61%	90,685	37.93	71%	91,517	38.42	71%	93,467	39.78	75%	109,587	46.40ns	74%
Other/Anonymous	7,944	3.37	12%	13,377	5.60	10%	10,936	4.59	8%	9,104	3.87	7%	11,573	4.90ns	8%
Total Investigations	64,658	27.43	100%	128,108	53.59	100%	128,748	54.05	100%	125,281	53.32	100%	148,536	62.89ns	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

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

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

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

Anonymous: A caller who is not identified.

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

In 2018, 22 percent of investigations, or an estimated 32,786 investigations were referred by non-professional sources (rate of 13.88 investigations per 1,000 children), and 74 percent of investigations were referred by professionals (an estimated 109,587 investigations or 46.40 investigations per 1,000 children). In eight percent of investigations (4.90 investigations per 1,000 children) the referral source was either anonymous or categorized as an “other” source of referral.

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

Table 3-4b presents specific non-professional

and professional referral sources, as well as the anonymous and “other” categories, for all investigations conducted in 2018. Some specific referral sources have been collapsed into categories: custodial parents and non-custodial parents (Custodial or Non-Custodial Parent) and social assistance worker, crisis service/shelter, community recreation centre, community health nurse, community physician, community mental health professional, and community agency (Community, Health, or Social Services). In 2018, the largest number of referrals came from schools; 32 percent of investigations or an estimated 47,932 investigations (rate of 20.29 investigations per 1,000 children). The second largest source of referral was police (an estimated 37,552 investigations

TABLE 3-4B: Specific Referral Sources in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013 and 2018

Referral Source	2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Non Professional						
Custodial or Non Custodial Parent	15,476	6.59	12%	18,972	8.03ns	13%
Child (Subject of Referral)	379	0.16	0%	1,509	0.64*	1%
Relative	4,441	1.89	4%	5,517	2.34ns	4%
Neighbour/Friend	5,573	2.37	4%	7,517	3.18ns	5%
Professional						
Community, Health, or Social Services	11,748	5.00	9%	13,919	5.89ns	9%
Hospital (Any Personnel)	5,798	2.47	5%	8,332	3.53ns	6%
School	38,284	16.29	31%	47,932	20.29ns	32%
Other Child Welfare Service	4,909	2.09	4%	3,330	1.41ns	2%
Day Care Centre	934	0.40	1%	1,661	0.70ns	1%
Police	34,003	14.47	27%	37,552	15.90ns	25%
Other	4,471	1.90	4%	5,011	2.12ns	3%
Anonymous						
Anonymous	4,633	1.97	4%	6,626	2.81ns	4%
Total Investigations	125,281	53.32	100%	148,536	62.89ns	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

* p < 0.01

or 25 percent of investigations). Custodial or non-custodial parent was the largest non-professional referral source (13 percent of investigations or a rate of 8.03 investigations per 1,000 children). This is a similar pattern as in 2013, in which the largest number of professional referrals came from schools and police, and the largest number of referrals from non-professionals was from parents. The only statistically significant difference between 2013 and 2018 was an increase in the rate of referrals made by a child (who was the subject of the referral).

Rates of Ongoing Services, Placement, and Court

Three key service events can occur as a result of a child welfare investigation: a decision is made to close a case or to provide ongoing services, a child may be brought into out-of-home care, and an application can be made for a child welfare court order. While the OIS tracks any of these decisions made during the initial investigation, the study does not track events that occur after the initial investigation has closed or been transferred to ongoing

services. Additional admissions to out-of-home care, for example, are likely to occur for cases kept open after the initial investigation. It should also be noted that investigation intervention statistics presented apply only to child welfare investigations initiated because of alleged maltreatment or risk of future maltreatment.

Ongoing Child Welfare Services

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

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

Provision of Ongoing Services	1998			2003			2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Case to Stay Open for Ongoing Services	18,498	7.85	30%	30,994	12.96	24%	31,693	13.29	25%	30,836	13.12	25%	29,407	12.45ns	20%
Case to be Closed	43,489	18.45	70%	97,012	40.58	76%	97,030	40.73	75%	92,327	39.29	75%	119,129	50.44ns	80%
Total Investigations	61,987	26.30	100%	128,006	53.54	100%	128,723	54.04	100%	123,163	52.42	100%	148,536	62.89ns	100%

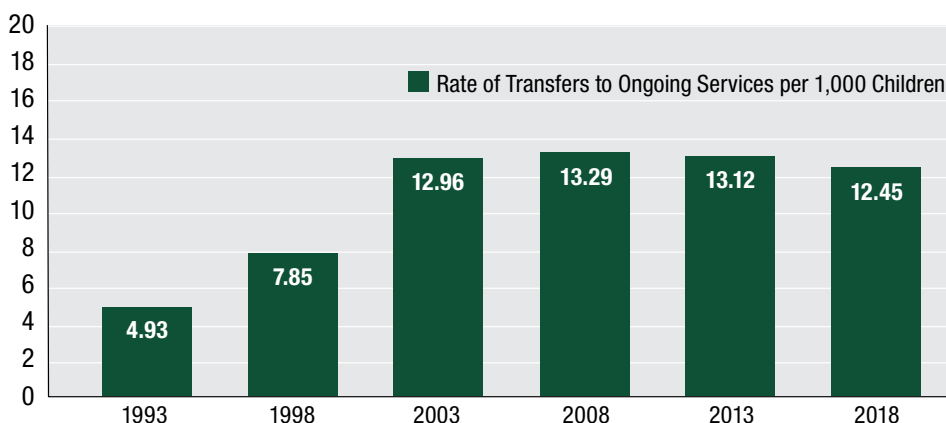
Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 2,946 investigations in 1998, 7,168 investigations in 2003, 7,470 investigations in 2008, 5,193 investigations in 2013, and 7,115 investigations in 2018.

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

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



The rate of transfers to ongoing services after the conclusion of a child maltreatment-related investigation has more than doubled since 1993: from 4.93 per 1,000 children to 12.45 per 1,000 children.

An estimated 29,407 investigations remained open for ongoing services in Ontario in 2018, a rate of 12.45 investigations per 1,000 children or 20 percent of all investigations. In an estimated 119,129 investigations, the case was closed following the initial investigation (a rate of 50.44 investigations per 1,000 children or 80 percent of all investigations). The proportion of cases opened and closed at the conclusion of an investigation was identical in 2013 and 2008: 25 percent transferred for ongoing services; 75 percent closed at initial investigation. As with all the other major trends documented by the OIS, this non-significant increase follows a significant increase in cases open for ongoing services documented from 7.85 per 1,000 in 1998 to 12.96 per 1,000 in 2003.

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

Placement Status	1998			2003			2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Child Remained at Home	58,611	24.86	91%	121,109	50.66	95%	121,436	50.98	94%	121,020	51.51	97%	144,351	61.12ns	97%
Child with Relative (Not a Formal Child Welfare Placement)	2,779	1.18	4%	2,748	1.15	2%	3,616	1.52	3%	1,874	0.80	1%	2,488	1.05ns	2%
Foster Care (Includes Foster and Kinship Care)	2,416	1.02	4%	3,023	1.26	2%	3,004	1.26	2%	2,105	0.90	2%	1,523	0.64ns	1%
Group Home/ Residential Secure Treatment	824	0.35	1%	1,074	0.45	1%	692	0.29	1%	282	0.12	0.23%	174	0.07ns	0%
Total Investigations	64,630	27.42	100%	127,955	53.52	100%	128,748	54.05	100%	125,281	53.32	100%	148,536	62.89ns	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

Out-of-Home Placement

The OIS tracks placements in out-of-home care that occur at any time during the investigation. Investigating workers are asked to specify the type of placement. In cases where there may have been more than one placement, workers are asked to indicate the setting where the child had spent the most time. The following placement classifications were used:

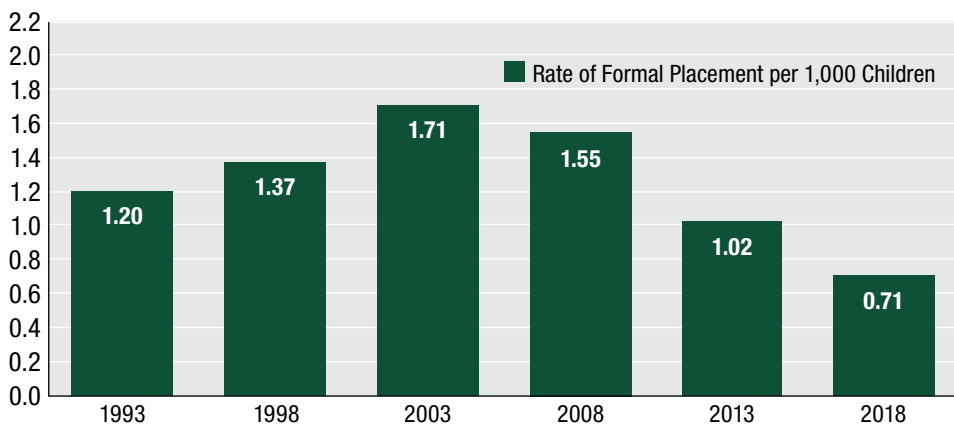
No Placement Required: No placement is required following the investigation.

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

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

Customary Care: A model of Indigenous

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



The rate of formal placement in Ontario at the conclusion of a child maltreatment-related investigation has remained relatively consistent across six cycles of the OIS. However, there was a statistically significant decrease in the rate of formal placement between 2008 and 2018. The rate was highest in 2003 (1.71 per 1,000 children) and lowest in 2018 (0.71 per 1,000 children).

child welfare service that is culturally relevant and incorporates the unique traditions and customs of each First Nation.

Kinship in Care: A formal placement has been arranged within the family support network; the child welfare authority has

temporary or full custody and is paying for the placement.

Foster Care (Non-Kinship): Includes any family-based care, including foster homes, specialized treatment foster homes, and assessment homes.

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

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

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

In 2018, the child remained at home in 97 percent of all investigations (an estimated 144,351 investigations or 61.12 investigations per 1,000 children). Three percent of investigations resulted in a change of residence for the child: two percent to informal kinship care (an estimated 2,488 investigations or 1.05 investigations per 1,000 children); one percent to foster care (an estimated 1,523 investigations or 0.64 investigations per 1,000 children); and less than one percent to residential/secure treatment or group homes (an estimated 174 investigations or 0.07 investigations per 1,000 children).

TABLE 3-6B: Placement in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Placement Status	2018		
	#	Rate per 1,000 children	%
No Placement Required	142,729	60.43	96%
Placement Considered	1,621	0.69	1%
Kinship Out of Care	2,422	1.03	2%
Customary Care	-	-	0%
Kinship in Care	130	0.06	0%
Foster Care	1,388	0.59	1%
Group Home	147	0.06	0%
Residential/Secure Treatment	-	-	0%
Total Investigations	148,536	62.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 7,115 investigations in 2018. Columns may not add up to total because low frequency estimates are not reported but are included in total.

- Estimate was < 100 investigations.

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

Table 3-6b presents specific placements for all investigations conducted in 2018. The two most common placement types were kinship out of care (an estimated 2,422 investigations

or 1.03 investigations per 1,000 children) and foster care (an estimated 1,388 investigations or 0.57 investigations per 1,000 children).

Residential/secure treatment placements were uncommon, as were customary care placements. Placement was still being considered at the conclusion of the initial investigation in an estimated 1,621 investigations (rate of 0.69 investigations

TABLE 3-7: History of Previous Investigations in Child Maltreatment Investigations in Ontario in 1998 and 2003, and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013 and 2018

Previous Investigations	1998			2003			2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Child Previously Investigated	28,432	12.06	22%	61,055	25.54	48%	59,039	24.79	46%	71,038	30.23	57%	72,606	30.74ns	49%
Child Not Previously Investigated	34,201	14.51	27%	65,995	27.61	52%	68,849	28.9	53%	53,360	22.71	43%	73,691	31.20ns	50%
Unknown	1,880	0.80	1%	1,017	0.43	1%	821	0.34	1%	883	0.38	1%	2,239	0.95ns	2%
Total Investigations	64,513	27.37	100%	128,067	53.57	100%	128,709	54.03	100%	125,281	53.32	100%	148,536	62.89ns	100%

TABLE 3-8: Applications to Child Welfare Court in Child Maltreatment Investigations in Ontario in 1998 and 2003, and in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008, 2013, and 2018

Child Welfare Court Application	1998			2003			2008			2013			2018		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
No Application to Court	61,700	26.17	96%	124,061	51.89	97%	125,197	52.56	97%	122,062	51.95	97%	146,029	61.83ns	98%
Application Made	2,839	1.20	4%	3,780	1.58	3%	3,551	1.49	3%	3,220	1.37	3%	2,507	1.06ns	2%
Total Investigations	64,539	27.38	100%	127,841	53.48	100%	128,748	54.05	100%	125,282	53.32	100%	148,536	62.89ns	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

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

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

ns Difference between 2013 and 2018 incidence rate is not statistically significant.

per 1,000 children or one percent of investigations).

Previous Child Maltreatment Investigations

Workers were asked if the investigated child had been previously investigated by a child welfare agency for suspected maltreatment. In 2018, approximately half of all investigations involved a child who had been previously investigated.

In 49 percent of investigations, workers indicated that the child had been previously

investigated for alleged maltreatment (72,606 investigations, representing a rate of 30.74 investigations per 1,000 children). In 50 percent of investigations, the child had not been previously investigated for suspected maltreatment (73,691 investigations, representing a rate of 31.20 investigations per 1,000 children). In two percent of investigations, the investigating worker did not know whether the child had been previously investigated (an estimated 2,239 investigations, representing a rate of 0.95 investigations per 1,000 children).

There was no statistically significant change in the rate of previous investigations for

suspected maltreatment between the OIS-2003 (25.54 per 1,000), OIS-2008 (24.79 per 1,000), OIS-2013 (30.23), and OIS-2018 (30.74).

Child Welfare Court Applications

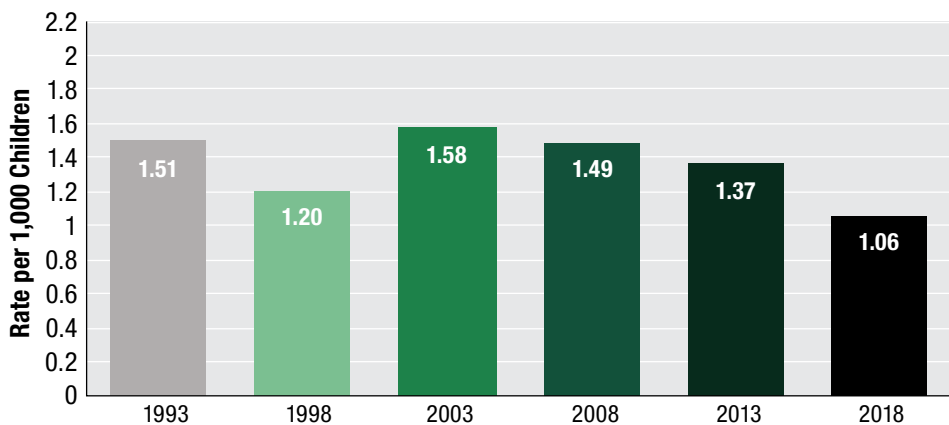
Table 3-8 describes any applications made to child welfare court during the investigation period. Applications to child welfare court can be made for a number of reasons, including orders of supervision with the child remaining in the home, as well as out-of-home placement orders ranging from temporary to permanent. Although applications to court can be made during the investigation period, where possible, non-court ordered services should be offered before an application is made to court. Because the OIS can only track applications made during the investigation period, the OIS court application rate does not account for applications made at later points of service.

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

No Application: Court involvement was not considered.

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

FIGURE 3-5: Rate of Use of Child Welfare Court in Child Maltreatment-Related Investigations in 1993, 1998, 2003, 2008, 2013, and 2018 in Ontario



The rate of use of child welfare court is stable across cycles of the OIS. The rate of use of court was lowest in 2018 (1.06 per 1,000 children) and highest in 2003 (1.58 per 1,000 children).

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

Table 3-8 collapses “no court” and “court considered” into a single category (No Application to Court).

In the OIS-2018, two percent of all child investigations (an estimated 2,507 investigations or a rate of 1.06 investigations per 1,000 children) resulted in an application to child welfare court, either during or at the completion of the initial investigation. This is less than the rate in the OIS-2013, which was 1.37 court applications per 1,000 children.

CHAPTER 4: CHARACTERISTICS OF MALTREATMENT

The OIS-2018 definition of child maltreatment includes 33 forms of maltreatment subsumed under five categories: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence (see Question 30: Maltreatment Codes in the OIS-2018 Guidebook in Appendix E).

Each investigation of maltreatment had a minimum of one and a maximum of three identified forms of maltreatment. In cases involving more than three forms of maltreatment, investigating workers were asked to select the three forms that best described the reason for investigation. More than one form of maltreatment was identified for 11 percent of substantiated child maltreatment investigations (see Table 4-2). The primary form of maltreatment was the form that best characterized the investigated maltreatment. In cases where there was more than one form of maltreatment, and one form of maltreatment was substantiated and one was not, the substantiated form was automatically selected as the primary form.

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

The estimates presented in this chapter are derived from child maltreatment investigations from a representative sample of child welfare agencies in 2018. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates do not include (1) incidents that were not reported to child welfare agencies, (2) reported cases that were screened out by child welfare agencies before being fully investigated, (3) new reports on cases already open by child welfare services, (4) cases that were investigated only by the police, and (5) cases that were only investigated because of concerns about future risk. Readers are cautioned that the findings presented in this chapter are not directly comparable to

TABLE 4-1: Primary Category of Substantiated Maltreatment in Ontario in 2018

Primary Category of Maltreatment	#	Rate per 1,000 children	%
Physical Abuse	7,081	3.00	19%
Sexual Abuse	1,019	0.43	3%
Neglect	8,082	3.42	21%
Emotional Maltreatment	4,689	1.99	12%
Exposure to Intimate Partner Violence	17,051	7.22	45%
Total Substantiated Investigations	37,922	16.06	100%

*Ontario Incidence Study of Reported Child Abuse and Neglect 2018
Based on a sample of 1,812 substantiated investigations in 2018.
Rate and percentage columns may not add to totals due to rounding.*

findings presented in the OIS-2003, OIS-1998, and OIS-1993 reports (see Chapter 1).

Primary Categories of Maltreatment

Table 4-1 presents the estimates and incidence rates for the five primary categories of substantiated maltreatment in Ontario in 2018. The maltreatment typology in the OIS-2018 uses five major types of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence. Physical abuse was comprised of six forms: shake, push, grab or throw; hit with hand; punch kick or bite; hit with object; choking, poisoning, stabbing; and other physical abuse. Sexual abuse contained nine forms: penetration; attempted penetration; oral sex; fondling; sex talk or images; voyeurism; exhibitionism; exploitation; and other sexual abuse. Neglect was comprised of eight forms: failure to supervise, physical harm; failure to supervise, sexual abuse; permitting criminal behaviour; physical neglect; medical neglect (includes dental); failure to provide psychiatric or psychological treatment; abandonment; and educational neglect. Emotional maltreatment included seven forms: terrorizing or threat of violence; verbal abuse or belittling; isolation/

confinement; inadequate nurturing or affection; exploiting or corrupting behaviour; alienating the other parent; and exposure to non-partner violence. Exposure to intimate partner violence was comprised of three forms: direct witness to physical violence; indirect exposure to physical violence; and exposure to emotional violence. See Question 30: Maltreatment Codes in the OIS-2018 Guidebook in Appendix E for specific definitions of each maltreatment form.

There were an estimated 37,922 substantiated child maltreatment investigations in Ontario in 2018 (16.06 investigations per 1,000 children). Exposure to intimate partner violence represents the largest proportion of substantiated maltreatment investigations. Nearly half (45 percent) of all substantiated investigations identified exposure to intimate partner violence as the primary form of maltreatment (an estimated 17,051 investigations or 7.22 investigations per 1,000 children). In 21 percent of substantiated investigations, neglect was identified as the overriding concern, an estimated 8,082 investigations (3.42 investigations per 1,000 children). In 19 percent of substantiated investigations, or an estimated 7,081 investigations, the primary form of maltreatment identified was physical abuse (3.00 investigations per 1,000 children). Emotional maltreatment was identified as

TABLE 4-2: Single and Multiple Categories of Substantiated Child Maltreatment in Ontario in 2018

	#	Rate per 1,000 children	%
Single Form of Substantiated Maltreatment			
Physical Abuse Only	5,218	2.21	14%
Sexual Abuse Only	871	0.37	2%
Neglect Only	7,443	3.15	20%
Emotional Maltreatment Only	4,340	1.84	11%
Exposure to Intimate Partner Violence Only	15,719	6.66	41%
Subtotal: Only One Form of Substantiated Maltreatment	33,591	14.22	89%
Multiple Categories of Substantiated Maltreatment			
Physical Abuse and Sexual Abuse	-	-	0%
Physical Abuse and Neglect	182	0.08	0%
Physical Abuse and Emotional Maltreatment	657	0.28	2%
Physical Abuse and Exposure to Intimate Partner Violence	1,307	0.55	3%
Sexual Abuse and Neglect	125	0.05	0%
Sexual Abuse and Emotional Maltreatment	0	0.00	0%
Sexual Abuse and Exposure to Intimate Partner Violence	-	-	0%
Neglect and Emotional Maltreatment	358	0.15	1%
Neglect and Exposure to Intimate Partner Violence	629	0.27	2%
Emotional Maltreatment and Exposure to Intimate Partner Violence	654	0.28	2%
Physical Abuse, Sexual Abuse, and Neglect	0	0.00	0%
Physical Abuse, Sexual Abuse, and Emotional Maltreatment	0	0.00	0%
Physical Abuse, Sexual Abuse, and Exposure to Intimate Partner Violence	-	-	0%
Physical Abuse, Neglect, and Emotional Maltreatment	-	-	0%
Physical Abuse, Neglect, and Exposure to Intimate Partner Violence	-	-	0%
Physical Abuse, Emotional Maltreatment, and Exposure to Intimate Partner Violence	241	0.10	1%
Sexual Abuse, Neglect, and Emotional Maltreatment	0	0.00	0%
Sexual Abuse, Neglect, and Exposure to Intimate Partner Violence	0	0.00	0%
Neglect, Emotional Maltreatment, and Exposure to Intimate Partner Violence	-	-	0%
Total Substantiated Maltreatment	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,812 substantiated investigations in 2018.

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

-Estimate was < 100 investigations.

the primary form of maltreatment in another 12 percent of substantiated investigations (an estimated 4,689 investigations or 1.99 investigations per 1,000 children). In a small proportion of investigations (three percent), sexual abuse was identified as the primary maltreatment form (an estimated 1,019 investigations or 0.43 investigations per 1,000 children).

Single and Multiple Categories of Maltreatment

The OIS tracks up to three forms of maltreatment; while Table 4-1 describes the primary form of substantiated maltreatment, Table 4-2 describes cases of substantiated maltreatment involving multiple categories of maltreatment. In most cases (89 percent) only one form of substantiated maltreatment was documented; in the remaining 11 percent of substantiated investigations, multiple forms of substantiated maltreatment were documented.

Single Categories of Maltreatment: An estimated 33,591 substantiated investigations involved only one category of substantiated

maltreatment (14.22 investigations per 1,000 children). Physical abuse was identified as the single category of maltreatment in 14 percent of investigations; two percent of investigations involved only sexual abuse; 20 percent involved neglect only; 11 percent involved only emotional maltreatment; and 41 percent involved allegations of exposure to intimate partner violence only.

Multiple Categories of Maltreatment:

An estimated 4,331 investigations involved more than one category of substantiated maltreatment (1.83 investigations per 1,000 children). The most frequently identified combinations were physical abuse and exposure to intimate partner violence (an estimated 1,307 investigations or 0.55 investigations per 1,000 children), physical abuse and emotional maltreatment (an estimated 657 investigations or 0.28 investigations per 1,000 children), emotional maltreatment and exposure to intimate partner violence (an estimated 654 investigations or 0.28 investigations per 1,000 children), and neglect and exposure to intimate partner violence (an estimated 629 investigations or 0.27 investigations per 1,000 children).

Physical Harm

The OIS-2018 tracked physical harm identified by the investigating worker. Information on physical harm was collected using two measures: one describing severity of harm as measured by medical treatment needed and one describing the nature of harm.

Physical harm was identified in five percent of cases of substantiated maltreatment (Table 4-3). In four percent of substantiated investigations (an estimated 1,465 substantiated investigations, or 0.62 investigations per 1,000 children) physical harm was noted but no medical treatment was required. In a further one percent of substantiated investigations (an estimated 526 substantiated investigations, or 0.22 investigations per 1,000 children), harm was sufficiently severe to require treatment.

Physical Abuse: Physical harm was indicated in 18 percent of investigations where physical abuse was the primary substantiated maltreatment, an estimated 1,305 child investigations. In the majority of investigations where physical harm was noted (1,123 substantiated physical abuse investigations), the harm was not severe enough to require treatment. In only a small proportion of

TABLE 4-3: Physical Harm by Primary Category of Substantiated Child Maltreatment in Ontario in 2018

Physical Harm	Physical Abuse			Sexual Abuse			Neglect			Emotional Maltreatment			Exposure to Intimate Partner Violence			Total		
	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Physical Harm, No Medical Treatment Required	1,123	0.48	16%	-	-	3%	134	0.06	2%	-	-	0%	169	0.07	1%	1,465	0.62	4%
Physical Harm, Medical Treatment Required	182	0.08	3%	-	-	5%	197	0.08	2%	0	0.00	0%	-	-	1%	526	0.22	1%
Subtotal: Any Physical Harm Documented	1,305	0.55	18%	-	-	8%	331	0.14	4%	-	-	0%	265	0.11	2%	1,991	0.84	5%
No Physical Harm Documented	5,776	2.45	82%	941	0.40	92%	7,751	3.28	96%	4,677	1.98	100%	16,786	7.11	98%	35,931	15.21	95%
Total Substantiated Investigations	7,081	3.00	100%	1,019	0.43	100%	8,082	3.42	100%	4,689	1.99	100%	17,051	7.22	100%	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,812 substantiated child maltreatment investigations in 2018.

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

-Estimate was < 100 investigations.

investigations (182 substantiated physical abuse investigations), medical treatment was required. The fact that no physical harm was noted in 82 percent of physical abuse cases may seem surprising to some readers. It is important to understand that physical abuse may include caregiver behaviours that seriously endanger children, as well as those that do not involve documented injuries.

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

Neglect: Physical harm was indicated in four percent of investigations where neglect was the primary substantiated maltreatment. In an estimated 197 substantiated neglect cases that involved physical harm, the investigating worker noted injuries severe enough to require medical treatment (two percent of substantiated neglect cases).

Emotional Maltreatment: Estimates of physical harm in substantiated emotional maltreatment investigations were too low to reliably report.

Exposure to Intimate Partner Violence: Physical harm was identified in two percent of cases where exposure to intimate partner violence was the primary form of substantiated maltreatment.

Nature of Physical Harm

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

No Harm: There was no apparent evidence

TABLE 4-4: Nature of Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2018

Nature of Physical Harm	Total		
	#	Rate per 1,000 children	%
No Physical Harm	35,931	15.21	95%
Bruises, Cuts, and Scrapes	1,537	0.65	4%
Burns and Scalds	-	-	0%
Broken Bones	-	-	0%
Head Trauma	-	-	0%
Fatality	0	0.00	0%
Other Health Conditions	291	0.12	1%
At Least One Type of Physical Harm	1,991	0.84	5%
Total Substantiated Investigations	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,812 substantiated investigations in 2018.

Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total. Children may have experienced multiple types of harm.

-Estimate was < 100 investigations.

of physical harm to the child as a result of maltreatment.

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

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

Broken Bones: The child suffered fractured bones.

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

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

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

Table 4-4 presents seven types of physical harm reported in the OIS-2018. Physical harm was documented in five percent of substantiated maltreatment investigations

(1,991 investigations or 0.84 investigations per 1,000 children). Physical harm primarily involved bruises, cuts, and scrapes (four percent of substantiated maltreatment) and other health conditions (one percent of substantiated maltreatment). Because the OIS-2018 estimates are based on a very small number of cases involving physical harm, the estimates presented in Table 4-4 should be interpreted with caution.

Documented Emotional Harm

Considerable research indicates that child maltreatment can lead to emotional harm. Child welfare workers are often among the first to become aware of the emotional effects of maltreatment, either through their observations or through contact with allied professionals. However, the information collected in the OIS-2018 is limited to the initial assessment period and may, therefore, under count emotional harm. If the maltreatment was substantiated or suspected, workers were asked to indicate whether the child was showing signs of emotional harm (e.g., nightmares, bed wetting, or social

TABLE 4-5: Documented Emotional Harm by Primary Category of Substantiated Child Maltreatment in Ontario in 2018

	Primary Category of Substantiated Maltreatment																	
	Physical Abuse			Sexual Abuse			Neglect			Emotional Maltreatment			Exposure to Intimate Partner Violence			Total		
Documented Emotional Harm	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Emotional Harm, No Treatment Required	751	0.32	11%	0	0.00	0%	704	0.30	9%	1,021	0.43	22%	3,292	1.39	19%	5,768	2.44	15%
Emotional Harm, Treatment Required	1,128	0.48	16%	590	0.25	58%	1,152	0.49	14%	1,817	0.77	39%	3,104	1.31	18%	7,791	3.30	21%
Subtotal: Any Emotional Harm Documented	1,879	0.80	27%	590	0.25	58%	1,856	0.79	23%	2,838	1.20	61%	6,396	2.71	38%	13,559	5.74	36%
No Emotional Harm Documented	5,202	2.20	73%	429	0.18	42%	6,226	2.64	77%	1,851	0.78	39%	10,655	4.51	62%	24,363	10.32	64%
Total Substantiated Investigations	7,081	3.00	100%	1,019	0.43	100%	8,082	3.42	100%	4,689	1.99	100%	17,051	7.22	100%	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018
 Based on a sample of 1,812 substantiated child maltreatment investigations in 2018.
 Rate and percentage columns may not add to totals due to rounding.

TABLE 4-6: Duration of Maltreatment by Primary Category of Substantiated Child Maltreatment in Ontario in 2018

	Primary Category of Substantiated Maltreatment																	
	Physical Abuse			Sexual Abuse			Neglect			Emotional Maltreatment			Exposure to Intimate Partner Violence			Total		
Duration of Maltreatment	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Single Incident	4,002	1.69	57%	385	0.16	38%	3,501	1.48	43%	1,870	0.79	40%	7,400	3.13	43%	17,158	7.26	45%
Multiple Incidents	3,079	1.30	43%	634	0.27	62%	4,581	1.94	57%	2,819	1.19	60%	9,651	4.09	57%	20,764	8.79	55%
Total Substantiated Investigations	7,081	3.00	100%	1,019	0.43	100%	8,082	3.42	100%	4,689	1.99	100%	17,051	7.22	100%	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018
 Based on a sample of 1,812 substantiated child maltreatment investigations in 2018.
 Rate and percentage columns may not add to totals due to rounding.

withdrawal) following the maltreatment incident(s). These maltreatment-specific descriptions of emotional harm are not to be confused with the general child functioning ratings that are presented in Chapter 5. It is also important to note that while many victims may not show symptoms of emotional harm at the time of the investigation, the effects of the maltreatment may only manifest later. Therefore, the emotional harm documented by the OIS underestimates the emotional effects of maltreatment.

Within each of the primary categories of maltreatment, Table 4-5 presents whether or

not emotional harm was identified during the child maltreatment investigation. In order to rate the severity of emotional harm, workers indicated whether the child required treatment to manage the symptoms of emotional harm. Emotional harm was noted in 36 percent of all substantiated maltreatment investigations (an estimated 13,559 substantiated investigations or 5.74 investigations per 1,000 children). In 21 percent of substantiated investigations (an estimated 7,791 investigations or 3.30 investigations per 1,000 children), emotional harm was severe enough to require therapeutic treatment.

Physical Abuse: Emotional harm was noted in 27 percent of cases where physical abuse was the primary substantiated maltreatment. In 16 percent of substantiated physical abuse investigations, symptoms of emotional harm were severe enough to require treatment.

Sexual Abuse: Emotional harm was noted in more than half (58 percent) of investigations where sexual abuse was the primary substantiated concern. In all sexual abuse investigations where emotional harm was noted, the emotional harm was sufficiently severe to require treatment.

Neglect: Emotional harm was identified in 23 percent of investigations where neglect was the primary substantiated maltreatment; in 14 percent of substantiated neglect investigations, harm was sufficiently severe to require treatment.

Emotional Maltreatment: Emotional harm was identified in 61 percent of investigations where substantiated emotional maltreatment was the primary concern, and was sufficiently severe to require treatment in 39 percent of substantiated emotional maltreatment investigations. While it may appear surprising to some readers that no emotional harm was documented for such a large proportion of emotionally maltreated children, it is important to understand that the determination of emotional maltreatment includes parental behaviours that would be considered emotionally abusive or neglectful even though the child shows no symptoms of harm.

Exposure to Intimate Partner Violence: Emotional harm was identified in 38 percent of investigations where exposure to intimate partner violence was the primary substantiated maltreatment; in 18 percent of substantiated exposure to intimate partner violence investigations, harm was sufficiently severe to require treatment.

Duration of Maltreatment

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

Table 4-6 shows that 45 percent of substantiated investigations (an estimated 17,158 child investigations, or 7.26 investigations per 1,000 children) involved

single incidents of maltreatment and 55 percent involved multiple incidents of maltreatment (an estimated 20,764 child investigations, or 8.79 investigations per 1,000 children).

Physical Abuse: Maltreatment was indicated as a single incident in 57 percent of substantiated physical abuse investigations, and multiple incidents in 43 percent of these investigations.

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

Neglect: Single incidents of neglect occurred in approximately 43 percent of investigations in which neglect was the primary form of substantiated maltreatment. Multiple incidents of neglect were noted in 57 percent of these investigations.

Emotional Maltreatment: Forty percent of substantiated emotional maltreatment investigations involved single incidents of emotional maltreatment, and 60 percent involved multiple incidents.

Exposure to Intimate Partner Violence: Forty-three percent of investigations in which exposure to intimate partner violence was the primary form of substantiated maltreatment involved single incidents, whereas 57 percent involved multiple incidents.

CHAPTER 5: CHARACTERISTICS OF CHILDREN AND FAMILIES

This chapter provides a description of substantiated maltreatment investigations in terms of the characteristics of the children, their caregivers, and their homes. The estimates presented in this chapter are weighted Ontario estimates derived from child maltreatment investigations conducted in 2018 in a sample of Ontario child welfare agencies. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates do not include (1) incidents that were not reported to child welfare agencies, (2) reported cases that were screened out by child welfare agencies before being fully investigated, (3) new reports on cases already open by child welfare agencies, (4) cases that were investigated only by the police, and (5) cases that were investigated because of concerns about future risk. Readers are cautioned that the findings presented in this chapter are not directly comparable to findings presented in the OIS-2003, OIS-1998, and OIS-1993 reports (see Chapter 1).

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

Table 5-1a presents the children's age and sex in all maltreatment-related investigations as well as in substantiated maltreatment investigations involving children aged less than one to 15 years. The incidence of maltreatment-related investigations was very similar for males (63.20 investigations per 1,000 boys) and females (62.56 per 1,000 girls). There was some variation by age and sex in incidence of maltreatment-related investigations. The highest incidence rate for

girls was for four to seven year olds (68.72 investigations per 1,000 girls four to seven years old). The highest incidence rate for boys was for eight to eleven year olds (72.04 investigations per 1,000 boys eight to eleven years old).

The incidence of substantiated maltreatment investigations was almost identical for males (15.99 per 1,000 boys) and females (16.13 per 1,000 girls). As with all maltreatment-related investigations, there was some variation by age and sex in the incidence of substantiated maltreatment, with rates being highest for males aged eight years (23.76 substantiated investigations per 1,000 males aged eight years) and lowest for females aged one year (7.62 substantiated cases per 1,000 females aged one year).

Table 5-1b presents the children's age and sex in all maltreatment-related investigations and substantiated maltreatment investigations involving 16 and 17 year olds.

Documented Child Functioning Concerns

Child functioning concerns were documented on the basis of a checklist of challenges that child welfare workers were likely to be aware of as a result of their investigations. The child functioning checklist (see Appendix D, OIS-2018 Maltreatment Assessment) was developed in consultation with child welfare workers and researchers to reflect the types of concerns that may be identified during an investigation. The checklist is not a validated measurement instrument for which population norms have been established. The checklist only documents problems that are known to investigating child welfare workers and, therefore, may undercount the occurrence of some child functioning problems. Investigating workers were asked to indicate problems that had been confirmed by a diagnosis,

directly observed by the investigating worker or another worker, and/or disclosed by the parent or child, as well as issues that they suspected were problems but could not fully verify at the time of the investigation. The six-month period before the investigation was used as a reference point where applicable. Child functioning classifications that reflect physical, emotional, cognitive, and behavioural issues were documented with a checklist that included the following categories:

Positive Toxicology at Birth: When a toxicology screen for a newborn tests positive for the presence of drugs or alcohol.

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

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

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

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

ADHD: ADHD is a persistent pattern of inattention and/or hyperactivity/impulsivity that occurs more frequently and more

TABLE 5-1A: Child Age and Sex in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations, and in Substantiated Maltreatment Investigations involving Children Aged 0–15 in Ontario in 2018

		All Investigations				Substantiated Maltreatment		
		Child Population in Ontario	Number of Investigations	Rate per 1,000 children	%	Number of Investigations	Rate per 1,000 children	%
0-15 Years	All Children	2,361,870	148,536	62.89	100%	37,922	16.06	100%
	Females	1,151,190	72,016	62.56	48%	18,567	16.13	49%
	Males	1,210,680	76,520	63.20	52%	19,355	15.99	51%
0-3 Years	Females	269,175	15,266	56.71	10%	3,315	12.32	9%
	Males	282,855	15,966	56.45	11%	3,546	12.54	9%
< 1 Year	Females	65,815	4,317	65.59	3%	684	10.39	2%
	Males	68,905	4,172	60.55	3%	844	12.25	2%
1 Year	Females	66,305	3,001	45.26	2%	505	7.62	1%
	Males	69,885	3,539	50.64	2%	847	12.12	2%
2 Years	Females	67,835	3,973	58.57	3%	1,284	18.93	3%
	Males	71,075	3,657	51.45	2%	883	12.42	2%
3 Years	Females	69,220	3,975	57.43	3%	842	12.16	2%
	Males	72,990	4,598	62.99	3%	972	13.32	3%
4-7 Years	Females	289,315	19,883	68.72	13%	4,986	17.23	13%
	Males	304,335	21,334	70.10	14%	5,628	18.49	15%
4 Years	Females	70,880	4,778	67.41	3%	1,113	15.70	3%
	Males	74,455	4,981	66.90	3%	1,281	17.21	3%
5 Years	Females	70,970	4,771	67.23	3%	1,302	18.35	3%
	Males	75,005	4,964	66.18	3%	1,229	16.39	3%
6 Years	Females	73,385	5,402	73.61	4%	1,371	18.68	4%
	Males	76,840	5,756	74.91	4%	1,638	21.32	4%
7 Years	Females	74,080	4,932	66.58	3%	1,200	16.20	3%
	Males	78,035	5,633	72.19	4%	1,480	18.97	4%
8-11 Years	Females	297,125	18,699	62.93	13%	5,328	17.93	14%
	Males	312,010	22,478	72.04	15%	5,916	18.96	16%
8 Years	Females	75,750	4,987	65.83	3%	1,517	20.03	4%
	Males	79,425	5,966	75.11	4%	1,887	23.76	5%
9 Years	Females	74,580	4,544	60.93	3%	1,257	16.85	3%
	Males	78,005	6,356	81.48	4%	1,515	19.42	4%
10 Years	Females	73,235	4,830	65.95	3%	1,278	17.45	3%
	Males	77,150	4,928	63.88	3%	956	12.39	3%
11 Years	Females	73,560	4,338	58.97	3%	1,276	17.35	3%
	Males	77,430	5,228	67.52	4%	1,558	20.12	4%
12-15 Years	Females	295,575	18,168	61.47	12%	4,938	16.71	13%
	Males	311,480	16,742	53.75	11%	4,265	13.69	11%
12 Years	Females	74,110	5,105	68.88	3%	1,179	15.91	3%
	Males	78,175	4,328	55.36	3%	1,138	14.56	3%
13 Years	Females	72,700	4,218	58.02	3%	1,309	18.01	3%
	Males	76,625	4,512	58.88	3%	1,149	15.00	3%
14 Years	Females	73,925	4,284	57.95	3%	1,248	16.88	3%
	Males	77,620	3,751	48.33	3%	737	9.49	2%
15 Years	Females	74,840	4,561	60.94	3%	1,202	16.06	3%
	Males	79,060	4,151	52.50	3%	1,241	15.70	3%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 7,115 child maltreatment-related investigations in 2018.

Based on a sample of 1,812 substantiated child maltreatment investigations in 2018.

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

TABLE 5-1B: Child Age and Sex in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations, and in Substantiated Maltreatment Investigations involving Children Aged 16 and 17 in Ontario in 2018

		All Investigations				Substantiated Maltreatment		
		Child Population in Ontario	Number of Investigations	Rate per 1,000 children	%	Number of Investigations	Rate per 1,000 children	%
16-17 Years	All Children	319,910	9,940	31.07	100%	2,555	7.99	100%
	Females	155,480	5,310	34.15	53%	1,541	9.91	60%
	Males	164,430	4,630	28.16	47%	1,014	6.17	40%
16 Years	Females	77,595	3,158	40.70	32%	1,004	12.94	39%
	Males	82,300	2,599	31.58	26%	665	8.08	26%
17 Years	Females	77,885	2,152	27.63	22%	537	6.89	21%
	Males	82,130	2,031	24.73	20%	349	4.25	14%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 475 child maltreatment-related investigations in 2018 involving 16 and 17 year olds.

Based on a sample of 118 substantiated child maltreatment investigations in 2018 involving 16 and 17 year olds.

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

severely than is typically seen in children at comparable stages of development. Symptoms are frequent and severe enough to have a negative impact on the child's life at home, at school, or in the community.

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

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

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

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

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

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

Suicide Attempts: The child has attempted to commit suicide.

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

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

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

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

Youth Criminal Justice Act Involvement:

Charges, incarceration, or alternative measures with the youth justice system.

Other: Any other conditions related to child functioning.

Table 5-2 reflects the types of problems associated with physical, emotional, and/or cognitive health, or with behaviour-specific concerns. In 37 percent of substantiated child maltreatment investigations (an estimated 13,966 child investigations or 5.91 investigations per 1,000 children), at least one child functioning concern was indicated by the investigating worker.

Depression/anxiety/withdrawal was the most frequently reported child functioning concern (16 percent of substantiated maltreatment investigations), and the second most common was academic or learning difficulties (15 percent of substantiated maltreatment investigations). Ten percent of substantiated maltreatment investigations involved a child with aggression or conduct issues, and 10 percent involved a child with ADHD. In nine percent of substantiated maltreatment investigations, the worker indicated that the child had an intellectual/developmental disability, and the worker noted attachment issues for the child in eight percent of these investigations. It is important to note that these ratings are based on the initial intake investigation and do not capture

TABLE 5-2: Child Functioning Concerns in Substantiated Child Maltreatment Investigations in Ontario in 2018

Child Functioning Concern	#	Rate per 1,000 children	%
Positive Toxicology at Birth	463	0.20	1%
FASD	494	0.21	1%
Failure to Meet Developmental Milestones	2,234	0.95	6%
Intellectual/Developmental Disability	3,386	1.43	9%
Attachment Issues	3,065	1.30	8%
ADHD	3,671	1.55	10%
Aggression/Conduct Issues	3,850	1.63	10%
Physical Disability	371	0.16	1%
Academic/Learning Difficulties	5,542	2.35	15%
Depression/Anxiety/Withdrawal	5,957	2.52	16%
Self-harming Behaviour	1,600	0.68	4%
Suicidal Thoughts	1,474	0.62	4%
Suicide Attempts	569	0.24	2%
Inappropriate Sexual Behaviour	932	0.39	2%
Running (Multiple Incidents)	744	0.32	2%
Alcohol Abuse	185	0.08	0%
Drug/Solvent Abuse	449	0.19	1%
Youth Criminal Justice Act Involvement	290	0.12	1%
Other Functioning Concern	473	0.20	1%
At Least One Child Functioning Concern	13,966	5.91	37%
No Child Functioning Concern	23,956	10.14	63%
Total Substantiated Investigations	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,812 substantiated child maltreatment investigations in 2018.

Rate and percentage columns do not add to totals because investigating workers could identify more than one child functioning concern.

child functioning concerns that may become evident after that time.

Indigenous Heritage of Investigated Children

Children's Indigenous heritage was documented by the OIS-2018 in an effort to better understand some of the factors that bring children into contact with the child welfare system. Indigenous children were identified as a key group to examine because of concerns about overrepresentation of Indigenous children in the foster care system. Indigenous children are approximately

two and a half times more likely to be substantiated than non-Indigenous children (38.03 per 1,000 Indigenous children versus 15.15 per 1,000 non-Indigenous children).

Ten percent of substantiated maltreatment investigations involved children of Indigenous heritage (Table 5-3). Four percent of substantiated maltreatment investigations involved children with First Nations status, three percent involved First Nations Non-Status children, one percent involved Métis children, one percent involved Inuit children, and one percent involved children with "other" Indigenous heritage.

Primary Caregiver Age and Sex

For each investigated child, the investigating worker was asked to indicate who the primary caregiver was and to specify this caregiver's age and sex. Table 5-4 shows the age and sex distribution of primary caregivers. In 90 percent of substantiated investigations, the person considered to be the primary caregiver was female. Approximately half (51 percent) of substantiated investigations involved caregivers between the ages of 31 and 40. Caregivers who were under 22 were relatively rare (one percent), as were caregivers over 50 (four percent).

Primary Caregiver's Relationship to the Child

The OIS-2018 gathered information on up to two of the child's caregivers living in the home. For each listed caregiver, investigating workers were asked to choose the category that described the relationship between the caregiver and each child in the home. If recent household changes had occurred, investigating workers were asked to describe the situation at the time the referral was made.

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

Table 5-5 describes the primary caregiver's relationship to the child in substantiated maltreatment investigations in Ontario in 2018. Ninety-five percent of substantiated investigations involved children whose primary caregiver was a biological parent.

TABLE 5-3: Indigenous Heritage of Children in Substantiated Child Maltreatment Investigations in Ontario in 2018

Indigenous Heritage	#	Rate per 1,000 children	%
First Nations, Status	1,705	N/A	4%
First Nations, Non-Status	1,062	N/A	3%
Métis	300	N/A	1%
Inuit	244	N/A	1%
Other Indigenous	334	N/A	1%
Subtotal: All Indigenous	3,645	38.03	10%
Not Indigenous	34,277	15.15	90%
Total Substantiated Investigations	37,922	16.06	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018
Based on a sample of 1,812 substantiated child maltreatment investigations in 2018.
Rate and percentage columns may not add to totals due to rounding.

TABLE 5-4: Age and Sex of Primary Caregiver in Substantiated Child Maltreatment Investigations in Ontario in 2018

Age of Primary Caregiver	Sex of Primary Caregiver	#	Rate per 1,000 children	%
<16 years	Females	0	0.00	0%
	Males	0	0.00	0%
16-17 years	Females	-	-	0%
	Males	0	0.00	0%
18-21 years	Females	528	0.22	1%
	Males	-	-	0%
22-30 years	Females	6,937	2.94	18%
	Males	313	0.13	1%
31-40 years	Females	17,084	7.23	46%
	Males	1,838	0.78	5%
41-50 years	Females	7,977	3.38	21%
	Males	1,112	0.47	3%
51-60 years	Females	1,097	0.46	3%
	Males	387	0.16	1%
>60 years	Females	175	0.07	0%
	Males	-	-	0%
Total	Females	33,860	14.34	90%
	Males	3,672	1.55	10%
Total Substantiated Investigations		37,532	15.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018
Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.
Rate and percentage columns may not add to totals due to rounding. Low frequency estimates are not reported but are included in total.
- Estimate was < 100 investigations.

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

Primary Caregiver Risk Factors

Concerns related to caregiver risk factors were reported by investigating workers using a checklist of nine items that were asked about each caregiver. Where applicable, the reference point for identifying concerns about caregiver risk factors was the previous six months. The checklist is not a validated measurement instrument. The checklist only documents problems that are known to investigating child welfare workers.

The checklist included:

Alcohol Abuse: Caregiver abuses alcohol.

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

Cognitive Impairment: Caregiver has a cognitive impairment.

Mental Health Issues: Any mental health diagnosis or problem.

Physical Health Issues: Chronic illness, frequent hospitalizations, or physical disability.

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

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

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

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

Table 5-6 presents primary caregiver risk factors that were noted by investigating workers. At least one primary caregiver

risk factor was identified in 78 percent of substantiated maltreatment investigations (an estimated 29,113 substantiated child investigations). The most frequently noted concerns were victim of intimate partner violence (53 percent), few social supports (30 percent), mental health issues (30 percent), perpetrator of intimate partner violence (14 percent), and alcohol abuse (12 percent).

Household Source of Income

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

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

Part-time (Fewer than 30 Hours/Week): Family income is derived primarily from at least one part-time position.

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

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

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

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

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

None: Household has no source of legal income.

TABLE 5-5: Primary Caregiver's Relationship to the Child in Substantiated Child Maltreatment Investigations in Ontario in 2018

Primary Caregiver's Relationship to the Child	#	Rate per 1,000 children	%
Biological Mother	32,103	13.59	86%
Biological Father	3,535	1.50	9%
Parent's Partner	586	0.25	2%
Kin Foster Parent	-	-	0%
Non-kin Foster Parent	-	-	0%
Adoptive Parent	372	0.16	1%
Grandparent	524	0.22	1%
Aunt/Uncle	148	0.06	0%
Other	119	0.05	0%
Total Substantiated Investigations	37,532	15.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.

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

- Estimate was < 100 investigations.

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

TABLE 5-6: Primary Caregiver Risk Factors in Substantiated Child Maltreatment Investigations in Ontario in 2018

Caregiver Risk Factors	#	Rate per 1,000 children	%
Alcohol Abuse	4,686	1.98	12%
Drug/Solvent Abuse	3,285	1.39	9%
Cognitive Impairment	1,571	0.67	4%
Mental Health Issues	11,164	4.73	30%
Physical Health Issues	2,091	0.89	6%
Few Social Supports	11,258	4.77	30%
Victim of Intimate Partner Violence	19,786	8.38	53%
Perpetrator of Intimate Partner Violence	5,336	2.26	14%
History of Foster Care/Group Home	1,693	0.72	5%
At Least One Primary Caregiver Risk Factor	29,113	12.33	78%
Total Substantiated Investigations	37,532	15.89	100%

Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.

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

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

TABLE 5-7: Household Source of Income in Substantiated Child Maltreatment Investigations in Ontario in 2018

Household Source of Income	#	Rate per 1,000 children	%
Full-time Employment	18,962	8.03	51%
Part-time/Multiple Jobs/Seasonal Employment	4,097	1.73	11%
Benefits/EI/Social Assistance	9,669	4.09	26%
Unknown	2,075	0.88	6%
None	2,729	1.16	7%
Total Substantiated Investigations	37,532	15.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.

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

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

TABLE 5-8: Housing Type in Substantiated Child Maltreatment Investigations in Ontario in 2018

Housing Type	#	Rate per 1,000 children	%
Own Home	12,339	5.22	33%
Rental	17,459	7.39	47%
Public Housing	3,350	1.42	9%
Band Housing	185	0.08	0%
Shelter/Hotel	391	0.17	1%
Living with Friends/Family	1,858	0.79	5%
Other	-	-	0%
Unknown	1,917	0.81	5%
Total Substantiated Investigations	37,532	15.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.

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

- Estimate was < 100 investigations.

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

Unknown: Household source of income was not known.

In Table 5-7 the income sources are collapsed into full-time employment, part-time employment (which includes seasonal and multiple jobs), social assistance/employment insurance/other benefits, unknown, and none. Table 5-7 shows the source of income for the households of children with

substantiated maltreatment as tracked by the OIS-2018. Fifty-one percent of investigations (or 18,962 substantiated maltreatment investigations) involved children in families that derived their primary income from full-time employment. Twenty-six percent involved children whose families received social assistance/employment insurance/other benefits as their primary source of income (9,669 substantiated maltreatment

investigations). Eleven percent of families relied on part-time work, multiple jobs, or seasonal employment. In seven percent of substantiated investigations no reliable source of income was reported, and in six percent of substantiated investigations the source of income was unknown by the workers.

Housing Type

Table 5-8 presents housing type for substantiated maltreatment investigations. Investigating workers were asked to select the housing accommodation category that best described the investigated child's living situation.

The types of housing included:

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

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

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

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

Living with Friends/Family: Living with a friend or family member.

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

Shelter: A homeless or family shelter.

Unknown: Housing accommodation is unknown.

Other: Any other form of shelter.

At the time of the study, 56 percent of all substantiated investigations involved children living in rental accommodations (47 percent in private rentals and nine percent in public housing), 33 percent involved children living

TABLE 5-9: Family Moves Within the Last Twelve Months in Substantiated Child Maltreatment Investigations in Ontario in 2018

Frequency of Family Moves	#	Rate per 1,000 children	%
No Moves in the Last Twelve Months	20,118	8.52	54%
One Move	7,030	2.98	19%
Two or More Moves	3,005	1.27	8%
Unknown	7,379	3.12	20%
Total Substantiated Investigations	37,532	15.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.

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

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

TABLE 5-10: Housing Safety in Substantiated Child Maltreatment Investigations in Ontario in 2018

Unsafe Housing Conditions	#	Rate per 1,000 children	%
Yes	2,812	1.19	7%
No	34,077	14.43	91%
Unknown	643	0.27	2%
Total Substantiated Investigations	37,532	15.89	100%

Ontario Incidence Study of Reported Child Abuse and Neglect 2018

Based on a sample of 1,795 substantiated child maltreatment investigations in 2018.

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

This question was not applicable for a sample of 17 substantiated investigations in which the case was opened under a community caregiver. A community caregiver is defined as anyone providing care to a child in an out-of-home setting (e.g., institutional setting). See Appendix C for further details. The estimated number of substantiated community caregiver investigations is 390.

in purchased homes, five percent involved children living with friends or family, one percent involved children living in shelters or hotels, less than one percent involved children living in Band housing, and less than one percent involved children living in other accommodations. In five percent of substantiated investigations, workers did not have enough information to describe the housing type (Table 5-8).

percent or 8.52 investigations per 1,000 children), whereas 19 percent had moved once (2.98 investigations per 1,000 children), and eight percent had moved two or more times (1.27 investigations per 1,000 children). In 20 percent of substantiated maltreatment investigations, whether the family had recently moved was unknown to the workers.

Family Moves

In addition to housing type, investigating workers were asked to indicate the number of household moves within the past year. Table 5-9 shows that over half of substantiated investigations involved families that had not moved in the previous twelve months (54

Housing Safety

Exposure to unsafe housing conditions was measured by investigating workers who indicated the presence or absence of unsafe conditions in the home. Unsafe housing conditions were noted in seven percent of substantiated child maltreatment investigations (1.19 investigations per 1,000 children).

Future Directions

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

Changes to the procedure for classifying investigations beginning in 2008 continues to allow analysts to examine the differences between investigations of maltreatment incidents and investigations of situations reported because of risk of future maltreatment.

For updates on the OIS and for more detailed publications visit the Canadian Child Welfare Research Portal at <http://www.cwrp.ca>.

APPENDIX A: OIS-2018 SITE RESEARCHERS

OIS-2018 Site Researchers provided training and one-on-one data collection support at the 18 OIS agencies. Their enthusiasm and dedication to the study were critical to ensuring its success.

The following is a list of Site Researchers from the Factor-Inwentash Faculty of Social Work, University of Toronto, who participated in the OIS-2018.

Barbara Fallon
(Principal Investigator)

Joanne Filippelli
(Manager)

Nicolette Joh-Carnella

Maria Harlick

Rachael Lefebvre

Data Verification and Cleaning

Data verification was completed with assistance from Kate Allan, Elizabeth Cauley, Emmaline Houston, and Melissa Van Wert. Data cleaning for the OIS-2018 was completed with assistance from Joanne Daciuk and Tara Black.

Data Analysis

Assistance in developing the sampling design and weights was provided by Yves Morin. Assistance in developing the confidence intervals was provided by Martin Chabot and Tonino Esposito.

APPENDIX B: OIS-2018 ADVISORY COMMITTEE

The OIS-2018 Advisory Committee was established to provide guidance and oversight to all phases of the research. The Advisory Committee is composed of Children's Aid Society administrators; a representative from the Ontario Ministry of Children, Community and Social Services; a representative from the Ontario Association of Children's Aid Societies; a representative from the Association of Native Child and Family Services Agencies of Ontario; and scholars. An additional function of the Advisory Committee is to ensure that the OIS respects the principles of Indigenous Ownership of, Control over, Access to, and Possession of research (OCAP principles) to the greatest degree possible given that the OIS is a cyclical study which collects data on investigations involving Indigenous and non-Indigenous children.

The following is a list of current members of the OIS-2018 Advisory Committee.

Nicole Bonnie

Chief Executive Officer,
Ontario Association of Children's
Aid Societies

Krista Budau

Supervisor of Accountability,
Children's Aid Society of Algoma

Deborah Goodman

Director of the Child Welfare Institute,
Children's Aid Society of Toronto

Meghan Henry

Manager of Transformation Implementation, Child Welfare
Secretariat,
Ministry of Children, Community and Social Services

Mark Kartusch

Executive Director,
Catholic Children's Aid Society of Toronto

Tina Malti

Professor of Psychology,
Director of the Centre for Child Development, Mental Health, and
Policy,
University of Toronto Mississauga

Brenda Moody

Director of Accountability and Strategic Initiatives,
Peel Children's Aid

Jolanta Rasteniene

Manager of Quality and Organizational Improvement,
Peel Children's Aid

Henry Parada

Professor,
School of Social Work,
Ryerson University

Kenn Richard

Founder and Director of Special Projects,
Native Child and Family Services of Toronto

Kate Schumaker

Manager of Quality Assurance and Outcomes Measurement,
Catholic Children's Aid Society of Toronto

Theresa Stevens

Executive Director,
Association of Native Child and Family Services Agencies of Ontario

Jill Stoddart

Director of Research, Development, and Outcomes,
Family and Children's Services of the Waterloo Region

APPENDIX C: GLOSSARY OF TERMS

The following is an explanatory list of terms used throughout the Ontario Incidence Study of Reported Child Abuse and Neglect 2018 (OIS-2018) Report.

Age Group: The age range of children included in the OIS-2018 sample. All data are presented for children between newborn and 15 years of age, with the exception of the data presented in Table 5-1b.

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

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

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

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

Child: The OIS-2018 defined child as age newborn to 15 inclusive.

Child Investigations: Case openings that meet the OIS-2018 inclusion criteria (see Figure 1-1).

Child Welfare Agency: Refers to child protection services and other related services. The focus of the OIS-2018 is on services that address alleged child abuse and neglect. The names designating such services vary by jurisdiction.

Childhood Prevalence: The proportion of people maltreated at any point during their childhood. The OIS-2018 does not measure prevalence of maltreatment.

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

Definitional Framework: The OIS-2018 provides an estimate of the number of cases of alleged child maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence) reported to and investigated by Ontario child welfare services in 2018 (screened-out reports are not included). The estimates are broken down by three levels of substantiation (substantiated, suspected, and unfounded). Cases opened more than once during the year are counted as separate investigations.

Differential or Alternate Response Models: A newer model of service delivery in child welfare in which a range of potential response options are customized to meet the diverse needs of families reported to child welfare. Typically involves multiple “streams” or

“tracks” of service delivery. Less urgent cases are shifted to a “community” track where the focus of intervention is on coordinating services and resources to meet the short- and long-term needs of families.

First Nations: “First Nations people” refers to Status and non-status “Indian” peoples in Canada. Many communities also use the term “First Nation” in the name of their community. Currently, there are more than 630 First Nation communities, which represent more than 50 nations or cultural groups and 50 Indigenous languages (Crown-Indigenous Relations and Northern Affairs Canada, 2019).¹

First Nations Status: An individual recognized by the federal government as being registered under the Indian Act is referred to as having First Nations Status.

Forms of Maltreatment: Specific types of maltreatment (e.g., hit with an object, sexual exploitation, or direct witness to physical violence) that are classified under the five OIS-2018 Categories of Maltreatment. The OIS-2018 captured 33 forms of maltreatment.

Indigenous Peoples: A collective name for the original peoples of North America and their descendants (often ‘Aboriginal peoples’ is also used). The Canadian constitution recognizes three groups of Indigenous peoples: Indians (commonly referred to as First Nations), Inuit, and Métis. These are three distinct peoples with unique histories, languages, cultural practices, and spiritual beliefs. More than 1.67 million people in Canada identify themselves as an Indigenous person, according to the 2016 Census National Household Survey (Crown-Indigenous

¹ *Crown-Indigenous Relations and Northern Affairs Canada (2019). Indigenous peoples and communities. Retrieved from <https://www.rcaanc-cimnac.gc.ca/eng/1100100013785/1529102490303>.*

Relations and Northern Affairs Canada, 2019).¹

Inuit: Inuit are the Indigenous people of Arctic Canada. About 64,235 Inuit live in 53 communities in: Nunatsiavut (Labrador); Nunavik (Quebec); Nunavut; and Inuvialuit (Northwest Territories and Yukon).

Level of Identification and Substantiation:

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

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

Reporting suspected child maltreatment is required by law in Ontario. The OIS-2018 does not document unreported cases.

Investigated cases are subject to various screening practices, which vary across agencies. The OIS-2018 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-2018 uses a three-tiered classification system, in which a suspected level provides an important clinical distinction for cases where maltreatment is suspected to have occurred by the investigating worker, but cannot be substantiated.

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

Maltreatment-related Investigation:

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

Métis: A distinctive peoples who, in addition to their mixed ancestry, developed their own customs and recognizable group identity separate from their Indian or Inuit and European forbearers (Crown-Indigenous Relations and Northern Affairs Canada, 2019).²

Multi-stage Sampling Design: A research design in which several systematic steps are taken in drawing the final sample to be studied. The OIS-2018 sample was drawn in three stages. First, a stratified random sample of child welfare agencies was selected from across Ontario. Second, families investigated by child welfare agencies were selected (all cases in small and medium sized agencies, a random sample in large agencies). Finally, investigated children in each family were identified for inclusion in the sample (non-investigated siblings were excluded).

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

Reporting Year: The year in which child maltreatment-related cases were opened. The reporting year for the OIS-2018 is 2018.

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

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

of the child. Placing a child at risk of harm is considered maltreatment.

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

Unit of Analysis: In the case of the OIS-2018, the unit of analysis is a child investigation.

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

1 Crown-Indigenous Relations and Northern Affairs Canada (2019). *Indigenous peoples and communities*. Retrieved from <https://www.rcaanc-cimac.gc.ca/eng/1100100013785/1529102490303>.

2 *Ibid.*

APPENDIX D: OIS-2018 MALTREATMENT ASSESSMENT

The OIS-2018 Maltreatment Assessment Consists of:

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



Intake Information

First two letters of primary caregiver's surname

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

2018-10-01

02. Source of allegation/referral

Check all that apply

- | | |
|--|---|
| <input type="checkbox"/> Custodial parent | <input type="checkbox"/> Non-custodial parent |
| <input type="checkbox"/> Child (subject of referral) | <input type="checkbox"/> Relative |
| <input type="checkbox"/> Neighbour/friend | <input type="checkbox"/> Social assistance worker |
| <input type="checkbox"/> Crisis service/shelter | <input type="checkbox"/> Community/recreation centre |
| <input type="checkbox"/> Hospital (any personnel) | <input type="checkbox"/> Community health nurse |
| <input type="checkbox"/> Community physician | <input type="checkbox"/> Community mental health professional |
| <input type="checkbox"/> School | <input type="checkbox"/> Other child welfare service |
| <input type="checkbox"/> Day care centre | <input type="checkbox"/> Police |
| <input type="checkbox"/> Community agency | <input type="checkbox"/> Anonymous |
| <input type="checkbox"/> Other | <input type="text"/> |

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

Results of investigation

04. Which approach to the investigation was used?

05. Caregiver(s) in the home

No caregiver investigated

No secondary caregiver in the home

Community caregiver

Youth living independently

Primary caregiver

a) Sex

b) Age

Secondary caregiver in the home at time of referral

a) Sex

b) Age

06. Children (under 18) in the home at time of referral and caregiver's relationship to them

	a) First name only of child	b) Age of child	c) Sex of child	d) Primary caregiver's relationship to child	e) Secondary caregiver's relationship to child	f) Subject of referral	g) Type of investigation
Child 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="text"/>

07. Other adults in the home

Check all that apply

None

Grandparent

Child >= 18

Other

08. Caregiver(s) outside the home

Check all that apply

None

Father

Mother

Grandparent

Other

 **Household Information**

Primary/Secondary caregiver

Sex : **Age :**

A09. Primary income

A10. Ethno-racial

If Indigenous,

a) On/Off reserve

b) Indigenous Status

A11. Has this caregiver moved to Canada within the last 5 years?

Yes No Unknown

A12. Primary language

A13. Caregiver response to investigation

A14. Caregiver risk factors

Please complete all risk factors (a to i)

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

Please select all drug abuse categories that apply

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

15. Child custody dispute Yes No Unknown

16. Type of housing

17. Number of moves in past year

18. Home overcrowded Yes No Unknown

19. Are there unsafe housing conditions? Yes No Unknown

20. In the last 6 months, household ran out of money for:

a) Food Yes No Unknown

b) Housing Yes No Unknown

c) Utilities Yes No Unknown

d) Telephone/Cell phone Yes No Unknown

e) Transportation Yes No Unknown

21. Case previously opened for investigation

a) How long since the case was closed?

22. Case will stay open for on-going child welfare services

23. Referral(s) for any family member

a) Referral(s) made for any family member to an internal or external service(s)

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

Check all that apply

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

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

Check all that apply

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

If NO, please specify the reason(s)

Check all that apply

- Already receiving services
- Service not available in the area
- Ineligible for service
- Services could not be financed
- Service determined not to be needed
- Refusal of services
- There is an extensive waitlist for services
- No culturally appropriate services

Child Information

First name

24. Sex

25. Age

26. Ethno-racial

27. Indigenous Status

28. Child functioning

Please complete all child functioning issues (a to s)

	Confirmed	Suspected	No	Unknown
a) Positive toxicology at birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b) FASD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c) Failure to meet developmental milestones	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d) Intellectual/developmental disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e) Attachment issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f) ADHD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g) Aggression/conduct issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h) Physical disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i) Academic/learning difficulties	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
	Confirmed	Suspected	No	Unknown
j) Depression/anxiety/withdrawal	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k) Self-harming behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l) Suicidal thoughts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
m) Suicide attempts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
n) Inappropriate sexual behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
o) Running (multiple incidents)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
p) Alcohol abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
q) Drug/solvent abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
r) Youth Criminal Justice Act involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
s) Other <input type="text"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please select all drug abuse categories that apply

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

29. TYPE OF INVESTIGATION

Investigated incident of maltreatment

Maltreatment codes

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

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

30. Maltreatment codes

	1st Code	2nd Code	3rd Code
Enter primary form of maltreatment first	<input type="text"/>	<input type="text"/>	<input type="text"/>
31. Alleged perpetrator			
Primary caregiver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Secondary caregiver	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other perpetrator	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
a. Relationship <input type="text"/>			
b. Age <input type="text"/>			
c. Sex <input type="text"/>			
32. Substantiation	<input type="text"/>	<input type="text"/>	<input type="text"/>
a. Was the report a fabricated referral?	<input type="text"/>	<input type="text"/>	<input type="text"/>
33. Was maltreatment a form of punishment?	<input type="text"/>	<input type="text"/>	<input type="text"/>
34. Duration of maltreatment	<input type="text"/>	<input type="text"/>	<input type="text"/>
35. Police involvement	<input type="text"/>	<input type="text"/>	<input type="text"/>
36. If any maltreatment is substantiated or suspected, is mental or emotional harm evident?	<input type="text"/>		
a) Child requires therapeutic treatment	<input type="text"/>		

37. Physical harm

a) Is physical harm evident?

b) Types of physical harm

Check all that apply

Bruises, cuts or scrapes

Broken bones

Burns and scalds

Head trauma

Fatal

Health condition : Please specify

c) Was medical treatment required?

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

39. Previous investigations

a) Child previously investigated by child welfare for alleged maltreatment Yes No Unknown

b) Was the maltreatment substantiated? Yes No Unknown

40. Placement

a) Placement during investigation

b) Placement type

c) Did the child reunify during the investigation?

41. Child welfare court application?

a) Referral to mediation/alternative response

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

 **Comments and Other Information (Not Required)**

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

44. Intake information

45. Household information

46. Child information

APPENDIX E: OIS-2018 GUIDEBOOK

The following is the OIS-2018 Guidebook used by child welfare workers to assist them in completing the OIS-2018 Maltreatment Assessment.

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

OIS-2018 GUIDEBOOK

Background

The Ontario Incidence Study of Reported Child Abuse and Neglect 2018 (OIS-2018) is the sixth provincial study of reported child abuse and neglect investigations in Ontario. Results from the previous five cycles of the OIS have been widely disseminated in conferences, reports, books, and journal articles (see Canadian Child Welfare Research Portal, <http://cwrp.ca>).

The OIS-2018 is funded by the Ministry of Children, Community and Social Services of Ontario. Significant in-kind support is provided by child welfare agency managers, supervisors, front-line workers, information technology personnel, and other staff. The project is led by Professor Barbara Fallon and managed by a team of researchers at the University of Toronto's (U of T) Factor-Inwentash Faculty of Social Work.

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

Objectives

The primary objective of the OIS-2018 is to provide reliable estimates of the scope and characteristics of reported child abuse and neglect in Ontario in 2018. Specifically, the study is designed to:

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

2013, and 2018 rates of substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence; severity of maltreatment; and short-term investigation outcomes.

Sample

In smaller agencies, information will be collected on all child maltreatment-related investigations opened during the three-month period between October 1, 2018 and December 31, 2018. In larger agencies, a random sample of 250 investigations will be selected for inclusion in the study.

OIS Maltreatment Assessment

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

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

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

Data Collection

Data collection will take place between mid-November 2018 and April 2019. Prior to data collection, all workers involved in the study will receive training on how to complete the online data collection instrument. The one-hour training session will be held in October 2018, either in person or indirectly through video-conferencing.

The Site Researcher will make regular visits to your agency/office during the data collection process. These on-site visits will allow the Site Researcher to provide face-to-face assistance to workers in completing the online data collection instrument and to resolve any issues that may arise. The Site Researcher can answer questions and provide assistance over the phone and/or through video-conferencing as well. The research team is also very flexible and can determine a unique plan for data collection support based on specific agency needs.

Confidentiality

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

Unlike the paper and pencil data collection form completion used in previous cycles, the *OIS-2018* will use a secure, web-based delivery system for the OIS Maltreatment Assessment. Each caseworker will have confidential access to his/her assigned forms by means of a personalized portal, which can be accessed with a username and a password. This website allows caseworkers to access, complete, and track online forms assigned to them.

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

Data collected through the OIS website will be stored on a secure server at U of T in a secure setting and accessed through secure logins and connections. The data will be archived on the same server. Data are not stored on local computers. Programming and research staff are required to save their work on the protected server and must sign agreements that they will not bring data out of the secure server environment.

Access to data is severely limited. This is not a public database. Only those U of T research personnel working on the OIS-2018 will have access to the data through a password protected and secure log in. A research ID number will be assigned to each case for the purpose of data management and will not be able to be linked to any other database containing identifying or near-identifying information.

The final report will contain only provincial

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

Completing The OIS Maltreatment Assessment

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

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

Definitions: Intake Information Section

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

Question 1: Date Case Opened

This refers to the date the case was opened/re-opened. Please enter the date using yyyy-mm-dd format.

Question 2: Source Of Allegation/Referral

Select all sources of referral that are applicable for each case. This refers to **separate and independent** contacts with the child welfare agency/office. If a young person tells a school principal of abuse and/or neglect, and the school principal reports

this to the child welfare authority, you would select the option for this referral as “School.” There was only one contact and referral in this case. If a second source (neighbour) contacted the child welfare authority and also reported a concern for this child, then you would also select the option for “Neighbour/friend.”

- » **Custodial parent:** Includes parent(s) identified in Question 5: Caregiver(s) in the home.
- » **Non-custodial parent:** Contact from an estranged spouse (e.g., individual reporting the parenting practices of his or her former spouse).
- » **Child (subject of referral):** A self-referral by any child listed in the Intake Information section of the OIS Maltreatment Assessment.
- » **Relative:** Any relative of the child who is the subject of referral. If the child lives with foster parents, and a relative of the foster parents reports maltreatment, specify under “Other.”
- » **Neighbour/friend:** Includes any neighbour or friend of the child(ren) or his or her family.
- » **Social assistance worker:** Refers to a social assistance worker involved with the household.
- » **Crisis service/shelter:** Includes any shelter or crisis service for domestic violence or homelessness.
- » **Community/recreation centre:** Refers to any form of recreation and community activity programs (e.g., organized sports leagues or Boys and Girls Clubs).
- » **Hospital (any personnel):** Referral originates from a hospital and is made by a doctor, nurse, or social worker rather than a family physician or nurse working in a family doctor’s office in the community.

- » **Community health nurse:** Includes nurses involved in services such as family support, family visitation programs, and community medical outreach.
- » **Community physician:** A report from any family physician with a single or ongoing contact with the child and/or family.
- » **Community mental health professional:** Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside a school/hospital/child welfare/Youth Criminal Justice Act (YCJA) setting.
- » **School:** Any school personnel (teacher, principal, teacher’s aide, school social worker etc.).
- » **Other child welfare service:** Includes referrals from mandated child welfare service providers from other jurisdictions or provinces.
- » **Day care centre:** Refers to a child care or day care provider.
- » **Police:** Any member of a police force, including municipal or provincial/territorial police, or RCMP.
- » **Community agency:** Any other community agency/office or service.
- » **Anonymous:** A referral source who does not identify him- or herself.
- » **Other:** Specify the source of referral in the section provided (e.g., foster parent, store clerk, etc.).

Question 3: Please Describe Referral, Including Alleged Maltreatment, Injury, Risk Of Maltreatment (If Applicable), And

Results Of Investigation

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

Question 4: Which Approach To The Investigation Was Used?

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

- » **A customized or alternate response** investigation refers to a less intrusive, more flexible assessment approach that focuses on identifying the strengths and needs of the family, and coordinating a range of both formal and informal supports to meet those needs. This approach is typically used for lower-risk cases.
- » **A traditional child protection** investigation refers to the approach that most closely resembles a forensic child protection investigation and often focuses on gathering evidence in a structured and legally defensible manner. It is typically used for higher-risk cases or those investigations conducted jointly with the police.

Question 5: Caregiver(s) In The Home

Describe up to two caregivers in the home. Only caregiver(s) in the child’s primary residence should be noted in this section. If both caregivers are equally engaged in parenting, identify the caregiver you have had most contact with as the primary caregiver. Provide each caregiver’s sex and age category. If the caregiver does not identify as either male or female, please select either option and indicate their identity in question

45 in the Comments section.

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

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

Question 6: List All Children In The Home (<18 Years)

Include biological, step-, adoptive and foster children. If there were more than 6 children living in the home at the time of the referral, please indicate this in the Comments section. If there were more than 6 children investigated, please contact your site researcher.

List first names of all children (<18 years) in the home at time of referral: List the first name of each child who was living in the home at the time of the referral.

- a. Age of child:** Indicate the age of each child living in the home at the time of the referral. For children younger than 1, indicate their age in months.
- b. Sex of child:** Indicate the sex of each child living in the home at the time of the referral. If the child does not identify as either male or female, please select either option and indicate their identity in question 46 in the Comments section.
- c. Primary caregiver’s relationship to child:** Indicate the primary caregiver’s relationship to each child.
- d. Secondary caregiver’s relationship to child:** Indicate the secondary caregiver’s relationship to each child (if applicable). Describe the secondary caregiver only if the caregiver is in the home.

e. Subject of referral: Indicate which children were noted in the initial referral.

f. Type of investigation: Indicate the type of investigation conducted: investigated incident of maltreatment, risk investigation only, or not investigated.

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

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

For *not investigated*, include situations where the child was living in the home at the time of the referral to child welfare but was not the focus of your investigation.

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

Question 7: Other Adults In The Home

Select all categories that describe adults (excluding the primary and secondary caregivers) who lived in the house at the time of the referral to child welfare. Note that children (<18 years of age) in the home have already been described in question 6. If there have been recent changes in the household, describe the situation at the time of the referral. Check all that apply.

Question 8: Caregiver(S) Outside The Home

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

Definitions: Household Information Section

The *Household Information* section focuses on the immediate household of the child(ren) who have been the subject of an investigation of an event or incident of maltreatment or for whom the risk of future maltreatment was assessed. The household is made up of all adults and children living at the address of the investigation at the time of the referral. Provide information for the primary caregiver and the secondary caregiver if there are two adults/caregivers living in the household (the same caregivers identified in the *Intake Information* section).

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

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

Question 9: Primary Income

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

» **Full time:** Individual is employed in a

permanent, full-time position.

- » **Part time (fewer than 30 hours/week):** Refers to a single part-time position.
- » **Multiple jobs:** Caregiver has more than one part-time or temporary position.
- » **Seasonal:** This indicates that the caregiver works at either full- or part-time positions for temporary periods of the year.
- » **Employment insurance:** Caregiver is temporarily unemployed and receiving employment insurance benefits.
- » **Social assistance:** Caregiver is currently receiving social assistance benefits.
- » **Other benefit:** Refers to other forms of benefits or pensions (e.g., family benefits, long-term disability insurance, child support payments).
- » **None:** Caregiver has no source of legal income. If drugs, prostitution, or other illegal activities are apparent, specify in the Comments section under “Household information.”
- » **Unknown:** You do not know the caregiver’s source of income.

Question 10: Ethno-Racial Group

Examining the ethno-racial background can provide valuable information regarding differential access to child welfare services. Given the sensitivity of this question, this information will never be published out of context. This section uses a checklist of ethno-racial categories used by Statistics Canada in the 2016 Census.

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

If Indigenous

- a. **On/off reserve:** Identify if the caregiver is residing “on” or “off” reserve.
- b. **Indigenous status:** First Nations status (caregiver has formal Indian or treaty status, that is registered with Crown-Indigenous Relations and Northern Affairs Canada [formerly INAC]),

First Nations non-status, Métis, Inuit, or Other (specify and use the Comments section if necessary).

Question 11: Has This Caregiver Moved To Canada Within The Last 5 Years?

Identify whether or not the caregiver moved to Canada within the last five years. If you do not know this information, select “Unknown.”

Question 12: Primary Language

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

Question 13: Contact With Caregiver In Response To Investigation

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

Question 14: Caregiver Risk Factors

These questions pertain to the primary caregiver and/or the secondary caregiver, and are to be rated as “Confirmed,” “Suspected,” “No,” or “Unknown.” Choose “Confirmed” if the risk factor has been diagnosed, observed by you or another worker or clinician (e.g., physician, mental health professional), or disclosed by the caregiver. “Suspected” means that, in your clinical opinion, there is reason to suspect that the condition may

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

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

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

- » Cannabis (e.g., marijuana, hashish, hash oil)
- » Opiates, Opioids, and morphine

derivatives (e.g., codeine, fentanyl, heroine, morphine, opium, oxycodone)

- » Depressants (e.g., barbiturates, benzodiazepines such as Valium, Ativan)
- » Stimulants (e.g., cocaine, amphetamines, methamphetamines, Ritalin)
- » Hallucinogens (e.g., acid, LSD, PCP)
- » Solvents/Inhalants (e.g., glue, paint thinner, paint, gasoline, aerosol sprays)

Question 15: Child Custody Dispute

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

Question 16: Housing

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

- » **Own home:** A purchased house, condominium, or townhouse.
- » **Rental:** A private rental house, townhouse, or apartment.
- » **Public housing:** A unit in a public rental-housing complex (i.e., rent subsidized, government-owned housing), or a house, townhouse, or apartment on a military base. Exclude Band housing in a First Nations community.
- » **Band housing:** Indigenous housing built, managed, and owned by the band.
- » **Living with friends/family:** Living with a friend or family member.
- » **Hotel:** An SRO (single room occupancy) hotel or motel accommodation.
- » **Shelter:** A homeless or family shelter.
- » **Unknown:** Housing accommodation is

unknown.

- » **Other:** Specify any other form of shelter.

Question 17: Number Of Moves In Past Year

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

Question 18: Home Overcrowded

Indicate if the household is overcrowded in your clinical opinion.

Question 19: Housing Safety

a. Are there unsafe housing conditions?

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

Question 20: In The Last 6 Months, Household Ran Out Of Money For:

Food: Indicate if the household ran out of money to purchase food at any time in the last 6 months.

a. Housing: Indicate if the household ran out of money to pay for housing at any time in the last 6 months.

b. Utilities: Indicate if the household ran out of money to pay for utilities at any time in the last 6 months (e.g., heating, electricity).

c. Telephone/cell phone: Indicate if the household ran out of money to pay for a telephone or cell phone bill at any time in the last 6 months.

d. Transportation: Indicate if the household ran out of money to pay for transportation related expenses (e.g.,

transit pass, car insurance) at any time in the last 6 months.

Question 21: Case Previously Opened For Investigation

Case previously opened for investigation:

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

a. How long since the case was closed?

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

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

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

Question 23: Referral(s) For Any Family Member

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

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

- » **Already receiving services:** Family member(s) is currently receiving services and so referring to further services is unnecessary.

- » **Service not available in the area:** Relevant services are not available within a reasonable distance of travel.
- » **Ineligible for service:** Family member(s) is ineligible for relevant service (e.g., child does not meet age criterion for a particular service).
- » **Services could not be financed:** Family does not have the financial means to enroll family member(s) in the service.
- » **Service determined not to be needed:** Following your clinical assessment of the family, you determined services were not necessary for any family member.
- » **Refusal of services:** You attempted to refer the family to services, but they refused to move forward with enrolling in or seeking out services.
- » **There is an extensive waitlist for services:** Based on your knowledge of an extensive waitlist for the appropriate service, you decided not to make a referral.
- » **No culturally appropriate services:** Culturally appropriate services are not available within a reasonable distance of travel.

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

- » **Parent education or support services:** Any program/service designed to offer support or education to parents (e.g., parenting instruction course, home-visiting program, Parents Anonymous, Parent Support Association).
- » **Family or parent counselling:** Any type of family or parent counselling (e.g., couples or family therapy).
- » **Drug/alcohol counselling or treatment:** Addiction program (any substance) for caregiver(s) or child(ren).
- » **Psychiatric/mental health services:**

Child(ren) or caregiver(s) referral to mental health or psychiatric services (e.g., trauma, high-risk behaviour or intervention).

- » **Intimate partner violence services:** Referral for services/counselling regarding intimate partner violence, abusive relationships, or the effects of witnessing violence.
- » **Welfare or social assistance:** Referral for social assistance to address financial concerns of the household.
- » **Food bank:** Referral to any food bank.
- » **Shelter services:** Referral for services regarding intimate partner violence or homelessness.
- » **Housing:** Referral to a social service organization that helps individuals access housing (e.g., housing help centre).
- » **Legal:** Referral to any legal services (e.g., police, legal aid, lawyer, family court).
- » **Child victim support services:** Referral to a victim support service (e.g., sexual abuse disclosure group).
- » **Special education placement:** Referral to any specialized school program to meet a child’s educational, emotional, or behavioural needs.
- » **Recreational services:** Referral to a community recreational program (e.g., organized sports leagues, community recreation, Boys and Girls Clubs).
- » **Medical or dental services:** Referral to any specialized service to address the child’s immediate medical or dental health needs.
- » **Speech/language:** Referral to speech/language services (e.g., speech/language specialist).

- » **Child or day care:** Referral to any paid child or day care services, including staff-run and in-home services.
- » **Cultural services:** Referral to services to help children or families strengthen their cultural heritage.
- » **Immigration services:** Referral to any refugee or immigration service.
- » **Other:** Indicate and specify any other child- or family-focused referral.

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

- » **Suggested they should get services:** You described relevant services to the family member(s) and suggested that they enroll.
- » **Provided them with names and numbers of service providers:** You gave the family member(s) names and contact information of potentially relevant service providers.
- » **Assisted them with completing/filling application:** You helped the family member(s) to apply for services.
- » **Made appointment for that person:** You contacted the service provider directly and made an appointment for the family member(s).
- » **Accompanied them to the appointment:** You went with the family member(s) to the relevant service provider.
- » **Followed-up with family to see if the service was provided:** Following what you estimated to be the service provision period, you contacted the family member(s) to see if the service was provided.
- » **Followed-up with internal/ external service(s) to confirm if the service was provided:** Following what you

estimated to be the service provision period, you contacted the service provider(s) to see if the service was provided.

Definitions: Child Information Section

Question 24: Child Sex

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

Question 25: Child Age

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

Question 26: Child Ethno-Racial Group

Examining the ethno-racial background can provide valuable information regarding differential access to child welfare services. Given the sensitivity of this question, this information will never be published out of context. This section uses a checklist of ethno-racial categories used by Statistics Canada in the 2016 Census.

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

Question 27: Child Indigenous Status

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

(specify and use the Comments section if necessary).

Question 28: Child Functioning

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

- » **Positive toxicology at birth:** When a toxicology screen for a newborn tests positive for the presence of drugs or alcohol.
- » **FASD:** Birth defects, ranging from mild intellectual and behavioural difficulties to more profound problems in these areas related to in utero exposure to alcohol abuse by the biological mother.
- » **Failure to meet developmental milestones:** Children who are not meeting their developmental milestones because of a non-organic reason.
- » **Intellectual/developmental disability:** Characterized by delayed intellectual development, it is typically diagnosed when a child does not reach his or her developmental milestones at expected times. It includes speech and language, fine/gross motor skills, and/or personal and social skills (e.g., Down syndrome, Autism Spectrum Disorder).
- » **Attachment issues:** The child does not have physical and emotional closeness to a mother or preferred caregiver. The child finds it difficult to seek comfort, support, nurturance, or protection from

the caregiver; the child’s distress is not ameliorated or is made worse by the caregiver’s presence.

- » **ADHD:** ADHD is a persistent pattern of inattention and/or hyperactivity/impulsivity that occurs more frequently and more severely than is typically seen in children at comparable stages of development. Symptoms are frequent and severe enough to have a negative impact on the child’s life at home, at school, or in the community.
- » **Aggression/conduct issues:** Aggressive behaviour directed at other children or adults (e.g., hitting, kicking, biting, fighting, bullying) or violence to property at home, at school, or in the community.
- » **Physical disability:** Physical disability is the existence of a long-lasting condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. This includes sensory disability conditions such as blindness, deafness, or a severe vision or hearing impairment that noticeably affects activities of daily living.
- » **Academic/learning difficulties:** Difficulties in school including those resulting from learning difficulties, special education needs, behaviour problems, social difficulties, and emotional or mental health concerns.
- » **Depression/anxiety/withdrawal:** Feelings of depression or anxiety that persist for most of the day, every day for two weeks or longer, and interfere with the child’s ability to manage at home and at school.
- » **Self-harming behaviour:** Includes high-risk or life-threatening behaviour and physical mutilation or cutting.
- » **Suicidal thoughts:** The child has expressed thoughts of suicide, ranging from fleeting thoughts to a detailed plan.

- » **Suicide attempts:** The child has attempted to commit suicide.
- » **Inappropriate sexual behaviour:** Child displays inappropriate sexual behaviour, including age-inappropriate play with toys, self, or others; displaying explicit sexual acts; age- inappropriate sexually explicit drawings and/or descriptions; sophisticated or unusual sexual knowledge; or prostitution or seductive behaviour.
- » **Running (multiple incidents):** The child has run away from home (or other residence) on multiple occasions for at least one overnight period.
- » **Alcohol abuse:** Problematic consumption of alcohol (consider age, frequency, and severity).
- » **Drug/solvent abuse:** Include prescription drugs, illegal drugs, and solvents.
- » **Youth Criminal Justice Act involvement:** Charges, incarceration, or alternative measures with the youth justice system.
- » **Other:** Specify any other conditions related to child functioning; your responses will be coded and aggregated.

Question 29: Type Of Investigation

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

Question 30: Maltreatment Codes

The maltreatment typology in the *OIS-2018* uses five major types of maltreatment: *Physical Abuse, Sexual Abuse, Neglect, Emotional Maltreatment, and Exposure to Intimate Partner Violence*. These categories are comparable to those used in the previous cycles of the Ontario Incidence Study. Rate

cases **on the basis of your clinical opinion**, not on provincial or agency/office-specific definitions.

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

Physical Abuse

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

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

6. **Other physical abuse:** Other or unspecified physical abuse.

Sexual Abuse

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

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

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

Neglect

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

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

treatment. This includes dental services when funding is available.

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

Emotional Maltreatment

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

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

- 26. Isolation/confinement:** Adult cuts the child off from normal social experiences, prevents friendships, or makes the child believe that he or she is alone in the world. Includes locking a child in a room, or isolating the child from the normal household routines.

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

Exposure to Intimate Partner Violence

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

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

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

32. Exposure to emotional violence:

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

33. Exposure to non-partner physical violence:

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

Question 31: Alleged Perpetrator

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

If Other Perpetrator

If Other alleged perpetrator is selected, please specify:

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

b. Age: Indicate the age category of this

alleged perpetrator. Age is essential information used to distinguish between child, youth, and adult perpetrators.

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

Question 32: Substantiation

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

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

If the maltreatment was unfounded, answer 32 a).

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

Question 33: Was Maltreatment A Form Of Punishment?

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

Question 34: Duration Of Maltreatment

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

Question 35: Police Involvement

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

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

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

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

Question 37: Physical Harm

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

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

b. Types of physical harm: Please check all types of physical harm that apply.

» **Bruises/cuts/scrapes:** The child suffered various physical hurts visible for at least 48 hours.

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

Question 38: Is There A Significant Risk Of Future Maltreatment?

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

Question 39: Previous Investigations

Child previously investigated by child welfare for alleged maltreatment: This section collects information on previous child welfare investigations for the **individual child in question**. Report if the child has been previously investigated by child welfare authorities because of alleged maltreatment. Use “Unknown” if you are aware of an investigation but cannot confirm this. Note that this is a child-specific question as opposed question 21 (case previously opened for investigation) in the *Household Information* section.

- a. If yes, was the maltreatment substantiated?** Indicate if the maltreatment was substantiated with regard to this previous investigation.

Question 40: Placement

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

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

- b. Placement type:** Check one category related to the placement of the child. If the child is already living in an alternative living situation (emergency foster home, receiving home), indicate the setting where the child has spent the most time.

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

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

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

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

- » **Group home:** All types of group homes, including those operating under a staff or parent model.

- » **Residential/secure treatment:** A 24-hour residential treatment program for several children that provides room and

board, intensive awake night supervision, and treatment services.

- » **Other:** Specify any other placement type.

- c. Did the child reunify?** Indicate whether the child’s original caregiver resumed caregiving responsibilities over the course of the investigation.

Question 41: Child Welfare Court Application

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

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

Question 42: Caregiver(s) Used Spanking In The Last 6 Months

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

Definitions: Comments And Other Information

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

Frequently Asked Questions

1. For What Cases Should I Complete An *OIS Maltreatment Assessment*?

The Site Researcher will establish a process in your agency/office to identify to workers the openings or investigations included in the sample for the *OIS-2018*. Workers will be informed via email if any of their investigations will be included in the *OIS* sample.

2. Should I Complete A *Maltreatment Assessment* For Only Those Cases Where Abuse And/Or Neglect Are Suspected?

Complete the Intake section for all cases identified (via email) during the case selection period (e.g., maltreatment investigations as well as prenatal counselling, child/youth behaviour problems, request for services from another agency/office, and, where applicable, brief service cases).

If maltreatment was alleged at any point during the investigation, complete the remainder of the *OIS Maltreatment Assessment* (both the *Household Information* and *Child Information* sections). Maltreatment may be alleged by the person(s) making the report, or by any other person(s), including yourself, during the investigation (e.g., complete an *OIS Maltreatment Assessment* if a case was initially referred for parent/adolescent conflict, but during the investigation the child made a disclosure of physical abuse or neglect). An event of child maltreatment refers to something that may have happened to a child whereas a risk of child maltreatment refers to something that probably will happen. Complete the *Household Information* section and *Child Information* section for any child for whom you conducted a risk assessment.

3. Should I Complete An *OIS Maltreatment Assessment* On Screened-Out Cases?

For screened-out or brief service cases that are included in opening statistics reported to the Ministry of Children, Community and Social Services, please complete the Intake section of the *OIS Maltreatment Assessment*.

4. When Should I Complete The *OIS Maltreatment Assessment*?

Complete the *OIS Maltreatment Assessment* at the same time that you prepare the report for your agency/office that documents the conclusions of the investigation (usually within 45 days of a case being opened for investigation). For some cases, a comprehensive assessment of the family or household and a detailed plan of service may not be complete yet. Even if this is the case, complete the instrument to the best of your abilities.

5. Who Should Complete The *OIS Maltreatment Assessment* If More Than One Person Works On The Investigation?

The *OIS Maltreatment Assessment* should be completed by the worker who conducts the intake assessment and prepares the assessment or investigation report. If several workers investigate a case, the worker with primary responsibility for the case should complete the *OIS Maltreatment Assessment*.

6. What Should I Do If More Than One Child Is Investigated?

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

7. Will I Receive Training For The *OIS Maltreatment Assessment*?

All workers 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 *OIS-2018*, he or she should contact the Site Researcher regarding any questions about the form.

8. Is This Information Confidential?

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

APPENDIX F: DESCRIPTION OF THE ESTIMATION PROCEDURES

Weighting

The data collected for the OIS-2018 were weighted in order to derive provincial, annual incidence estimates. Design weights were applied to each case selected in each sampled agency during the three-month case selection period. In order to increase the precision and accuracy of estimates for the overall agency volume for 2018, calibration factors based on known numbers of investigations were applied. This section provides a detailed description of the weighting procedures utilized for the OIS-2018. Please see *Table F-1* below for notation used.

Table F-1

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

Design Weights

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

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

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

The Design-Based Estimator

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

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

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

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

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

- S_{hij}^2 is the variance of the case values y_{hijk} within month j of agency i since \bar{Y}_{hij} is their population mean.
- S_{hi}^2 is the variance of the monthly totals Y_{hij} in the calendar year of agency i if these totals were known for every month in the calendar year. Note that \bar{Y}_{hi} is simply the calendar year mean of these totals for agency i .
- S_h^2 is the variance of the totals Y_{hi} over all agencies in stratum h if these totals were known for every agency i in the population. Note that \bar{Y}_h is simply the mean of these totals over all agencies in stratum h .

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

$$\hat{S}_{hij}^2 = \frac{1}{r_{hij} - 1} \sum_{k \in S_{hij}} (y_{hijk} - \hat{Y}_{hij})^2 \quad \text{with} \quad \hat{Y}_{hij} = \frac{1}{r_{hij}} \sum_{k \in S_{hij}} y_{hijk}$$

$$\hat{S}_{hi}^2 = \frac{1}{m_{hi} - 1} \sum_{j \in S_{hi}} (\hat{Y}_{hij} - \hat{Y}_{hi})^2 \quad \text{with} \quad \hat{Y}_{hij} = R_{hij} \hat{Y}_{hi} \quad \text{and} \quad \hat{Y}_{hi} = \frac{1}{m_{hi}} \sum_{j \in S_{hi}} \hat{Y}_{hij}$$

$$\hat{S}_h^2 = \frac{1}{n_h - 1} \sum_{i \in S_h} (\hat{Y}_{hi} - \hat{Y}_h)^2 \quad \text{with} \quad \hat{Y}_{hi} = M_{hi} \hat{Y}_h \quad \text{and} \quad \hat{Y}_h = \frac{1}{n_h} \sum_{i \in S_h} \hat{Y}_{hi}$$

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

$$V\hat{a}r(\hat{Y}) = \sum_h N_h (N_h - n_h) \frac{\hat{S}_h^2}{n_h} + \sum_h \frac{N_h}{n_h} \sum_{i \in U_h} M_{hi} (M_{hi} - m_{hi}) \frac{\hat{S}_{hi}^2}{m_{hi}} + \sum_h \frac{N_h}{n_h} \sum_{i \in U_h} \frac{M_{hi}}{m_{hi}} \sum_{j \in U_{hi}} R_{hij} (R_{hij} - r_{hij}) \frac{\hat{S}_{hij}^2}{r_{hij}}$$

where

$$\hat{S}_{hij}^2 = \frac{1}{r_{hij} - 1} \sum_{k \in S_{hij}} (y_{hijk} - \hat{Y}_{hij})^2 \quad \text{with} \quad \hat{Y}_{hij} = \frac{1}{r_{hij}} \sum_{k \in S_{hij}} y_{hijk}$$

$$\hat{S}_{hi}^2 = \frac{1}{m_{hi} - 1} \sum_{j \in S_{hi}} (\hat{Y}_{hij} - \hat{Y}_{hi})^2 \quad \text{with} \quad \hat{Y}_{hij} = R_{hij} \hat{Y}_{hi} \quad \text{and} \quad \hat{Y}_{hi} = \frac{1}{m_{hi}} \sum_{j \in S_{hi}} \hat{Y}_{hij}$$

$$\hat{S}_h^2 = \frac{1}{n_h - 1} \sum_{i \in S_h} (\hat{Y}_{hi} - \hat{Y}_h)^2 \quad \text{with} \quad \hat{Y}_{hi} = M_{hi} \hat{Y}_h \quad \text{and} \quad \hat{Y}_h = \frac{1}{n_h} \sum_{i \in S_h} \hat{Y}_{hi}$$

Calibration Weights

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

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

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

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

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

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

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

The Calibration Estimator

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

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

This linear relationship is not necessarily a model. Even though B_h is unknown, it can be regarded as a constant within each stratum h. Therefore, the residuals e_{hijk} are implicitly defined by the above representation through the difference

$e_{hijk} = y_{hijk} - x_{hijk} B_h$. We do not need to know these residuals. We just need to know how to estimate them later when we consider the estimated variance of our calibration estimator.

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

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

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

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

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

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

The following observations can be made:

- The first term $\sum_h B_h R_h$ is constant, so it has no variability due to sampling.
- The middle term, $\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$, has a form similar to the design-based estimator with e_{hijk} replacing y_{hijk} .
- The last term, $\sum_h (R_h - \hat{R}_h) (\hat{B}_h - B_h)$, is a sum over the strata of the product of two random variables $(R_h - \hat{R}_h)$ and $(\hat{B}_h - B_h)$. Notably, \hat{R}_h is unbiased for R_h while \hat{B}_h is approximately unbiased for B_h . Therefore, the random variable $(R_h - \hat{R}_h) (\hat{B}_h - B_h)$ will have an expected value close to 0 and the sum $\sum_h (R_h - \hat{R}_h) (\hat{B}_h - B_h)$ will also be close to 0.

Furthermore, the random variable $\sum_h (R_h - \hat{R}_h) (\hat{B}_h - B_h)$ will be of lower order (or relatively smaller) than the middle term

$$\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$$

when the sample sizes are sufficiently large.

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

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

This shows that \hat{Y}_C is approximately unbiased for the population total $Y = \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk}$, where the bias is given by the

expression $E\left(\sum_h (R_h - \hat{R}_h)(\hat{B}_h - B_h)\right)$. It is expected that this bias is close to 0 or relatively small in large samples. Therefore,

this last term can be in the estimator \hat{Y}_C and work with its linearized form \hat{Y}_{Clin} given by the following expression.

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

The properties of estimator \hat{Y}_{Clin} should be similar to the properties of estimator \hat{Y}_C . \hat{Y}_{Clin} is unbiased for

$Y = \sum_h \sum_{i \in U_h} \sum_{j \in U_{hi}} \sum_{k \in U_{hij}} y_{hijk}$ while \hat{Y}_C has a bias close to 0. It is expected that the variance of \hat{Y}_{Clin} is close to the variance of

\hat{Y}_C . Since the first term is constant, the variance of \hat{Y}_{Clin} is simply the variance of $\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}$. Thus overall:

$Var(\hat{Y}_C) \cong Var(\hat{Y}_{Clin}) = Var\left(\sum_h \sum_{i \in S_h} \sum_{j \in S_{hi}} \sum_{k \in S_{hij}} d_{hijk} e_{hijk}\right)$. The variance of \hat{Y}_{Clin} has a familiar design-based look since the

formula has the design weights instead of the calibration weights. We simply use e_{hijk} instead of y_{hijk} in the formula shown earlier for the variance of a 3-stage design under simple random sampling at each stage. The terms e_{hijk} are unknown but can be estimated from the sample.

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

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

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

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

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

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

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

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

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

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

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

Sample Error Estimation

The following is a description of the method employed to develop the sampling error estimation for the OIS 2018, as well as the variance estimates and confidence intervals for the OIS-2018 estimates. Variance estimates are provided for select tables in this report.

A multi-stage sampling design was used, first to select a representative sample of 18 child welfare agencies across Ontario, and then to sample cases within these agencies. The OIS-2018 estimates are based on a relatively large sample of 7,590 child maltreatment-related investigations; sampling error is primarily driven by the variability between the 18 participating agencies. The size of this sample ensures that estimates for figures such as the overall rate of reported maltreatment, substantiation rate, and major categories of maltreatment have a reasonable margin of error. However, the margin of error increases for estimates involving less frequent events.

Sampling error estimates were calculated to reflect the fact that the survey population had been randomly selected from across the province. Standard error estimates were calculated for select variables at the $p < 0.05$ level. Appendix F tables provide the margin of error for selected OIS-2018 estimates. For example, the estimated number of child maltreatment investigations in Ontario is 148,536. The lower 95 per cent confidence interval is 126,674 child investigations and the upper confidence interval is 170,398 child investigations. This means that there is a 95 per cent chance that the true number of substantiated maltreatment is between 126,674 and 170,398.

Most coefficients of variation were in the acceptable and reliable level, with the exception of low frequency events. Estimates that should be interpreted with caution include foster care (22.66) and placement considered (23.63). There were estimates that had CV's over 33 that should be interpreted with extreme caution (placement in kinship in care, group home and group home/residential secure treatment estimates).

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

The following are select variance estimates and confidence intervals for OIS-2018 variables of interest. Each table reports the estimate, standard error, coefficient of variation, lower and upper confidence intervals.

APPENDIX F: TABLE 3-1A: Number and Rate of Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Number of Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Number of Investigations	148,536	11,154	7.51	126,674	170,398
Rate per 1,000 children	62.89	4.72		53.64	72.14

APPENDIX F: TABLE 3-2: Age of Children in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Child Age Group	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
<1 year	8,488	719.25	8.47	7,078	9,898
Rate per 1,000 children	63.00	5.34		52.53	73.47
1-3 years	22,743	1,560.74	6.86	19,684	25,802
Rate per 1,000 children	54.50	3.74		47.17	61.83
4-7 years	41,217	3,463.98	8.40	34,428	48,006
Rate per 1,000 children	69.43	5.84		57.98	80.88
8-11 years	41,177	3,513.66	8.53	34,290	48,064
Rate per 1,000 children	67.60	5.77		56.29	78.91
12-15 years	34,911	2,963.62	8.49	29,102	40,720
Rate per 1,000 children	57.51	4.88		47.95	67.07

APPENDIX F: TABLE 3-3: Substantiation Decisions in Ontario in 2018

Maltreatment and Risk Only Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Substantiated Maltreatment	37,922	2,733.20	7.21	32,565	43,279
Rate per 1,000 children	16.06	1.16		13.79	18.33
Risk of Future Maltreatment	8,486	1,167.50	13.76	6,198	10,774
Rate per 1,000 children	3.59	0.49		2.63	4.55

APPENDIX F: TABLE 3-4A: Referral Source in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Referral Source	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Any Non-Professional	32,786	3,534.50	10.78	25,858	39,714
Rate per 1,000 children	13.88	1.50		10.94	16.82
Any Professional	109,587	8,467.70	7.73	92,990	126,184
Rate per 1,000 children	46.40	3.59		39.36	53.44
Other/Anonymous	11,573	1,355.80	11.72	8,916	14,230
Rate per 1,000 children	4.90	0.57		3.78	6.02

APPENDIX F: TABLE 3-5: Provision of Ongoing Services Following an Investigation in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Provision of Ongoing Services	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Case to Stay Open for Ongoing Services	29,407	2,895.50	9.85	23,732	35,082
Rate per 1,000 children	12.45	1.23		10.04	14.86
Case to be Closed	119,129	8,945.60	7.51	101,596	136,662
Rate per 1,000 children	50.44	3.79		43.01	57.87

APPENDIX F: TABLE 3-6A: Placement in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Placement Status	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Remained at Home	144,351	11,013.40	7.63	122,765	165,937
Rate per 1,000 children	61.12	4.66		51.99	70.25
Informal kinship care	2,488	376.66	15.14	1,750	3,226
Rate per 1,000 children	1.05	0.16		0.74	1.36
Foster Care	1,523	339.52	22.29	858	2,188
Rate per 1,000 children	0.64	0.14		0.37	0.91
Group Home/Residential Secure Treatment	174	98.40	56.55	-19	367
Rate per 1,000 children	0.07	0.04		-0.01	0.15

APPENDIX F: TABLE 3-7: History of Previous Investigations in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Previous Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Previously Investigated	72,606	6,645.07	9.15	59,582	85,630
Rate per 1,000 children	30.74	2.81		25.23	36.25
Child Not Previously Investigated	73,691	5,054.58	6.86	63,784	83,598
Rate per 1,000 children	31.20	2.14		27.01	35.39
Unknown	2,239	718.44	32.09	831	3,647
Rate per 1,000 children	0.95	0.30		0.36	1.54

APPENDIX F: TABLE 3-8: Applications to Child Welfare Court in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2018

Application to Child Welfare Court	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Application to Court	146,029	11,062.50	7.58	124,347	167,712
Rate per 1,000 children	61.83	4.68		52.66	71.00
Application Made	2,507	518.38	20.68	1,491	3,523
Rate per 1,000 children	1.06	0.22		0.63	1.49

