ONTARIO INCIDENCE STUDY OF REPORTED CHILD ABUSE AND NEGLECT – 2013

MAJOR FINDINGS

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Acknowledgements

The Ontario Incidence Study of Reported Child Abuse and Neglect – 2013 (OIS-2013) reflects a truly provincial effort by a group of child welfare service providers, researchers and policy makers committed to improving services for abused and neglected children through research.

The OIS-2013 was conducted by a large team of researchers who demonstrated an exceptional ability to keep focused on the objectives of this collective effort while bringing to bear their own expertise.

Ontario's Ministry of Children and Youth Services (MCYS) provided funding for the OIS-2013. In addition to direct funds received, 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-2013 Research Team I thank the child welfare professionals who participated in the OIS-2013.

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Dedication

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

This report is in memory of Nicole Belair whose dedication to children will serve as an inspiration to all of us for many years to come.

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Executive Summary

The OIS-2013 is the fifth 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‑2013 tracked 5,265 child maltreatment investigations conducted in a representative sample of 17 Child Welfare Service agencies across Ontario in the fall of 2013.

OBJECTIVES AND SCOPE

The primary objective of the OIS-2013 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2013. Specifically, the OIS-2013 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 rates, out-of-home placement, use of child welfare court, and
5. compare selected rates and characteristics of investigations across the 1993, 1998, 2003, 2008 and 2013 cycles of the OIS.

Changes in investigation mandates and practices over the last ten 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. 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-2013 estimates of rates and characteristics of *substantiated* maltreatment.

Child welfare workers completed a three-page standardized data collection form. Weighted provincial annual estimates were derived based on these investigations. The following considerations should be noted in interpreting OIS statistics:

• Only children 15 and under are included in the sample used in this report;

• the unit of analysis is the child maltreatment related investigation;

• the study is limited to 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;

• Ontario has developed a differential or alternate response model that could have posed challenge in capturing cases open to the alternate non-protection stream. However, because the decisions to stream occur after the initial investigation, the OIS was able to capture both types of openings;

• the study is based on the assessments provided by the investigating child welfare workers and were not independently verified;

• as a result of changes in the way cases are identified, the OIS‑2013 report can only be directly compared to the OIS-2008, but not previous OIS reports; and

• all estimates are weighted annual estimates for 2013, presented either as a count of child maltreatment investigations (e.g. 12,300 child maltreatment investigations) or as the annual incidence rate (e.g. 3.1 investigations per 1,000 children).[1]

Caution is also required in comparing the OIS‑2013 Major Findings report with reports from previous cycles of the study because of changes in procedures for tracking investigations in 2008. Although the investigation mandate of Children's Aid Societies focuses primarily on situations where there are concerns that a child may have already been abused or neglected, their mandate also applies to situations where there is no specific concern about past maltreatment but where there may be a significant risk of future maltreatment. Cases assessed as risk of future maltreatment only were not explicitly included in cycles of the OIS prior to 2008. To better capture both types of cases, the OIS–2008 was redesigned to track and differentiate maltreatment investigations and cases assessed as risk of future maltreatment. This change provides important additional information about risk of future maltreatment cases, but it 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 2013 estimates of rates and characteristics of substantiated maltreatment in Chapters 4 and 5.[2] For a discussion about harm versus risk of harm, please see Chapter 2.

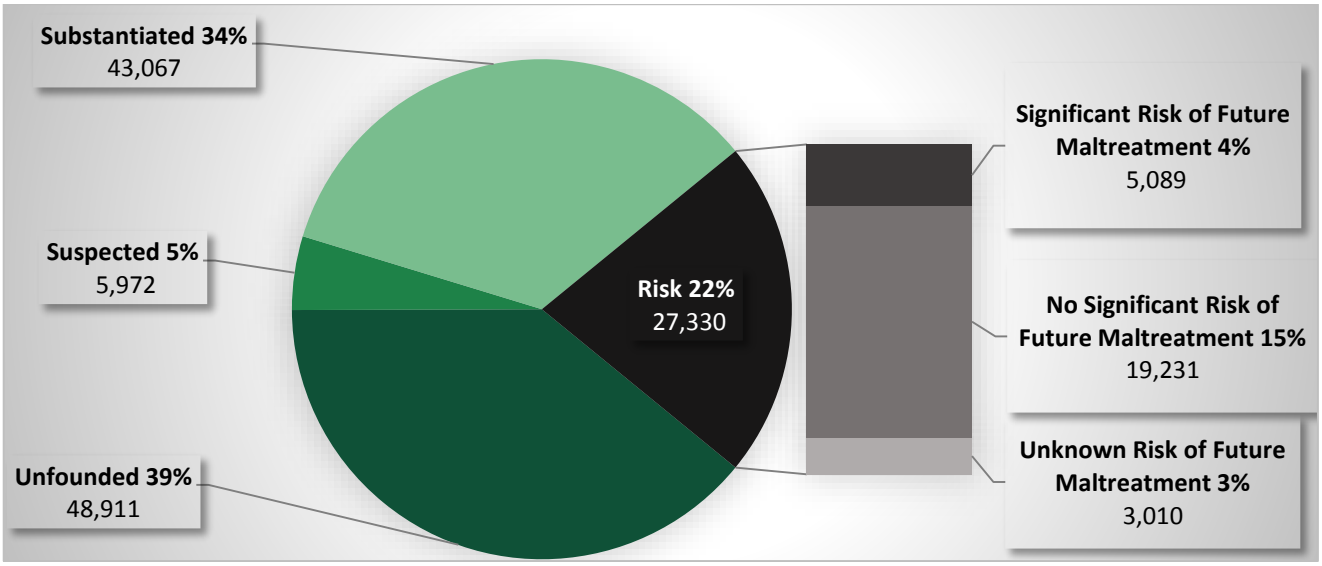
INVESTIGATED AND SUBSTANTIATED MALTREATMENT IN 2013

As shown in Figure 1, of the 125,281 investigations conducted in Ontario in 2013 (a rate of 53.32 per 1, 000 children), 78 percent were maltreatment investigations which focused on a concern of abuse or neglect (an estimated 97,951 child maltreatment investigations or 41.69 investigations per 1,000 children) and 22 percent of investigations were concerns about risk of future maltreatment (an estimated 27,330 investigations or 11.63 investigations per 1,000 children). Thirty-four percent of all maltreatment-related investigations (i.e., maltreatment and risk of future maltreatment investigations) were

[1] Please see Chapter 2 of this report for a detailed description of the study methodology

[2] One exception to this is Table 5-1 which does include risk of future maltreatment investigations.

FIGURE 1: Type of Investigation and Level of Substantiation in Ontario in 2013



substantiated, an estimated 43,067 child investigations. In a further 5 percent of investigations (an estimated 5,972 child investigations or 2.54 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-nine percent of investigations (an estimated 48,911 child investigations or 20.82 investigations per 1,000 children) were unfounded. In 4 percent of all maltreatment-related investigations, the investigating worker concluded there was a significant risk of future maltreatment (2.17 per 1,000 children, an estimated 5,089 child investigations). In 15 percent of investigations, no significant risk of future maltreatment was indicated (an estimated 19,231 investigations or 8.18 investigations per 1,000 children). In 2 percent of investigations workers did not know whether the child was at significant risk of future maltreatment (an estimated 3,010 investigations or 1.28 per 1,000 children). There was a statistically significant decrease in the rate of investigations in which the worker indicated the risk of future maltreatment was unknown ($p<.01$).

1998-2003-2008-2013 COMPARISON

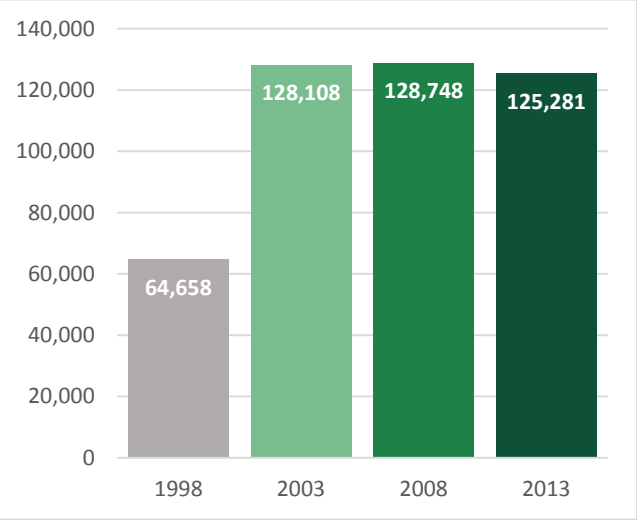
Changes in rates of maltreatment-related investigations can be attributed to a number of factors including (1) changes in public and professional awareness of the problem, (2) changes in legislation or in case-management practices, (3) changes in the OIS study procedures and definitions, and (4) changes in 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 1998 and 2003 cycles of the OIS, comparisons that go beyond a count

of investigations are beyond the scope of this report.

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 with an estimated 128, 748 maltreatment-related investigations conducted across Ontario in 2008, representing a rate of 54.05 investigations per 1,000 children. In 2013, the number of maltreatment-related investigations again did not change significantly with an estimated 125, 281 maltreatment-related investigations conducted in 2013, representing a rate of 53.32 investigations per 1,000 children.

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



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 had spent the most time. In 2013, there were no placements in 97 percent of the investigations (an estimated 121,020 investigations). Three percent of investigations resulted in a change of residence for the child: one percent to informal kinship care (an estimated 1,874 investigations or 0.80 investigations per 1,000 children); two percent to foster care (an estimated 2,105 investigations or 0.90 investigations per 1,000 children); and less than one percent to residential secure treatment or group homes (an estimated 282 investigations or 0.12 investigations per 1,000 children).

As shown in Figure 3, there generally has been little change in placement rates (as measured during the maltreatment investigation) across the four cycles of the OIS, other than a non-statistically significant increase between 2003 and 2008 in informal placements of children with relatives and 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). Workers completed this question on the basis of the information available at the time or upon completion of the intake investigation.

Twenty-five percent of investigations in 2013 (an estimated 30,836 investigations) were identified as remaining open for ongoing services while 75 percent of investigations (an estimated 92,327 investigations) were closed. There was a non-statistically significant decrease in the rate of case opening between 2008 (13.29 per 1,000 children) and 2013 (13.12 per 1,000 children). In contrast, there was a significant increase in cases open for ongoing services

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

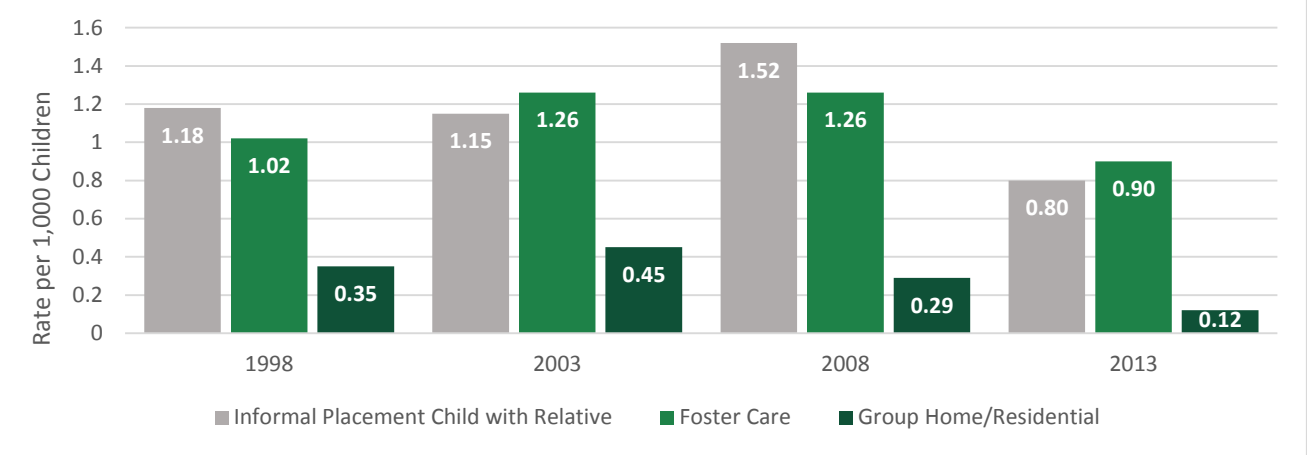
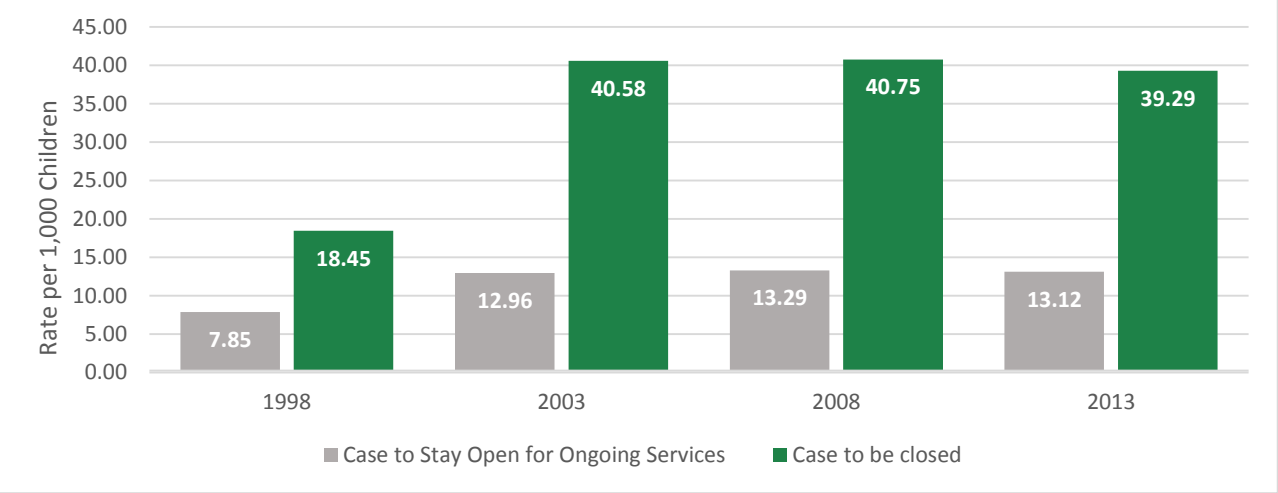


FIGURE 4: Provision of Ongoing Services Following Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 1998, 2003, 2008 and 2013



documented from 7.85 per 1,000 children in 1998 to 12.96 per 1,000 children in 2003.

KEY DESCRIPTIONS OF SUBSTANTIATED MALTREATMENT INVESTIGATIONS IN ONTARIO IN 2013

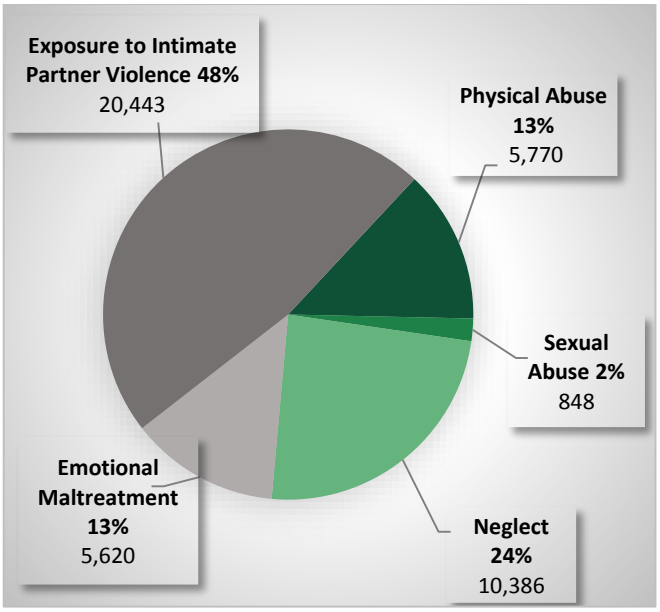
Categories of Maltreatment

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

There were an estimated 43,067 substantiated child maltreatment investigations in Ontario in 2013 (18.33 investigations per 1,000 children). Exposure to intimate partner violence represents the largest proportion of substantiated maltreatment investigations. Almost half (48 percent) of all substantiated investigations identified exposure to intimate partner violence as the primary form of maltreatment (an estimated 20,443

investigations or 8.70 investigations per 1,000 children). In 24 percent of substantiated investigations, neglect was identified as the overriding concern, an estimated 10,386 investigations (4.42 investigations per 1,000 children). In 13 percent of substantiated investigations, or an estimated 5,770 investigations, the primary form of maltreatment identified was physical abuse (2.46 investigations per 1,000 children). Emotional maltreatment was identified as the primary form of maltreatment in another 13 percent of substantiated investigations (an estimated 5,620 investigations or 2.39 investigations per 1,000 children). In a small proportion of investigations (2 percent), sexual abuse was identified as the primary maltreatment form (an estimated 848 investigations or 0.36 investigations per 1,000 children).

FIGURE 5: Primary Category of Substantiated Child Maltreatment in Ontario in 2013

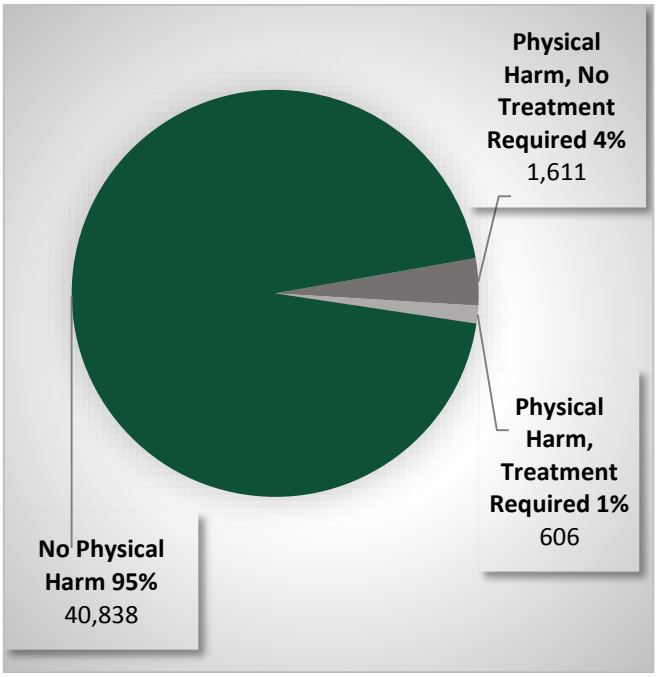


Physical and Emotional Harm

The OIS-2013 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 (Figure 6). In four percent of substantiated investigations (an estimated 1,611 substantiated investigations, or 0.69 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 606 substantiated investigations, or 0.26 investigations per 1,000 children), harm was sufficiently severe to require treatment.

FIGURE 6: Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2013

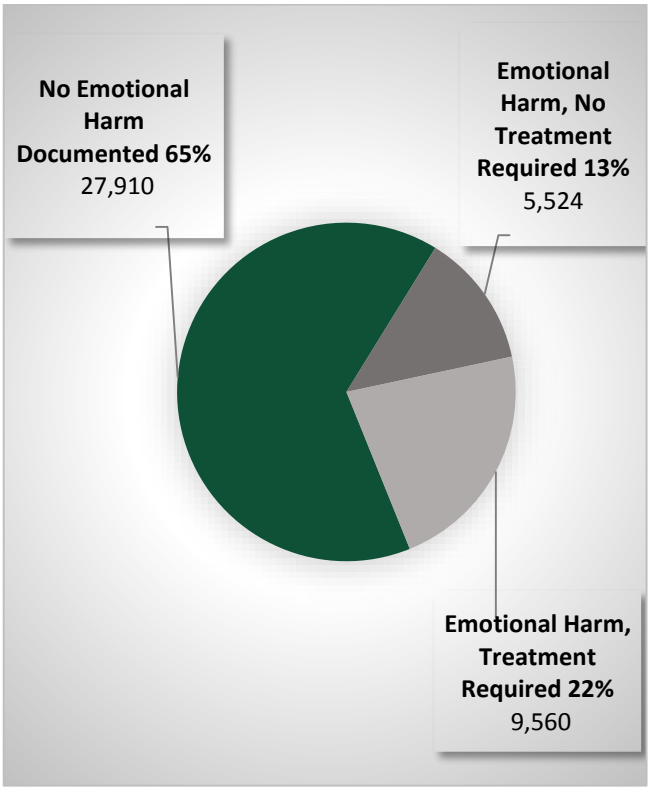


Information on emotional harm was collected using a series of questions asking child welfare workers to describe emotional harm that had occurred because of the maltreatment incident(s). If that maltreatment was substantiated or suspected, workers were asked

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 35 percent of all substantiated maltreatment investigations, involving an estimated 15,084 substantiated maltreatment investigations (6.42 investigations per 1,000 children). In 22 percent of substantiated investigations (an estimated 9,560 investigations or 4.07 investigations per 1,000 children) symptoms were severe enough to require treatment.

FIGURE 7: Documented Emotional Harm in Substantiated Child Maltreatment Investigations in Ontario in 2013



Children's Aboriginal Heritage

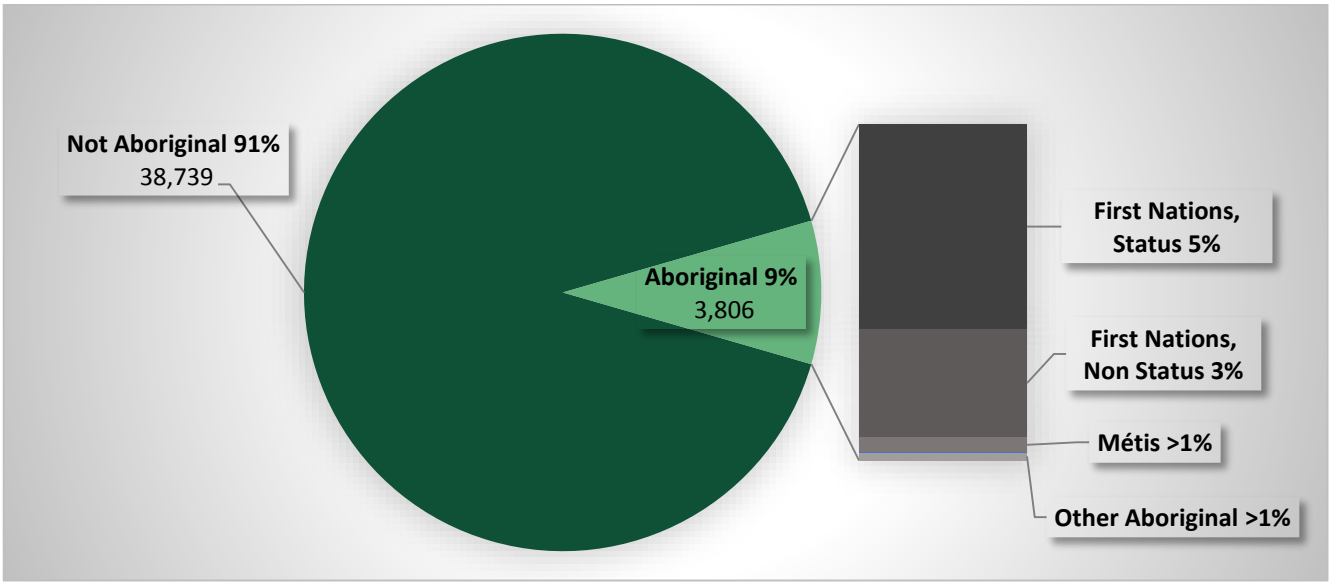
Children's Aboriginal heritage was documented by the OIS-2013 in an effort to better understand some of the factors that bring children from these communities into contact with the child welfare system. Aboriginal children were identified as a key group to examine because of concerns about overrepresentation of children from these communities in the foster care system. Aboriginal children are almost three times more likely to be substantiated than non-Aboriginal children (47.70 per 1,000 Aboriginal children versus 17.07 per 1,000 non-Aboriginal children).

Nine percent of substantiated maltreatment investigations involved children of Aboriginal heritage (Figure 8). Five percent of substantiated maltreatment investigations involved children with First Nations status, 3 percent involved First Nations Non-Status children and less than one percent were Métis children. Less than one percent of investigated children in substantiated child maltreatment investigations were Inuit or children with 'other' Aboriginal heritage.

Child Functioning Issues

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 investigation. The checklist only documents problems that child welfare workers became aware of during their investigation and therefore undercounts the occurrence of child functioning problems. Investigating workers were asked to indicate problems that had been confirmed by a diagnosis and/or directly observed by the investigating worker or another worker, 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

FIGURE 8: Aboriginal Heritage of Children in Substantiated Child Maltreatment Investigations in Ontario in 2013



investigation. The six-month period before the investigation was used as a reference point where applicable.

In 41 percent of substantiated child maltreatment investigations (an estimated 17,737 child investigations or 7.55 investigations per 1,000 children), at least one child functioning issue was indicated by the investigating worker.

Academic difficulties were the most frequently reported child functioning concern (19 percent of substantiated maltreatment investigations), and the second most common was depression/anxiety/withdrawal (19 percent of substantiated maltreatment investigations). Thirteen percent of substantiated maltreatment investigations involved a child with ADD/ADHD, and 12 percent involved a child with aggression. In 11 percent of substantiated maltreatment investigations, the worker indicated that the child had attachment issues, and the worker noted an intellectual/developmental disability for the child in 10 percent of investigations (Figure 9).

Primary Caregiver Risk Factors

For each investigated child, the investigating worker was asked to indicate who the primary caregiver was. At least one primary caregiver risk factor functioning was identified in 76 percent of substantiated maltreatment investigations (an estimated 32,216 substantiated child investigations). Concerns related to documented 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 most frequently noted concerns were victim of intimate partner violence (49 percent), few social supports (34 percent), mental health issues (27 percent), perpetrator of intimate partner violence (16 percent), and alcohol abuse (10 percent).

FIGURE 9: Major Child Functioning Issues Documented in Substantiated Child Maltreatment Investigations in Ontario in 2013

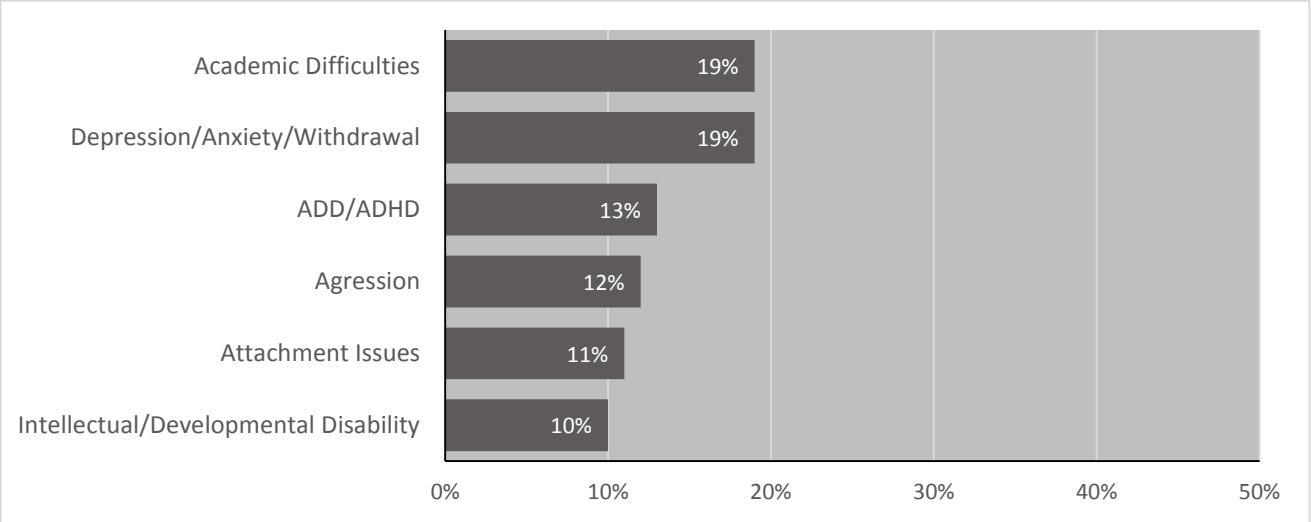
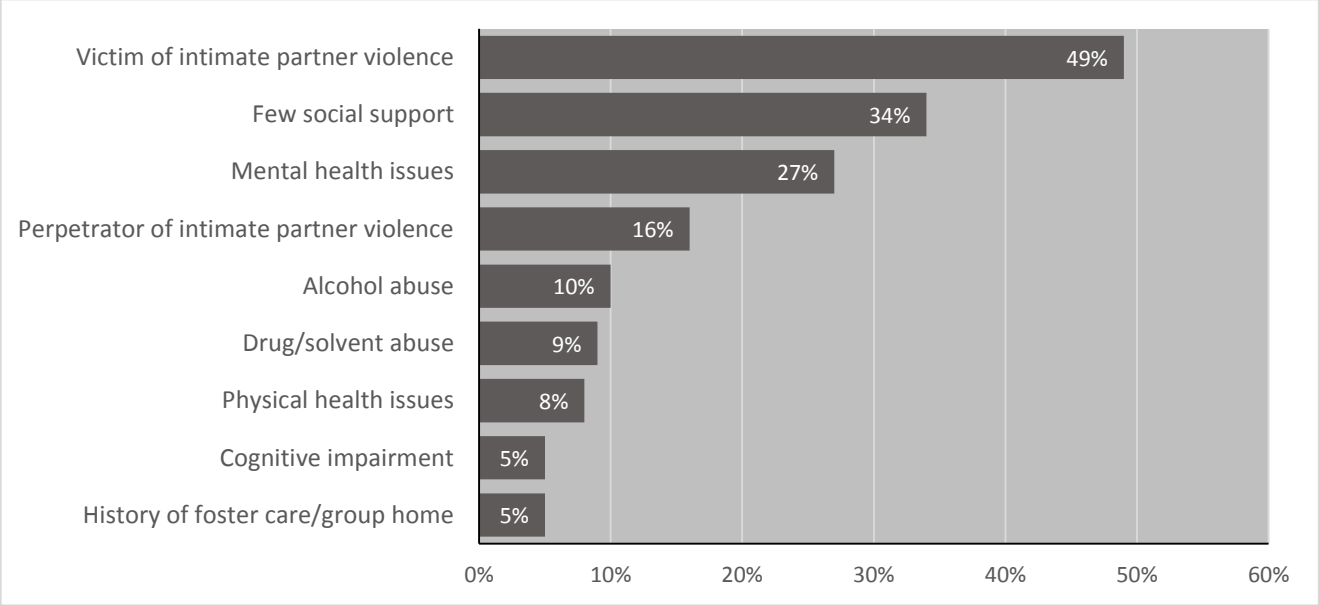


FIGURE 10: Primary Caregiver Risk Factors in Substantiated Child Maltreatment Investigations in Ontario in 2013

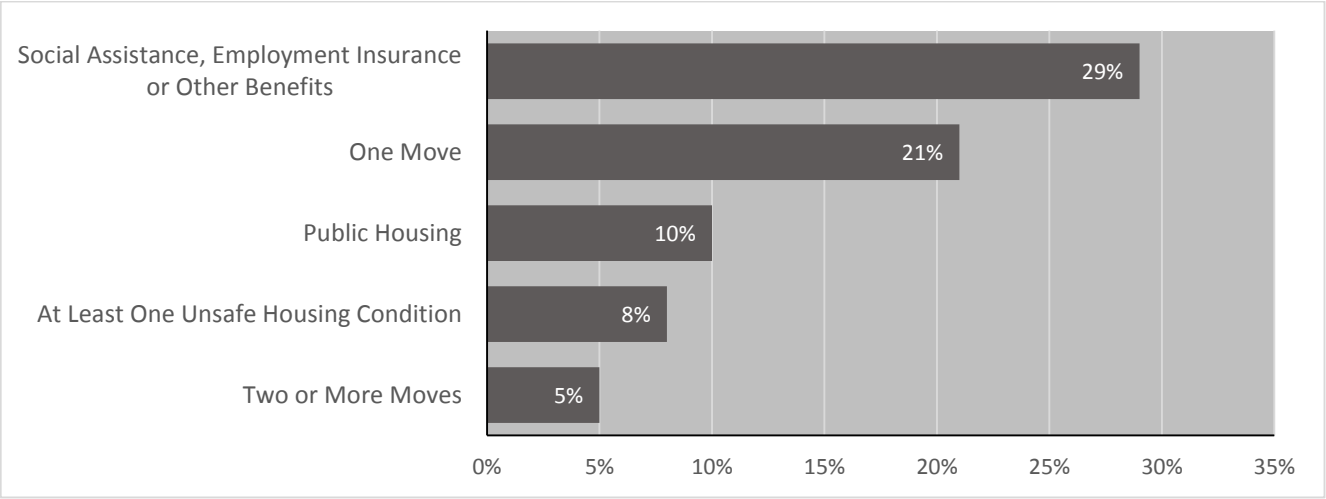


Household Risk Factors

The OIS‑2013 tracked a number of household risk factors including social assistance, two or more moves in 12 months, and household hazards. Household hazards included access to drugs or drug paraphernalia, unhealthy or unsafe living conditions and accessible weapons. (See Chapter 5 for a full description of household hazards).

Twenty-nine percent involved children whose families received other benefits/employment insurance/social assistance as their primary

FIGURE 11: Household Risks in Substantiated Child Maltreatment Investigations in Ontario in 2013



source of income (12,421 substantiated maltreatment investigations) and 9 percent of families relied on part-time work, multiple jobs, or seasonal employment. Twenty-one percent of substantiated maltreatment investigations involved families that had moved once in the previous year while 5 percent had moved two or more times. Ten percent of substantiated maltreatment investigations involved families living in public housing. At least one unsafe housing condition was noted in 8 percent of substantiated maltreatment investigations

FUTURE DIRECTIONS

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

Chapter 1

INTRODUCTION

The following report presents the major findings from the Ontario Incidence Study of Reported Child Abuse and Neglect-2013 (OIS-2013). The OIS-2013 is the fifth 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 5,265 child protection investigations conducted across Ontario during a 3-month period in 2013. The OIS-2013 report also includes selected comparisons with estimates from the 1998, 2003 and 2008 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-2013 sampling, responsibility for protecting and supporting children at risk of abuse and neglect fell under the jurisdiction of the 46 child protection agencies in Ontario (see Table 1-1), including a system of Aboriginal child welfare agencies which have increasing responsibility for protecting and supporting Aboriginal children. 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 every jurisdiction using a standardized set of definitions.

The OIS-2013 is funded by Ontario's Ministry of Children and Youth Services (MCYS).

In addition to direct funds received, 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 first Ontario Incidence Study of Reported Child Abuse and Neglect was completed in 1993. It was the first study in Ontario to estimate the incidence of child abuse and neglect that was reported to, and investigated by, the child welfare system. The OIS-1993 was designed by Nico Trocmé and was partially based on the design of the U.S. National Incidence Studies. 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 again in 2008, Ontario's Ministry for 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

TABLE 1-1: Ontario Children's Aid Societies

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

to develop provincial estimates of investigated child abuse and neglect in Ontario in 2003 and 2008. Barbara Fallon (University of Toronto) was the principal investigator of the OIS-2008 and the OIS-2013.

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

Findings from the previous four 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.

Readers should note that because of changes in the way child welfare investigations are conducted 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 the OIS-1993 reports. Given the growing complexity of the OIS, more detailed analyses will be developed in subsequent reports and articles.

OBJECTIVES AND SCOPE

The primary objective of the OIS-2013 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Ontario in 2013. Specifically, the OIS-2013 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 rates, out-of-home placement, use of child welfare court, and
5. compare selected rates and characteristics of investigations across the 1993, 1998, 2003, 2008 and 2013 cycles of the OIS.

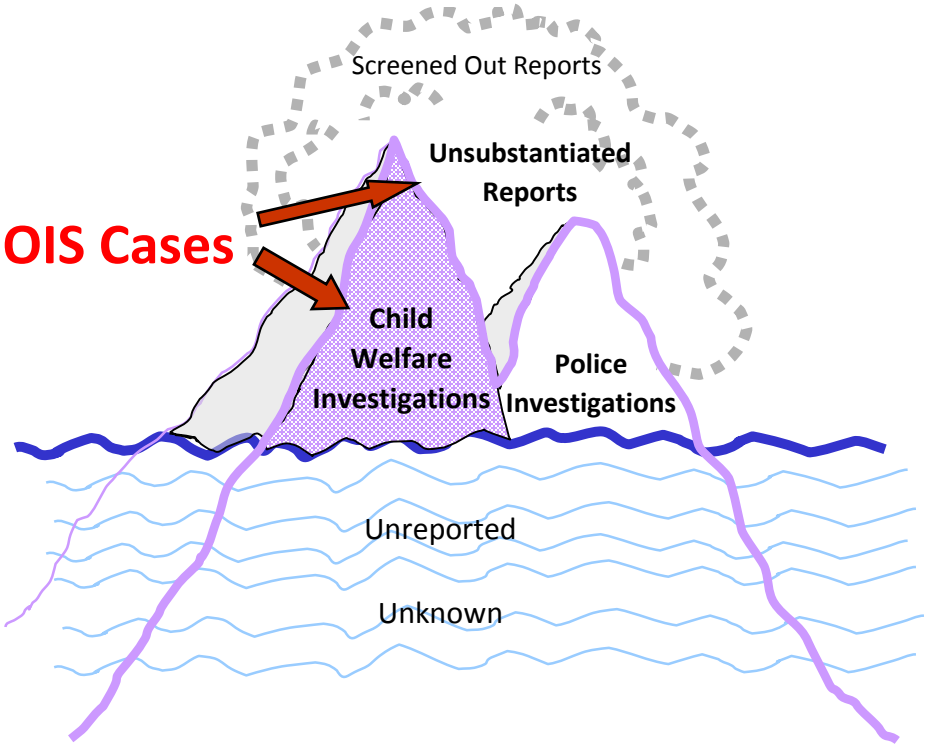
The OIS collects information directly from a provincial sample of child welfare workers at the point when an initial investigation regarding a report of possible child abuse or neglect is completed. The scope of the study is therefore limited to the type of information available to workers at that point. 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** longer term **service events that occur beyond the initial investigation**.

Changes in investigation mandates and practices over the last ten 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. 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-2013 estimates of rates and characteristics of substantiated maltreatment**.

CHILD WELFARE SERVICES IN ONTARIO: A CHANGING MOSAIC

The objectives and design of the OIS-2013 are

FIGURE 1-1: Scope of OIS-2013



(*) 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.

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 counseling 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 and Family Services Act governs child welfare services and outlines principles for promoting the best interests of children. Alleged maltreatment 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 and Youth Services. There are 46 agencies in Ontario that provide child protection services, and several of these agencies provide services to specific communities based on religious affiliation or Aboriginal heritage. 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. Due to inter-agency differences in information systems and documentation procedures, comprehensive aggregate provincial statistics are scarce.

Although provincial and territorial child welfare statutes apply to all Aboriginal people, special considerations are made in many statutes with respect to services to Aboriginal 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 cost for children in care. The structure of Aboriginal child welfare services is changing rapidly. In addition to regular funding, Aboriginal Affairs and Northern Development 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 Aboriginal agencies or by Aboriginal counseling 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. From 1998 to 2003 the OIS found that rates of investigated maltreatment had nearly doubled. Most of the available data point to 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; rather, it would appear that the detection line (depicted as the water line on the iceberg model) dropped leading to an increase in the number of reported and substantiated cases. The OIS-2003 report points in particular to 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 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 investigations appeared in fact to be risk of future maltreatment where the investigation 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 in fact more reflective of a family’s need to access preventative services or added support and not necessarily because of allegations of maltreatment. Rather than screening out these cases, they were being categorized as maltreatment investigations even though no maltreatment had 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 and the OIS-2013 is designed to

separately track these risk-only cases.

Numerous developments over the past 15 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 the following changes: 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, and 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. Most recently, a Commission to Promote Sustainable Child Welfare was established in 2009 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, can effectively utilize resources to maximize positive outcomes for children and youth, and can 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.

Using a standard set of definitions the OIS-1993, 1998, 2003, 2008 and 2013 provide the best available estimates of the incidence and characteristics of reported child maltreatment in Ontario over a 20-year period.

ORGANIZATION OF THE REPORT

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

The **OIS-2013 report** is divided into five chapters and seven appendices. Chapter 2 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, and 2013. Chapter 4 examines the characteristics of substantiated maltreatment investigations by type of maltreatment in Ontario in 2013 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 2013.

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-2013 Site Researchers

Appendix B: OIS-2013 Advisory Committee

Appendix C: Glossary of Terms

Appendix D: OIS-2013 Maltreatment Assessment Form

Appendix E: OIS-2013 Guidebook

Appendix F: Select Variance Estimates and Confidence Intervals

Chapter 2

METHODOLOGY

The OIS-2013 is the fifth provincial study examining the incidence of reported child abuse and neglect in Ontario. The OIS-2013 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-2013. A multi-stage sampling design was used, first to select a representative sample of 17 child welfare agencies across Ontario, and then to sample cases within these agencies. Information was collected directly from the investigating workers at the conclusion of the investigation. The OIS-2013 sample of 5,265 investigations was used to derive estimates of the annual rates and characteristics of investigated maltreatment in Ontario.

As with any sample survey, estimates must be understood within the constraints of the survey instruments, the sampling design, and the estimation procedures used. This chapter presents the OIS-2013 methodology and discusses its strengths, limitations, and impact on interpreting the OIS-2013 estimates.

SAMPLING

The OIS-2013 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 were the Primary Sampling Units (PSU) in the OIS-2013. A PSU corresponds to a geographic area served by a child welfare agency. The term child welfare agency is used to describe any organization that has the authority to conduct child protection investigations. A representative sample of 17 child welfare agencies was selected for inclusion in the OIS-2013 using simple random sampling, with the exception of agencies in the largest metropolitan region, that were sampled with certainty. Given that the child population in the largest metropolitan region is very large, failing to include these child welfare agencies in the sample would result in unreliable estimates.

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 Aboriginal background. Census boundaries were used for weighting estimates, and therefore in geographic areas served by multiple child welfare agencies, all child welfare agencies in the geographic region were counted as one for the purposes

FIGURE 2-1: Three Stage Sampling

of simple random sampling. This meant that if one child welfare agency in the region was sampled, the other child welfare agencies serving that region would be automatically included in the sample as well. This ensured that weighting estimates could be calculated correctly, because all agencies serving the same geographic region were always included in the sample. A final count of 46 agencies constitutes the sampling frame for the 2013 study (see Figure 2-1).

The sample was selected in March 2013. Directors of the sampled agencies were sent letters of recruitment, which introduced the study and requested participation. Participation was completely voluntary. While most expressed support for the study, many agencies were concerned about the burden that participating in the study would place on intake workers. Seven agencies declined to participate because of workload issues. Replacement agencies were randomly selected from the remaining agencies.

Case Selection

In small and mid-sized agencies, all cases opened during the sampling period were drawn[1]. 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[2] is considered to be

[1] In the last cycle of the OIS, 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.

[2] A small number of participating agencies requested a slightly different sampling period due to extenuating circumstances.

TABLE 2-1: Child Population and Sample Size by Region, OIS-2013

Region	Child Population (0-15)	Total Child Protection Agencies	Number of OIS Agencies	OIS Agency Child Population (0-15)	Annual Agency case Openings	Case Openings Sampled for OIS
Large Metropolitan Area Sampled with Certainty	429,720	4	4	429,720	10,702	706
Rest of Ontario	1,919,880	42	13	620,730	72,056	2,410
Ontario Total	**2,349,600**	**46**	**17**	**1,050,450**	**82,758**	**3,116**

Source: Canada. Statistics Canada. Census of Canada, 2011: Age and Sex for Population, for Canada, Provinces, Territories, Census Divisions and Census Subdivisions,
*There are 7 delegated Aboriginal agencies in Ontario.

typical of the whole year. However, follow-up studies are needed to systematically explore the extent to which seasonal variation in the types of cases referred to child welfare agencies may affect estimates that are based on a three-month sampling period. 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 procedure to be able to feasibly track these cases within the budget of the OIS;
- reports on already open cases were not included
- only the first report was included for cases that were reported more than once during the three-month sampling period; and
- Ontario has been developing differential or alternate response model that could have posed a challenge in capturing cases open to the alternate non-protection stream. However, because the decisions to stream occur after the initial investigation, the OIS was able to capture both types of openings.

These procedures led to 3,116 family based cases being selected in Ontario.

Identifying Investigated Children

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

In Ontario, children eligible for inclusion in the final study sample were identified by having child welfare workers complete the Intake Face Sheet from the OIS-2013 Maltreatment Assessment Form. The Intake Face Sheet allowed the investigating worker to identify any children who were being investigated because of maltreatment-related concerns

(i.e., investigation of possible past incidents of maltreatment or assessment of risk of future maltreatment). Only children 15 and under are included in the sample used in this report, as the Ontario Child and Family Services Act is only applicable to children age 15 and younger. These procedures yielded a final sample of 5,265 children investigated because of maltreatment-related concerns.

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 already 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.[3] 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 familial stress, caregiver addictions, mental health, and expectations of the child. Risk assessment tools are intended to supplement clinical decision making and are designed to be used at multiple decision points during child welfare interventions.

[3] 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.

Because of changes in investigation mandates and practices over the last fifteen years, the OIS-2013 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 and OIS-2013, investigating workers were asked to complete a data collection instrument for both types of cases. For cases involving maltreatment investigations, workers described the specific forms of maltreatment that were investigated and whether the investigation was substantiated. In cases that were only opened to assess future risk of maltreatment, the investigating workers were asked to indicate whether the risk was confirmed, but they were not asked to specify the specific forms of future maltreatment that they may have had concerns about. Specifying the specific 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, expectations of the child, and sources of familial support and familial 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 the present 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 2013 rates and characteristics of substantiated maltreatment.

Forms of Maltreatment included in the OIS-2013

The OIS-2013 definition of child maltreatment includes 32 forms of maltreatment subsumed under five categories of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence. This classification reflects a fairly broad definition of child maltreatment and includes several forms of maltreatment that are not specifically stated in some provincial and territorial child welfare statutes (e.g. 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 of maltreatment. The OIS-2013 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 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 (see Trocmé et al., 2009[4] for more information on the distinction between these three levels of substantiation).

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

Risk of harm vs. harm

Cases of maltreatment that draw public attention usually involve children who have been severely injured or, in the most tragic cases, have died as a result of maltreatment. In practice, child welfare agencies investigate and intervene in many situations in which children have not yet been 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 yet been harmed. The OIS-2013 includes both types of situations in its definition of substantiated maltreatment. The study also gathers information about physical and emotional harm attributed to

[4] Trocmé, N., Knoke, D., Fallon, B., & MacLaurin, B. (2009). Differentiating between substantiated, suspected, and unsubstantiated maltreatment in Canada. Child Maltreatment, 14(1), 4–16.

substantiated or suspected maltreatment (Chapter 4).

The OIS-2013 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 her/his 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.

INSTRUMENTS

The OIS-2013 Maltreatment Assessment Form

The research team engaged in several tasks in preparation for data collection. One major task involved revising the Maltreatment Assessment Form used in the OIS-2008 while ensuring that enough comparability was maintained to allow for comparisons across study cycles. The Maltreatment Assessment Form was the main data collection instrument used for the study. This form was completed by the primary investigating child welfare worker upon completion of each child welfare investigation (Appendix D). This data collection form consists of an Intake Face Sheet, a Household Information Sheet, and a Child Information Sheet.

Intake Face Sheet

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

Information about the report or referral as well as partially identifying information about the child(ren) involved was collected on the Intake face Sheet. The form requested information on: the date of referral; referral source; number of 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 only or an investigated incident of maltreatment); whether there were other adults in the home and other caregivers outside the home. The section of the form containing partially identifying information was kept at the agency. The remainder of the form was completed if abuse or neglect was suspected at any point during the investigation, or if the investigating worker assessed the risk of maltreatment in the future.

Household Information Sheet

The Household Information Sheet was completed when at least one child in the family was investigated for alleged

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

Child Information Sheet

The third page of the instrument, the Child Information Sheet, was completed for each child who was investigated for maltreatment or for risk of future maltreatment. The Child Information Sheet documented up to three different forms of maltreatment, and included levels of substantiation, alleged perpetrator(s), and duration of maltreatment. In addition, it collected information on child functioning, physical and emotional harm to the child attributable to the alleged maltreatment, child welfare court activity, 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, and spanking. In both types of investigations, workers were asked whether they were concerned about future maltreatment.

Guidebook

All items on the Maltreatment Assessment Form were defined in an accompanying OIS-2013 Guidebook (Appendix E).

Revising and Validating the OIS-2013 Maltreatment Assessment Form

The OIS-2013 data collection instrument was based on the 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 studies. 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 over time in child welfare practices may require that changes be made to data collection instruments, to ensure that the instruments are relevant to current child welfare practices.

After the OIS/CIS-2008, a process evaluation was conducted as a comprehensive review of the design and implementation of the study. The primary objective of this process evaluation was to assess the study's overall effectiveness as well as recommend changes for future cycles of the study. The process evaluation involved conducting a survey of 58 participating supervisors and workers and holding a meeting for site researchers to evaluate the study shortly after data collection. The feedback garnered through the process evaluation was used to improve the OIS-2013 methodology and data collection instrument.

Validation Focus Groups

In March and April 2013, focus groups were conducted across Ontario to gather feedback on revising the OIS-2008 data collection instrument. A convenience sample of five agencies was recruited for participation in the focus groups, including agencies in large, medium, and small population centres and one rural agency. One focus group was held in each agency, with four to six intake workers in

attendance at each. The focus groups were semi-structured with prepared questions that were based on the feedback gathered during the CIS-2008 process evaluation.

Changes to the OIS-2013 version of the form were made in close consultation with the OIS-2013 Advisory Committee, which was composed of child welfare practitioners, Children's Aid Society administrators, university researchers, and representatives from the Ontario Ministry of Children and Youth Services as well as the Ontario Association for Children's Aid Societies (Appendix B).

Changes to the data collection instrument included: updating ethno-racial categories based on the latest Census visible minority definitions; collecting child-level ethno-racial status in order to allow for analysis of overrepresentation of visible minority groups[5]; expanding question regarding the household's ability to pay for basic necessities to gather more detailed and precise information; changing definition of time to recurrence to be consistent with the latest child welfare literature, defining time to recurrence as the length of time since previous case closure; expanding the options for referrals to service to include new categories such as referrals to legal services; asking about the risk of future maltreatment for both maltreatment and risk-only cases; gathering more specific information regarding police involvement in maltreatment investigations; refining the out of home placement categories to be consistent with current child welfare practice in Ontario; and, changing formatting to increase clarity and ease of completion.

The final version of the data collection instrument is in Appendix D.

[5] Previous cycles of the study only collected child-level information on Aboriginal status.

Reliability Study

A reliability study was undertaken to examine the test re-test reliability of the data collection instrument. The consistency of workers judgments was evaluated by comparing case ratings on the instrument at two points in time. A convenience sample of three child welfare agencies was selected for reliability testing based upon availability and proximity to study team research personnel. Workers participated in the study on a voluntary basis.

The test re-test procedure was arranged as follows: workers completed the instrument for new investigations in which an allegation of a maltreatment-related concern was made (Time 1), then approximately three to four weeks later the same worker completed the instrument a second time for the same investigation (Time 2). A total of 82 investigations were included in pilot testing. Two measures of agreement were calculated for categorical variables: percent agreement and the Kappa statistic. The Kappa statistic adjusts for agreement that occurs by change along; values between 0.4 and 0.6 are usually interpreted as moderate agreement; between 0.6 and 0.8 substantial agreement; and values that exceed 0.8 reflect excellent agreement (Landis and Koch, 1977).[6] Similar procedures were completed in previous cycles of the incidence studies.

The vast majority of items on the OIS-2013 Maltreatment Assessment Form demonstrated good to excellent test re-test reliability. Among the most reliable groups of variables were forms of maltreatment, child age and gender, case dispositions (e.g., placement, use of child welfare court), and

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

household descriptors (e.g., housing conditions, number of moves in past year).

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-2013 instruments and procedures. A small minority of agencies opted to receive the training session. Instead, the majority of agency representatives requested one-on-one support for participating child welfare workers completing the OIS-2013 instruments throughout the data collection procedures. Participating agencies also had access to an online "hub" of information about the OIS-2013, including the OIS-2013 Guidebook (Appendix E), which included definitions for all of the items and study procedures.

Site researchers were assigned to coordinate data collection activities at each agency. Site researchers were trained on the study instruments and procedures and each researcher was assigned approximately three to five agencies.

Completion of the data collection instrument was designed to coincide with the point when investigating workers complete their written report of the investigation. In most instances, some type of report is required within 30 days of the beginning of the investigation. In instances where a complex investigation takes more time, workers were asked to complete the data collection instrument with their preliminary assessment report.

Site researchers visited the OIS-2013 agencies on a regular basis to provide participating workers with one-on-one support in completing the data collection instruments, collect forms, respond to questions, and monitor study progress. Agencies participating in the OIS-2013 requested an unprecedented level of researcher support. While in previous study cycles an average of six visits to each agency were required, OIS-2013 site researchers visited each participating agency an average of 15 to 20 times.

Data collection instruments collected by the site researchers were reviewed at the agency for completeness and consistency. Every effort was made to contact workers if there was incomplete information on key variables (e.g., child age or category of maltreatment) or inconsistencies. Identifying information (see Appendix D) was stored on-site, and non-identifying information was sent to the central data verification location.

Data Verification and Data Entry

Data collection forms were verified twice for completeness and inconsistent responses: first at the agency by the site researchers, and then a second time at the University of Toronto by a senior member of the research team. Consistency in form completion was examined by comparing the data collection instrument to the brief case narratives provided by the investigating worker.

Data collection forms were entered using TELEform Elite scanning software, V.8.1. Face Sheet information was entered manually using Microsoft Access 2013. The data were then combined into an SPSS Version 22 database. Inconsistent responses, missing responses, and miscodes were systematically identified. Duplicate cases were screened for at the child welfare agency and deleted on the basis of agency identification numbers, family initials, and date of referral.

Participation and Item Completion Rates

The OIS-2013 Maltreatment Assessment Form

was as short and simple as possible to minimize the response burden and ensure a high completion rate. Item completion rates were over 99% on most items.[7]

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 96%.

ESTIMATION PROCEDURES

Weighting

The data collected for the OIS-2013 were weighted in order to derive provincial annual incidence estimates, first by applying a composite regionalization weight and then by applying an annualization weight.

The regionalization weight was developed to estimate the number of investigations completed within the three-month data collection period by child welfare organizations across Ontario. The regionalization weight includes three components: (1) a sample weight, (2) a subsampling weight that accounts for random subsampling of investigations in agencies that investigated more than 250 cases during the three-month data collection period, and (3) an agency size correction, designed to adjust for variations in the size of agencies within the province.

The annualization weight is used to estimate annual investigation volume based on the investigation volume during the three-month data collection period of the OIS-2013. The annualization weight is the ratio of all investigations conducted by a sampled agency during 2013 to investigations conducted by the sampled agency during the case selection period.

Three limitations to this estimation method should be noted. The agency size correction uses child population as a proxy for agency size; this does not account for variations in per capita investigation rates across agencies in the province. The annualization weight corrects for seasonal fluctuation in the volume of investigations, but it does not correct for seasonal variations in types of investigations conducted.[8] Finally, the annualization weight includes cases that were investigated more than once in the year as a result of the case being re-opened following a first investigation completed earlier in the same year. Accordingly, the weighted annual represent the child maltreatment-related investigations, rather than investigated children.

Sample weight – The first factor, the sample weight, represents the ratio of the total number of agencies in Ontario to the number of agencies sampled from the province. It should be noted that four sites were not randomly sampled because they represented a large metropolitan centre that was

[7] 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-2013 site researchers. In designing the Maltreatment Assessment Form, 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.

[8] Using Statistics Canada's method of assessing seasonality, the OIS team found that the average absolute difference between annual counts and estimates based on Oct-Dec openings was under 3% for all forms of maltreatment with the exception of sexual abuse where the average absolute difference was closer to 5% (Sexual abuse was the primary concern in an estimated 848 substantiated investigations in Ontario in 2013, adjusting for the seasonal effect would mean that the annual count would be closer to 900).

automatically included in the study.[9] In these instances the sample weight was 1. First Nations agencies were also given a sample weight of 1.

Subsampling weight – In most agencies, data were collected for every new, maltreatment-related investigation opened during the three-month data collection period; however, in order to reduce burden on workers, sample size was limited to 250 randomly selected investigations in 8 very large agencies. The subsampling weight accounts for this random subsampling of investigations within the three-month data collection period. This factor represents the ratio of the number of investigations opened by an agency during the three-month data collection period to the number of investigations from that agency that were included in the OIS sample. For example, a subsampling weight of 4 (1,000/250) would have been assigned to cases from an agency where data were collected for a random sample of 250 cases in an agency that investigated 1,000 cases during the data collection period.

Agency Size Correction – Child welfare organizations, including those in the study sample, vary greatly in terms of the number of children they serve and the number of investigations they conduct. The "sample weight" described above does not account for variations in the size of the agencies within the province. The third component of the regionalization weight is designed to adjust for variations in the size of agencies within Ontario. It represents the ratio of the average child population for all the agencies in the province to the average child population served by the sampled agencies.

An important limitation to the method used to derive the agency size correction must be noted. Ideally, this factor would adjust for variations in the number of investigations opened by agencies. But, because reliable statistics on number of investigations completed by an agency have not been consistently available, child population is used as a proxy for agency size. Accordingly, this factor assumes that the numbers of investigations opened by the agencies are strictly proportional to agency child population and it does not account for variations in the per capita rate of investigations.

Regionalization Weight: Together, these three factors (sample weight, subsampling weight, agency size correction) are used to create the regionalization weights, which are used to estimate the number of investigations completed within the three-month data collection period by all child welfare organizations in Ontario.

Annualization weight: Because the OIS collects data only during a three-month period from sampled child welfare agencies, data from the agencies were weighted to estimate the number of investigations conducted by the sampled agencies during the full year. Accordingly, all data were multiplied by an annualization weight, which represents the ratio of all investigations conducted by a sampled agency during 2013 to all investigations opened by the sampled agency during the case selection period: October 1 – December 31 2013[10]. For example, if an agency conducted 1,800 investigations during 2013, 500 of which were investigated from October 1 to December 31, the annualization weight would be 1,800/500 = 3.6.

[9] See Table 2-1.

[10] A small number of participating agencies requested a slightly different sampling period due to extenuating circumstances.

Two key limitations of the annualization weights must be noted. This factor corrects for seasonal fluctuation in the number of investigations, but it does not correct for any seasonal variations in the types of investigations conducted. In addition, while cases reported more than once during the three-month case sampling period were unduplicated, the weights used for OIS-2013 annual estimates include cases that were investigated more than once in the year as a result of the case being re-opened following a first investigation completed earlier in the same year. Accordingly, the weighted annual represent new child maltreatment-related investigations conducted by the sampled agencies in 2013, rather than investigated children.

Full weight: The weight used to derive national annual estimates, is the agency specific weight that is the product of the regionalization weight multiplied by the annualization weight.

The child population figures for the OIS-2013 agencies are based on 2011 Census data[11].

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-2013 uses the term "child investigations" rather than "investigated children," since the unit of analysis is the investigation of the child's alleged maltreatment.

An estimate of how often maltreated children will be counted more than once can be derived from those jurisdictions that maintain separate investigation-based and child-based counts. The U.S. National Child Abuse and Neglect Data System (NCANDS)[12] reports that for substantiated cases of child maltreatment, the six month recurrence rate during 2012 was 5.36%.

Sampling Error Estimation

Although the OIS-2013 estimates are based on a relatively large sample of 5,265 child maltreatment-related investigations, sampling error is primarily driven by the variability between the 17 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 $p < 0.05$ level. Most coefficients of variation were in the reliable leve (Please see Appendix F).

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

[11] Statistics Canada. (2012). Age and sex for the population of Canada, provinces, territories, census divisions and census subdivisions, 2011 Census. In 2011 Census of Population (Catalogue no 98-311-XCB2011023). Ottawa: Statistics Canada.

[12] U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2013). *Child Maltreatment 2012*. Washington, D.C. U.S. Government Printing Office.

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-2013 data collection and data handling protocols and procedures were reviewed and approved by the University of Toronto Office Research Ethics Board. Written permission for participating in the data collection process was obtained from the agency administrator or director for each participating agency. Where a participating agency had an ethics review process, the study was also evaluated by the individual agency.

The study utilized a case file review methodology. The case files are the property of the delegated agency or regional authority. 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 Face Sheet* collected partially identifying information about the children including their first name and age. The tear off portion of the *Intake Face Sheet* had a space for the file/case number the agency assigns and the study number the OIS-2013 site researchers assigned and also provided space for the first two letters of the family surname. This information was used for only verification purposes. Any names on the forms were deleted prior to leaving the agency and the tear off portion of the *Intake Face Sheet* remained at the agencies.

The data collection instruments (that contain no identifying information) were scanned into an electronic database at the University of Toronto. This electronic data was stored on a locked, password protected hard drive in a locked office. All paper data collection instruments are archived in secure filing cabinets.

This report contains only provincial estimates of child abuse and neglect and does not identify any participating agency.

Aboriginal Ethics

The OIS-2013 adhered to the principles of ownership, control, access and possession (OCAP), which must be negotiated within the context of individual research projects. In the case of the OIS-2013, adherence to OCAP principles is a shared concern that shapes the collaborative relationship between the OIS-2013 Advisory Committee and the research team. Several executive directors of First Nations child welfare agencies were invited to be members of the OIS-2013 Advisory Committee, which guided the research design and implementation.

STUDY LIMITATIONS

Although every effort was made to make the OIS‑2013 estimates precise and reliable, several limits 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 and OIS‑2013 comparisons between study cycles must be done with caution. While Tables in the OIS-2013 and OIS-2008 may be compared, Tables in the OIS‑2013 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 30 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 30 days; Table 3-5 and Table 3-6 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 by primary maltreatment category; the number of substantiated physical abuse investigations involving broken bones, burns and scalds, or fatality 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 only by the police, and it does not include incidents of intimate partner violence that were never reported to either the police nor Children's Aid Societies; 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 reported in cases of substantiated maltreatment. The investigating workers determined if the child subject of the investigation demonstrated functioning concerns, for instance depression or anxiety. However, these child functioning concerns were not verified by an independent source.

Chapter 3

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

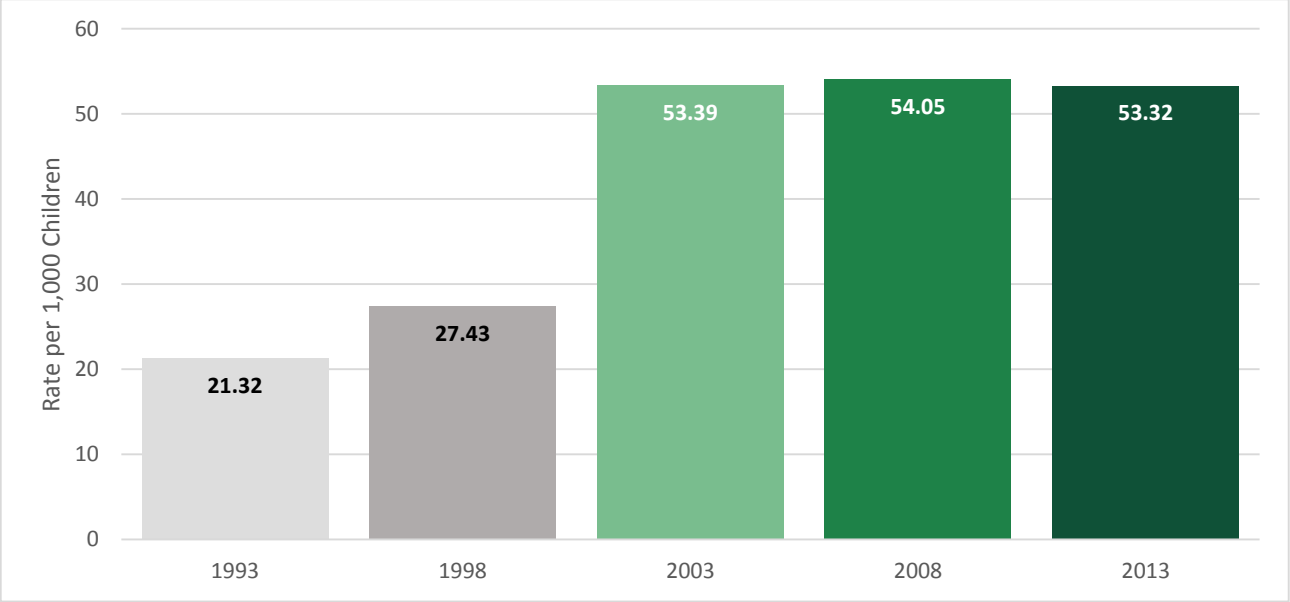
This chapter primarily compares rates of maltreatment-related investigations documented by the 1998, 2003, 2008, and 2013 cycles of the OIS. These results should be interpreted with caution since a number of factors are not controlled for in these descriptive tables. Changes in rates of maltreatment-related investigations can be attributed to a number of factors including (1) changes in public and professional awareness of the problem, (2) changes in legislation or in case-management practices, (3) changes in the OIS study procedures and definitions, and (4) changes in the actual rate of maltreatment-related investigations. As noted in the introductory 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, child welfare placements, transfers to ongoing services 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 maltreatment investigations conducted in 1993, 1998, 2003, 2008, and 2013 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 and 2008 reports).

Estimates presented from the OIS-1993, OIS-1998, OIS-2003, OIS-2008, and OIS-2013 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 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 figures refer to child investigations and not to the number

FIGURE 3-1: 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 and 2013



of investigated families. Investigations include all maltreatment-related investigations including cases that were investigated because of future risk of 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 OIS-1993, 1998, 2003, 2008 AND 2013

Chapter 3 presents comparisons between the four provincial cycles of the OIS. Comparisons focus on changes in rates and key characteristics of investigations. All of the estimates reported in the Chapter 3 tables were re-calculated for the 2013 report to ensure consistency in the estimation procedures used. As a result, the estimates for OIS-1998 and OIS-2003 used in the 2013 report may differ slightly from those published in previous reports. Statistical tests of significance were used to test the significance of differences between the 2008 and 2013 estimates. Tests of significance for 1998 to 2003 differences are presented in the OIS-2003 Report, and tests of significance for 2003 to 2008 differences are presented in the OIS-2008 Report.

MALTREATMENT RELATED INVESTIGATIONS

Table 3-1a presents the number and incidence of maltreatment-related investigations in 1993, 1998, 2003, 2008, and 2013. An estimated 46,860 investigations were conducted in Ontario in 1993, a rate of 21.32 investigations per 1,000 children. 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 53.39 per 1,000 children. The number of investigations did not change significantly between 2003, 2008 and 2013. In 2008, an estimated 128,748 maltreatment-related investigations were conducted across Ontario, representing a rate

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 and 2013

Child Welfare Investigations									
1993		1998		2003		2008		2013	
#	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	53.32ns

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

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

ns Difference between 2008 and 2013 incidence rate is not statistically significant.

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.

The five cycles of the OIS demonstrate trends in Ontario child welfare services. The rate of child maltreatment-related investigations has more than doubled since 1993. A slight increase in the investigation rate occurred between 1993 and 1998. Following this, the investigation rate more than doubled between 1998 and 2003. Since 2003, the rate of investigations in Ontario has remained stable.

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. In Ontario in 2013, 82 percent (101,919 investigations or 43.38 per 1,000 children) of investigations involved a customized response, while 18 percent of investigations involved a traditional approach (23,128 investigations or 9.84 per 1,000 children). There was a non-significant increase in the rate of customized investigations in 2013 compared to 2008. 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 maltreatment-related investigations by age group in 1998, 2003, 2008, and 2013.

In 2013, an estimated 29% of investigations involved children aged four to seven years old (36,730 investigations, or 64.29 investigations per 1,000 children aged four to seven). There was a non-significant increase in the rate of investigations for this age group (55.93 investigations per 1,000 children involved four to seven year old children in Ontario in 2008). A small proportion (6 percent) of investigations involved infants under one, however the rate of investigation for this age group was 58.44 investigations per 1,000 children under one in Ontario. There was a non-significant decrease in the rate of investigations for children under age one from 2008 to 2013. The rate of investigation remained relatively constant from 2008 to 2013 for children aged one to three years old. In 2013, 51.25 investigations per 1,000 children aged one to three were conducted in Ontario (this is compared to a rate of 55.08 investigations per 1,000 children aged one to three in 2008).

Just under one quarter of investigations in Ontario in 2013 involved children aged eight

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

	2008			2013		
Type of Response	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Customized response	96,347	40.45	75%	101,919	43.38ns	82%
Traditional response	32,321	13.57	25%	23,128	9.84ns	18%
Total Investigations	**128,668**	**54.02**	**100**	**125,047**	**53.22ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

Based on a sample of 5,258 investigations in 2013 with information about type of response.

Total investigations do not add up to total estimates of investigations provided in Table 3-1 because of missing data.

ns Difference between 2008 and 2013 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 and 2013

	1998			2003			2008			2013		
Child Age Group	#	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	58.44ns	6%
1-3 years	8,412	19.17	13%	19,638	48.63	15%	22,199	55.08	17%	21,801	51.25ns	17%
4-7 years	17,023	28.01	26%	32,847	54.84	26%	31,222	55.93	24%	36,730	64.29ns	29%
8-11 years	16,736	28.27	26%	36,124	56.52	28%	32,939	53.07	26%	29,907	51.48ns	24%
12-5 years	16,333	28.33	25%	31,262	50.15	24%	33,102	49.56	26%	28,928	45.45ns	23%
Total Investigations	**64,658**	**27.43**	**100%**	**128,108**	**53.59**	**100%**	**128,748**	**54.05**	**100%**	**125,281**	**53.32ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

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

ns Difference between 2008 and 2013 incidence rate is not statistically significant.

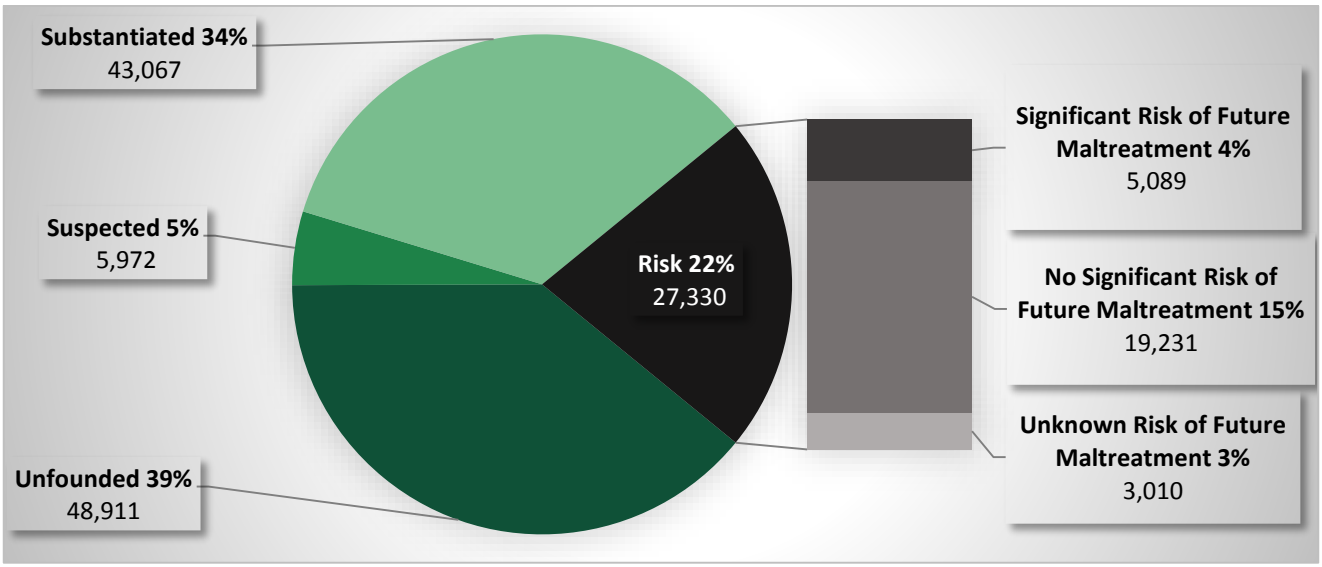
to 11 (29,907 investigations, or 51.48 investigations per 1,000 children age eight to 11) and another 23 percent involved children 12 to 15 years of age (28,928 investigations, or 45.45 investigations per 1,000 children aged 12 to 15).

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 2013.

FIGURE 3-2: Type of Investigation and Level of Substantiation in Ontario in 2013



The OIS-2013 tracks two types of investigations: those conducted because of a concern about a maltreatment incident that may have occurred and those conducted because there may be significant risk of future 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 outcome 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

OIS-2013

Of the 125,281 investigations conducted in Ontario in 2013, 78 percent were maltreatment investigations which focused on a concern of abuse or neglect (an estimated 97,951 child maltreatment investigations or 41.69 investigations per 1,000 children) and 22 percent of investigations were concerns about risk of future maltreatment (an estimated 27,330 investigations or 11.63 investigations per 1,000 children).

Thirty-four percent of all maltreatment-related investigations (i.e., maltreatment and risk of future maltreatment investigations) were substantiated, an estimated 43,067 child investigations. In a further five percent of investigations (an estimated 5,972 child investigations or 2.54 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-nine percent of investigations (an estimated 48,911 child investigations or 20.82 investigations per 1,000 children) were unfounded.

In four percent of all maltreatment-related investigations, the investigating worker concluded there was a significant risk of future maltreatment (2.17 per 1,000 children, an estimated 5,089 child investigations). In 15 percent of investigations, no significant risk of future maltreatment was indicated (an estimated 19,231 investigations or 8.18 investigations per 1,000 children). In two percent of investigations workers did not know whether the child was at significant risk of future maltreatment (an estimated 3,010 investigations or 1.28 per 1,000 children). There was a statistically significant decrease in the rate of investigations in which the worker indicated the risk of future maltreatment was unknown ($p<.01$).

OIS 1998, 2003, 2008, and 2013

As shown in Table 3-3, rates of substantiated maltreatment more than doubled from 1998 to 2003. Relative to this dramatic expansion, the rate 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 to what extent some confirmed future risk of maltreatment investigations may have been classified as 'substantiated maltreatment'. As noted in Chapter 2, 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), yields a rate of 19.65 investigations per 1,000 children where either maltreatment has been substantiated or future risk has been confirmed. Similarly, the rate of substantiated cases in Ontario in 2013 is 20.5 per 1,000 children (non-significant difference between 2008 and 2013).

REFERRAL SOURCE

Table 3-4a describes the sources of referrals in 1998, 2003, 2008, and 2013. 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 Maltreatment Assessment Form 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 referral sources (e.g., anonymous).

Non-Professional Referral Sources:

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

Child: A self-referral by any child listed on the Intake Face Sheet of the OIS-2008 Maltreatment Assessment Form.

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

	1998			2003				2008			2013		
Child Maltreatment Investigations	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%	Maltreatment and risk only investigations	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
							Substantiated Maltreatment	38,571	16.19	30%	43,067	18.33ns	34%
Substantiated Maltreatment	23,145	9.82	36%	58,425	24.44	44%	Risk of Future Maltreatment	8,237	3.46	6%	5,089	2.17ns	4%
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**	**20.50ns**	**38%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
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 harm investigations in 2008, and 2,073 substantiated child maltreatment and substantiated future risk of harm investigations in 2013.
ns Difference between 2008 and 2013 incidence rate is not statistically significant.

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

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

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 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.

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, 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 2013, 20 percent of investigations or an estimated 25,465 investigations were referred by non-professional sources (rate of 10.84 investigations per 1,000 children), and 75 percent of investigations were referred by

professionals (an estimated 93,467 investigations or 39.78 investigations per 1,000 children). In seven percent of investigations (3.87 investigations per 1,000 children) the referral source was classified as other, either because it was anonymous or it was categorized as an "other" source of referral.

Although there was a significant change in referrals between 1998 and 2003, the distribution of referrals between professionals and non-professionals remained the same from 2003 to 2008 and from 2008 to 2013.

Table 3-4b presents specific non-professional and professional referral sources, as well as the "other" category, for all investigations conducted in 2013. Some specific referral sources have been collapsed into categories: custodial parents and non-custodial parent (*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 and Social Services*). In 2013, the largest number of referrals came from schools; 31 percent of investigations or an estimated 38,284 investigations (rate of 16.29 investigations per 1,000 children). The second largest source of referral was police (an estimated 34,003 investigations or 27% of investigations). Custodial or non-custodial parent was the largest non-professional referral source (12 percent of investigations or a rate of 6.59 investigations per 1,000 children). This is a similar pattern as in 2008, in which the largest number of professional referrals came from schools and police, and the largest number of investigations from non-professionals was from parents.

RATES OF ON-GOING 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 on-going 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. 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 cases open because of alleged maltreatment or risk of future maltreatment. Children referred to child welfare agencies for reasons other than child maltreatment or risk of maltreatment (e.g. behavioural or emotional problems, see Chapter 2) may have been admitted to care or received ongoing services, but were not tracked by the OIS.

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).

An estimated 30,836 investigations remained open for ongoing services in Ontario in 2013, a rate of 13.12 investigations per 1,000 children or 25 percent of all investigations. In an estimated 92,327 investigations, the case was closed following the initial investigation (a rate of 39.29 investigations per 1,000 children or 75% of all investigations). There was no significant difference in the rate of case opening between 2013 and 2008. The

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 and 2013

	1998			2003			2008			2013		
Referral Source	#	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	10.84ns	20%
Any Professional	39,563	16.78	61%	90,685	37.93	71%	91,517	38.42	71%	93,467	39.78ns	75%
Other/ Anonymous	7,944	3.37	12%	13,377	5.60	10%	10,936	4.59	8%	9,104	3.87ns	7%
Total Investigations	**64,658**	**27.43**	**100%**	**128,108**	**53.59**	**100%**	**128,748**	**54.05**	**100%**	**125,281**	**53.32ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

Based on a sample of 3,050 investigations in 1998, 7,172 investigations in 2003, 7,471 investigations in 2008, and 5,265 investigations in 2013. Columns do not add up to 100% because an investigations could have had more than one referral source.

ns Difference between 2008 and 2013 incidence rate is not statistically significant.

TABLE 3-4b: Specific Referral Sources in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2008 and 2013

	2008			2013		
Referral Source	#	Rate per 1,000 children	%	#	Rate per 1,000 children	%
Non Professional						
Custodial or Non-Custodial Parent	14,942	6.27	12%	15,476	6.59ns	12%
Child (subject of referral)	1,217	0.51	1%	379	0.16ns	0%
Relative	6,597	2.77	5%	4,441	1.89ns	4%
Neighbour/friend	7,566	3.18	6%	5,573	2.37ns	4%
Professional						0%
Community, Health or Social Services	14,863	6.24	12%	11,748	5.00ns	9%
Hospital (any personnel)	6,506	2.73	5%	5,798	2.47ns	5%
School	32,372	13.59	25%	38,284	16.29ns	31%
Other child welfare service	8,154	3.42	6%	4,909	2.09ns	4%
Day care centre	1,571	0.66	1%	934	0.40ns	1%
Police	29,525	12.39	23%	34,003	14.47ns	27%
Anonymous	7,459	3.13	6%	4,633	1.97ns	4%
Other	3,388	1.42	3%	4,471	1.90ns	4%
Total Investigations	**128,748**	**54.05**	**100%**	**125,281**	**53.32ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

Based on a sample of 5,265 investigations in 2013. Columns do not add up to 100% because an investigation could have had more than one referral source.

ns Difference between 2008 and 2013 incidence rate is not statistically significant.

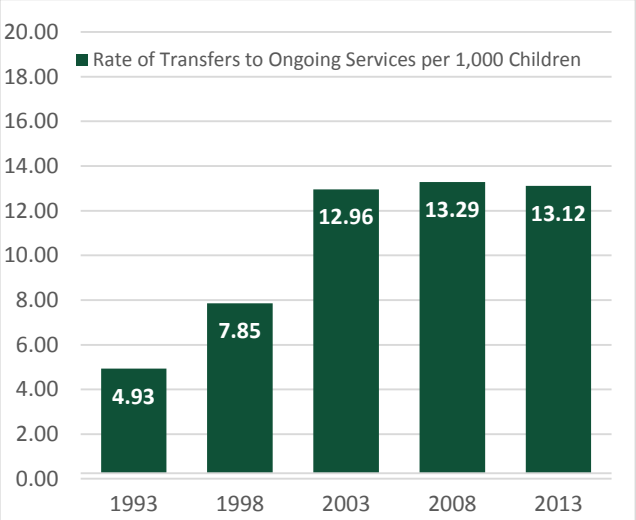
proportions of investigations opened and closed at the conclusion of an investigation were identical in 2008 and 2013: 25% transferred for ongoing services; 75% closed at initial investigation. There was a non-significant increase in the incidence of investigations open for on-going services from 12.96 investigations per 1,000 children in 2003 to 13.31 per 1,000

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 and 2013

	1998			2003			2008			2013		
Provision of Ongoing Services	#	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	13.12ns	25%
Case to be Closed	43,489	18.45	70%	97,012	40.58	76%	97,030	40.73	75%	92,327	39.29ns	75%
Total Investigations	**61,987**	**26.30**	**100%**	**128,006**	**53.54**	**100%**	**128,723**	**54.04**	**100%**	**123,163**	**52.42ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 2,946 investigations in 1998, 7,168 investigations in 2003, 7,470 investigations in 2008, and 5,193 investigations in 2013 with information about transfers to ongoing services.
This question was not applicable for a sample of 72 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 community caregiver investigations is 2,118.
ns Difference between 2008 and 2013 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 and 2013 in Ontario



The rate of transfers to ongoing services after the conclusion of a child maltreatment-related investigation has nearly tripled since 1993: from 4.93 per 1,000 children to 13.12 per 1,000 children.

children in 2008. 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.

Out-of-Home Placement

The OIS tracks placements out-of-home 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 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: Customary care is a model of

Aboriginal 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: 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.

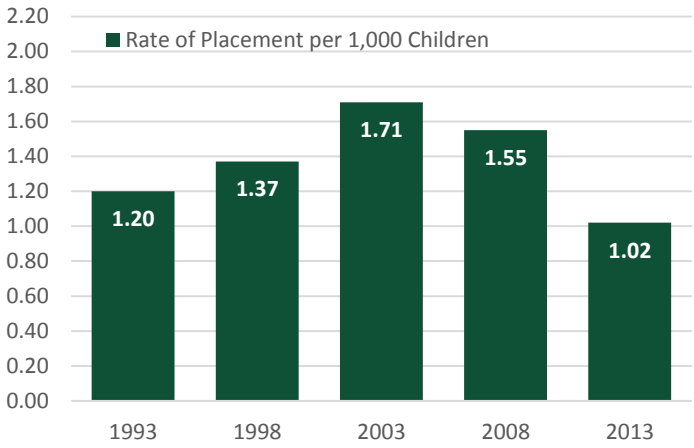
For the purposes of Table 3-6a, these placement categories were combined into four broader categories: child remained at home (no placement required and placement considered), informal kinship care (kinship out of care and customary care[1]), foster care (kinship in care and non-family foster care), and group home/residential (group home and residential/secure treatment).

In 2013, the child remained at home in 97 percent of all investigations (an estimated 121,020 investigations or 51.51 investigations per 1,000 children). Three percent of investigations resulted in a change of residence for the child: one percent to informal kinship care (an estimated 1,874 investigations or 0.80 investigations per 1,000 children); two percent to foster care (an estimated 2,105 investigations or 0.90 investigations per 1,000 children); and less than one percent to residential secure treatment or group homes (an estimated 282 investigations or 0.12 investigations per 1,000 children).

[1] All customary care placements made were informal.

There generally has been little change in placement rates (as measured during the maltreatment investigation) across the four cycles of the OIS, other than a non-statistically significant increase between 2003 and 2008 in informal placements of children with relatives and a statistically significant decrease in informal placements from 2008 to 2013.

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



The rate of placement in Ontario at the conclusion of a child maltreatment-related investigation has remained consistent across five cycles of the OIS. The rate is lowest in 2013 (1.02 per 1,000 children) and was highest in 2003 (1.71 per 1,000 children).

Table 3-6b presents specific placements for all investigations conducted in 2013. The two most common placement types were kinship out of care (an estimated 1,862 investigations or 0.79 investigations per 1,000 children) and foster care (an estimated 1,956 investigations or 0.83 investigations per 1,000 children).

Group home placements and 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 1,105 investigations (rate of 0.47 investigations per 1,000 children or one percent of investigations).

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 and 2013

	1998			2003			2008			2013		
Placement Status	#	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	51.51ns	97%
Informal kinship care	2,779	1.18	4%	2,748	1.15	2%	3,616	1.52	3%	1,874	0.80 p<0.05	1%
Foster care	2,416	1.02	4%	3,023	1.26	2%	3,004	1.26	2%	2,105	0.90ns	2%
Group home/Residential secure treatment	824	0.35	1%	1,074	0.45	1%	692	0.29	1%	282	0.12ns	<1%
Total Investigations	**64,630**	**27.42**	**100%**	**127,955**	**53.52**	**100%**	**128,748**	**54.05**	**100%**	**125,281**	**53.32ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 3,047 investigations in 1998, 7,164 investigations in 2003, 7,471 investigations in 2008, and 5,265 investigations in 2013.
Total investigations do not add up to total estimates of investigations provided in Table 3-1 because there is missing data.
ns Difference between 2008 and 2013 incidence rate is not statistically significant. p<0.05 Statistically significant difference at p<0.05.

TABLE 3-6b: Placement in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

	2013		
Placement status	#	Rate per 1,000 children	%
No placement required	119,916	51.04	96%
Placement considered	1,105	0.47	1%
Kinship out of care	1,862	0.79	1%
Customary care	-	-	0%
Kinship in care	149	0.06	0%
Foster care	1,956	0.83	2%
Group home	237	0.10	0%
Residential/Secure treatment	-	-	0%
Total Investigations	**125,281**	**53.32**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 5,265 investigations in 2013.
-Estimate was < 100 investigations.

Previous Child Maltreatment Investigations

Workers were asked if the investigated child had been previously reported to a child welfare agency for suspected maltreatment. In 2013, more than half of all investigations involved a child who had been previously investigated.

In 57 percent of investigations, workers indicated that the child had been referred previously for alleged maltreatment (71,038 investigations representing a rate of 30.23 investigations per 1,000 children). In 43 percent of investigations, the child had not been previously investigated for suspected maltreatment (53,360 investigations, representing a rate of 22.71 investigations per 1,000 children). In less than one percent of investigations, the investigating worker did not know whether the child had been previously investigated (an estimated 883 investigations, representing a rate of 0.38 investigations per 1,000 children).

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 and 2013

	1998			2003			2008			2013		
Previous Investigations	#	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	30.23ns	57%
Child Not Previously Investigated	34,201	14.51	27%	65,995	27.61	52%	68,849	28.9	53%	53,360	22.71ns	43%
Unknown	1,880	0.80	1%	1,017	0.43	1%	821	0.34	1%	883	0.38ns	1%
Total Investigations	**64,513**	**27.37**	**100%**	**128,067**	**53.57**	**100%**	**128,709**	**54.03**	**100%**	**125,281**	**53.32ns**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 3,042 investigations in 1998, 7,170 investigations in 2003, 7,468 investigations in 2008, and 5,265 investigations in 2013.
Total investigations do not add up to total estimates of investigations provided in Table 3-1 because of missing data.
ns Difference between 2008 and 2013 incidence rate is not statistically significant.

There was no statistically significant change in the rate of previous referrals between the OIS-2003 (25.54 per 1,000), OIS-2008 (24.79 per 1,000), and OIS-2013 (30.23).

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 many statutes require that, where possible, non-court ordered services 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.

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-2013, three percent of all child investigations (an estimated 3,220 investigations or a rate of 1.37 court applications per 1,000 children) resulted in an application to child welfare court, either during or at the completion of the initial maltreatment investigation. This is a similar rate as in 2008, in which 1.49 court applications per 1,000 children were documented.

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 and 2013

	1998			2003			2008			2013		
Previous Investigations	#	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	51.95ns	97%
Application Made	2,839	1.20	4%	3,780	1.58	3%	3,551	1.49	3%	3,220	1.37ns	3%
Total Investigations	**64,539**	**27.38**	**100%**	**127,841**	**53.48**	**100%**	**128,748**	**54.05**	**100%**	**125,282**	**53.32ns**	**100%**

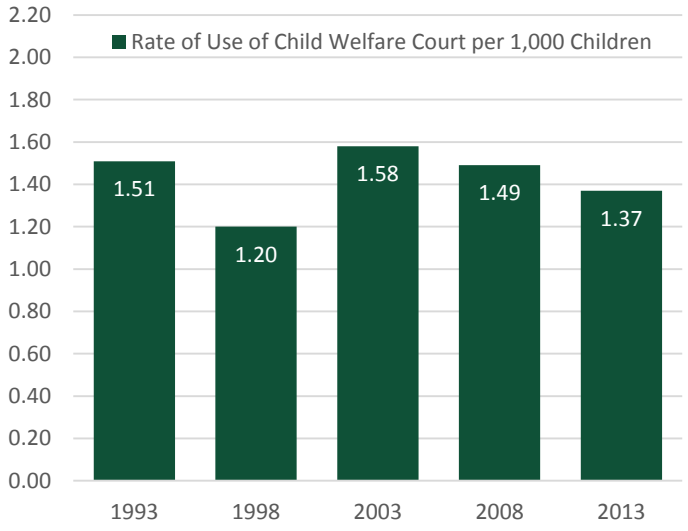
Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

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

ns Difference between 2008 and 2013 incidence rate is not statistically significant.

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



The use of child welfare court is very similar across cycles of the OIS. Use of court was lowest in 1998 (1.20 per 1,000 children) and highest in 2003 (1.58 per 1,000 children).

Chapter 4

CHARACTERISTICS OF MALTREATMENT

The OIS-2013 definition of child maltreatment includes 32 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 OIS-2013/OIS-2013 Guidebook in Appendix E). The 32 forms of maltreatment tracked by the OIS are defined in the detailed sections on the five categories of maltreatment in this chapter.

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 13 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 2013. 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 (see Chapter 2: Methods for a full description of the inclusion and exclusion criteria). Readers are cautioned that the findings presented in this chapter are not directly comparable to findings presented in the OIS-2003, OIS-1998 reports, and the OIS-1993 reports (see Chapter 1).

PRIMARY CATEGORIES OF MALTREATMENT

Table 4-1 presents the estimates and incidence rate for the five primary categories of substantiated maltreatment in Ontario in 2013. The maltreatment typology in the OIS-2013 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;

TABLE 4-1: Primary Category of Substantiated Maltreatment in Ontario in 2013

Primary Category of Maltreatment	#	Rate per 1,000 children	%
Physical Abuse	5,770	2.46	13%
Sexual Abuse	848	0.36	2%
Neglect	10,386	4.42	24%
Emotional Maltreatment	5,620	2.39	13%
Exposure to Intimate Partner Violence	20,443	8.70	48%
Total Substantiated Investigations	**43,067**	**18.33**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 1,837 substantiated investigations in 2013.

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 six forms: terrorizing or threat of violence; verbal abuse or belittling; isolation/confinement; inadequate nurturing or affection; exploiting or corrupting behaviour; 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 OIS-2013 Guidebook (Appendix E) for specific definitions of each maltreatment form.

There were an estimated 43,067 substantiated child maltreatment investigations in Ontario in 2013 (18.33 investigations per 1,000 children). Exposure to intimate partner violence represents the largest proportion of substantiated maltreatment investigations. Almost half (48 percent) of all substantiated investigations identified exposure to intimate partner violence as the primary form of maltreatment (an estimated 20,443 investigations or 8.70 investigations per 1,000 children). In 24 percent of substantiated investigations, neglect was identified as the overriding concern, an estimated 10,386 investigations (4.42 investigations per 1,000 children). In 13 percent of substantiated investigations, or an estimated 5,770 investigations, the primary form of maltreatment identified was physical abuse (2.46 investigations per 1,000 children). Emotional maltreatment was identified as the primary form of maltreatment in another 13 percent of substantiated investigations (an estimated 5,620 investigations or 2.39 investigations per 1,000 children). In a small proportion of investigations (2 percent), sexual abuse was identified as the primary maltreatment form (an estimated 848 investigations or 0.36 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 (87 percent) only one form of substantiated maltreatment was documented; in the remaining 13 percent of substantiated investigations, multiple forms of substantiated maltreatment were documented.

TABLE 4-2: Single and Multiple Categories of Substantiated Child Maltreatment in Ontario in 2013

	#	Rate per 1,000 children	%
Single Form of Substantiated Maltreatment			
Physical Abuse Only	4,553	1.94	11%
Sexual Abuse Only	722	0.31	2%
Neglect Only	9,012	3.84	21%
Emotional Maltreatment Only	4,687	1.99	11%
Exposure to Intimate Partner Violence Only	18,584	7.91	43%
Subtotal: Only One Form of Substantiated Maltreatment	37,558	15.98	87%
Multiple Categories of Substantiated Maltreatment			
Physical Abuse and Sexual Abuse	-	-	0%
Physical Abuse and Neglect	325	0.14	1%
Physical Abuse and Emotional Maltreatment	788	0.34	2%
Physical Abuse and Exposure to Intimate Partner Violence	663	0.28	2%
Sexual Abuse and Neglect	148	0.06	0%
Sexual Abuse and Emotional Maltreatment	-	-	0%
Sexual Abuse and Exposure to Intimate Partner Violence	-	-	0%
Neglect and Emotional Maltreatment	657	0.28	2%
Neglect and Exposure to Intimate Partner Violence	713	0.30	2%
Emotional Maltreatment and Exposure to Intimate Partner Violence	1,463	0.62	3%
Physical Abuse, Sexual Abuse and Neglect	-	-	0%
Physical Abuse, Sexual Abuse and Emotional Maltreatment	-	-	0%
Physical Abuse, Sexual Abuse and Exposure to Intimate Partner Violence	-	-	0%
Physical Abuse, Neglect and Emotional Maltreatment	256	0.11	1%
Physical Abuse, Neglect and Exposure to Intimate Partner Violence	-	-	0%
Physical Abuse, Emotional Maltreatment and Exposure to Intimate Partner Violence	283	0.12	1%
Sexual Abuse, Neglect and Emotional Maltreatment	-	-	0%
Sexual Abuse, Neglect and Exposure to Intimate Partner Violence	-	-	0%
Neglect, Emotional Maltreatment and Exposure to Intimate Partner Violence	130	0.06	0%
Subtotal: Multiple Categories of Substantiated Maltreatment	5,509	2.34	13%
Total Substantiated Maltreatment	**43,067**	**18.33**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.
Based on a sample of 1,837 substantiated investigations in 2013. Columns may not add up to total because low frequency estimates are not reported but are included in total.

-Estimate was < 100 investigations.

Single Categories of Maltreatment: An estimated 37,558 substantiated investigations involved only one category of substantiated maltreatment (15.98 investigations per 1,000 children). Physical abuse was identified as the single category of maltreatment in 11 percent of investigations; two percent of investigations involved only sexual abuse; 21 percent involved neglect only; 11 percent involved only emotional maltreatment; and 43 percent involved allegations of exposure to intimate partner violence only.

Multiple Categories of Maltreatment: An estimated 5,509 investigations involved more than one category of substantiated maltreatment (2.34 investigations per 1,000 children). The most frequently identified combinations were emotional maltreatment and

exposure to intimate partner violence (an estimated 1,463 investigations or 0.62 investigations per 1,000 children), physical abuse and emotional maltreatment (an estimated 788 investigations or 0.34 investigations per 1,000 children) and physical abuse and exposure to intimate partner violence (an estimated 663 investigations or 0.28 investigations per 1,000 children). Sexual abuse in combination with other categories of maltreatment is not reportable because of low frequencies.

PHYSICAL HARM

The OIS-2013 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 1,611 substantiated investigations, or 0.69 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 606 substantiated investigations, or 0.26 investigations per 1,000 children), harm was sufficiently severe to require treatment.

Physical Abuse: Physical harm was indicated in 23 percent of investigations where physical abuse was the primary substantiated maltreatment, an estimated 1,347 child investigations. The majority of physical harm noted (1,112 substantiated physical abuse investigations), harm was documented but was not severe enough to require treatment. In only a small proportion of investigations (222 substantiated physical abuse investigations), medical treatment was required. The fact that no physical harm was noted in 77 percent of physical abuse cases may seem surprising to some readers. It is important to understand that most jurisdictions consider that physical abuse includes caregiver behaviours that seriously endanger children, as well as those that do not involve documented injuries.

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

Neglect: Physical harm was indicated in six percent of investigations where neglect was the primary substantiated maltreatment. In approximately half of the 604 substantiated neglect cases that involved physical harm, the investigating worker noted injuries severe enough to require medical treatment (three percent of substantiated neglect cases).

Emotional Maltreatment: Please note estimates of physical harm in substantiated emotional maltreatment investigations are too low to reliably report.

Exposure to Intimate Partner Violence: Physical harm was identified in one percent of cases of 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

TABLE 4-3: Physical Harm by Primary Category of Substantiated Child Maltreatment in Ontario in 2013

	Primary Category of Substantiated Maltreatment																	
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	1,112	0.47	19%	-	-	2%	296	0.13	3%	-	-	0%	168	0.07	1%	1,611	0.69	4%
Physical Harm, Medical Treatment Required	222	0.09	4%	-	-	0%	308	0.13	3%	-	-	0%	-	-	0%	606	0.26	1%
Sub-total: Any Physical Harm Documented	1,347	0.57	23%	-	-	2%	604	0.26	6%	-	-	1%	218	0.09	1%	2,231	0.95	5%
No Physical Harm Documented	4,423	1.88	77%	835	0.36	98%	9,782	4.16	94%	5,572	2.37	99%	20,225	8.61	99%	40,838	17.38	95%
Total Substantiated Investigations	**5,770**	**2.46**	**100%**	**848**	**0.36**	**100%**	**10,386**	**4.42**	**100%**	**5,620**	**2.39**	**100%**	**20,443**	**8.70**	**100%**	**43,067**	**18.33**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Based on a sample of 1,836 substantiated child maltreatment investigations in 2013 with information about whether or not medical treatment was required. Rows and columns may not add up to total because of missing data and because low frequency estimates are not reported but are included in total.

-Estimate was < 100 investigations.

possible types of injury or health conditions were documented:

No Harm: There was no apparent evidence of physical harm to the child as a result of maltreatment.

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

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

Broken Bones: The child suffered fractured bones.

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

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

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

Table 4-4 presents six types of physical harm (and no physical harm investigations) reported in the OIS-2013. Physical harm was documented in five percent of substantiated maltreatment investigations (2,230 investigations or 0.95 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-2013 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

TABLE 4-4: Nature of Physical Harm in Substantiated Child Maltreatment Investigations in Ontario in 2013

Nature of Physical Harm	Total		
	#	Rate per 1,000 children	%
No Physical Harm	40,838	17.38	95%
Bruises, Cuts, and Scrapes	1,645	0.70	4%
Burns and Scalds	-	-	0%
Broken Bones	101	0.04	0%
Head Trauma	-	-	0%
Fatality	-	-	0%
Other Health Conditions	620	0.26	1%
At Least One Type of Physical Harm	2,231	0.95	5%
Total Substantiated Investigations	**43,067**	**18.33**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

Based on a sample of 1,837 substantiated investigations in 2013. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Children may have experienced multiple types of harm.

-Estimate was < 100 investigations.

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, although the information collected in the OIS-2013 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 mental or emotional harm (e.g., nightmares, bed wetting or social 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 become 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 investigations. In order to rate the severity of mental/emotional harm, workers indicated whether the child required treatment to manage the symptoms of mental or emotional harm. Emotional harm was noted in 35 percent of all substantiated maltreatment investigations (an estimated 15,084 substantiated investigations or 6.42 investigations per 1,000 children). In 22 percent of substantiated investigations (an estimated 9,560 investigations or 4.07 investigations per 1,000 children), emotional harm was severe enough to require therapeutic treatment.

Physical Abuse: Emotional harm was noted in 35 percent of cases where physical abuse was the primary substantiated maltreatment. In 24 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 (61 percent) of investigations where sexual abuse was the primary substantiated concern. In 57% of substantiated

TABLE 4-5: Documented Emotional Harm by Primary Category of Substantiated Child Maltreatment in Ontario in 2013

	Primary Category of Substantiated Maltreatment																	
Documented Emotional 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	%
Emotional Harm, No Treatment Required	668	0.28	12%	-	-	4%	782	0.33	8%	690	0.29	12%	3,348	1.42	16%	5,524	2.35	13%
Emotional Harm, Treatment Required	1,374	0.58	24%	484	0.21	57%	2,203	0.94	21%	1,327	0.56	24%	4,172	1.78	20%	9,560	4.07	22%
Sub-total: Any Emotional Harm Documented	2,042	0.87	35%	520	0.22	61%	2,985	1.27	29%	2,016	0.86	36%	7,521	3.20	37%	15,084	6.42	35%
No Emotional Harm Documented	3,728	1.59	65%	328	0.14	39%	7,401	3.15	71%	3,604	1.53	64%	12,848	5.47	63%	27,909	11.88	65%
Total Substantiated Investigations	**5,770**	**2.46**	**100%**	**848**	**0.36**	**100%**	**10,386**	**4.42**	**100%**	**5,620**	**2.39**	**100%**	**20,369**	**8.67**	**100%**	**42,993**	**18.30**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Based on a sample of 1,830 substantiated child maltreatment investigations in 2013 with information about whether or not there was emotional harm documented. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total.

Total for primary categories of substantiated maltreatment does not add up to total estimates of categories provided in Table 4-1 because of missing data.

-Estimate was < 100 investigations.

sexual abuse investigations, emotional harm was sufficiently severe to require treatment.

Neglect: Emotional harm was identified in 29 percent of investigations where neglect was the primary substantiated maltreatment; in 21 percent of substantiated neglect investigations, harm was sufficiently severe to require treatment.

Emotional Maltreatment: Emotional harm was identified in 36 percent of investigations where substantiated emotional maltreatment was the primary concern, and was sufficiently severe to require treatment in 24 percent of substantiated emotional maltreatment investigations. While it may appear surprising to some readers that no emotional harm had been documented for such a large proportion of emotionally maltreated children, it is important to understand that the determination of emotional maltreatment 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 37 percent of investigations where exposure to intimate partner violence was the primary substantiated maltreatment; in 20 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. If the maltreatment type was unfounded, the duration was listed as "Not Applicable (Unfounded)." Given the length restrictions for the OIS-2013 questionnaire, it was not possible to gather additional information on the frequency of maltreatment

TABLE 4-6: Duration of Maltreatment by Primary Category of Substantiated Child Maltreatment in Ontario in 2013

Duration of Maltreatment	Primary Category of Substantiated Maltreatment																	
	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	%
Single Incident	2,429	1.03	42%	275	0.12	32%	4,254	1.81	41%	2,148	0.91	38%	8,634	3.67	42%	17,740	7.55	41%
Multiple Incidents	3,341	1.42	58%	573	0.24	68%	6,132	2.61	59%	3,472	1.48	62%	11,778	5.01	58%	25,296	10.77	59%
Total Substantiated Investigations	**5,770**	**2.46**	**100%**	**848**	**0.36**	**100%**	**10,386**	**4.42**	**100%**	**5,620**	**2.39**	**100%**	**20,412**	**8.69**	**100%**	**43,036**	**18.32**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

Based on a sample of 1,835 substantiated child maltreatment investigations in 2013 with information about duration of maltreatment.

Total for primary categories of substantiated maltreatment does not add up to total estimates of categories provided in Table 4-1 because of missing data.

in order to distinguish between long-term situations with infrequent maltreatment and long-term situations with frequent maltreatment.

Table 4-6 shows that 41 percent of substantiated investigations (an estimated 17,740 child investigations, or 7.55 investigations per 1,000 children) involved single incidents of maltreatment and 59 percent involved multiple incidents of maltreatment (an estimated 25,296 child investigations, or 10.77 investigations per 1,000 children).

Physical abuse: Maltreatment was indicated as a single incident in 42 percent of substantiated physical abuse investigations, and multiple incidents in 58 percent of these investigations.

Sexual abuse: Maltreatment was indicated as a single incident in 32 percent of investigations in which sexual abuse was the primary substantiated concern, and multiple incidents in 68 percent of these investigations.

Neglect: Similar to physical abuse, single incidents of neglect occurred in approximately 41 percent of investigations in which neglect was the primary form of substantiated maltreatment. Multiple incidents of neglect were noted in 59 percent of these investigations.

Emotional maltreatment: Sixty-two percent of substantiated emotional maltreatment investigations involved multiple incidents of emotional maltreatment, and 38 percent involved single incidents.

Exposure to Intimate Partner Violence: 42 percent of investigations in which exposure to intimate partner violence was the primary form of substantiated maltreatment involved single incidents, whereas 58 percent involved multiple incidents.

Chapter 5

CHARACTERISTICS OF CHILDREN AND FAMILIES

This chapter provides a description of cases of substantiated maltreatment 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 2013 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 (see Chapter 2: Methods for a full description of the inclusion and exclusion criteria). Readers are cautioned that the findings presented in this chapter are not directly comparable to findings presented in the OIS-2003, OIS-1998, and the OIS-1998 reports (see Chapter 1).

AGE AND SEX OF CHILDREN IN INVESTIGATED AND SUSBTANTIATED MALTREATMENT

Table 5-1 presents the children's age and sex in all maltreatment-related investigations as well as in substantiated child maltreatment investigations. The incidence of maltreatment-related investigations was almost identical for males (53.44 investigations per 1,000 boys) and females (53.01 per 1,000 girls). There was some variation by age and sex in incidence of investigated maltreatment, with incidence rates being highest for four to seven year olds (64.03 investigations per 1,000 girls four to seven years old and 64.48 investigations per 1,000 boys four to seven years old). Males were more often represented in the 8 to 11 year old group (55.00 per 1,000 boys compared to 47.52 per 1,000 girls) and females more often in the adolescent group (47.79 per 1,000 girls compared to 43.18 per 1,000 boys).

The incidence of substantiated maltreatment was very similar for males (17.70 per 1,000 boys) and females (18.85 per 1,000 girls). As with investigations, there was some variation by age and sex in the incidence of substantiated maltreatment with rates being highest for females aged seven years (27.19 substantiated investigations per 1,000 females aged seven years) and lowest for males aged one year (11.00 substantiated cases per 1,000 males aged one year).

DOCUMENTED CHILD FUNCTIONING

Child functioning was documented on the basis of a checklist of challenges that child welfare workers were likely to be aware of as a result of their investigation. The child functioning checklist (see Appendix D, OIS-2013 Maltreatment Assessment Form) was developed in consultation with child welfare workers and

TABLE 5-1: Child Age and Sex in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations, and in Substantiated Child Maltreatment Investigations in Ontario in 2013

			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**	**2,349,600**	**125,075**	**53.23**	**100%**	**42,901**	**18.26**	**100%**
	Females	1,145,410	60,720	53.01	49%	21,589	18.85	50%
	Males	1,204,210	64,355	53.44	51%	21,312	17.70	50%
0-3 Years	**Females**	**273,605**	**14,613**	**53.41**	**12%**	**5,026**	**18.37**	**12%**
	Males	**287,230**	**15,000**	**52.22**	**12%**	**4,286**	**14.92**	**10%**
< 1 Year	Females	66,020	3,887	58.88	3%	1,128	17.09	3%
	Males	69,410	3,999	57.61	3%	1,159	16.70	3%
1 Year	Females	68,235	3,461	50.72	3%	1,528	22.39	4%
	Males	71,205	3,079	43.24	2%	783	11.00	2%
2 Years	Females	68,820	3,905	56.74	3%	1,098	15.95	3%
	Males	72,610	4,279	58.93	3%	1,578	21.73	4%
3 Years	Females	70,530	3,360	47.64	3%	1,272	18.03	3%
	Males	74,005	3,643	49.23	3%	766	10.35	2%
4-7 Years	**Females**	**278,370**	**17,825**	**64.03**	**14%**	**6,458**	**23.20**	**15%**
	Males	**292,985**	**18,893**	**64.48**	**15%**	**6,236**	**21.28**	**15%**
4 Years	Females	70,065	4,774	68.14	4%	1,653	23.59	4%
	Males	73,365	4,519	61.60	4%	1,477	20.13	3%
5 Years	Females	69,115	4,214	60.97	3%	1,547	22.38	4%
	Males	72,690	4,900	67.41	4%	1,575	21.67	4%
6 Years	Females	69,175	4,533	65.53	4%	1,354	19.57	3%
	Males	72,990	4,545	62.27	4%	1,395	19.11	3%
7 Years	Females	70,015	4,304	61.47	3%	1,904	27.19	4%
	Males	73,940	4,929	66.66	4%	1,789	24.20	4%
8-11 Years	**Females**	**283,215**	**13,457**	**47.52**	**11%**	**4,830**	**17.05**	**11%**
	Males	**297,675**	**16,372**	**55.00**	**13%**	**5,654**	**18.99**	**13%**
8 Years	Females	69,065	3,178	46.01	3%	1,217	17.62	3%
	Males	72,295	4,340	60.03	3%	1,388	19.20	3%
9 Years	Females	70,105	3,681	52.51	3%	1,148	16.38	3%
	Males	73,370	4,501	61.35	4%	1,577	21.49	4%
10 Years	Females	70,740	3,272	46.25	3%	1,164	16.45	3%
	Males	74,455	4,160	55.87	3%	1,443	19.38	3%
11 Years	Females	73,305	3,326	45.37	3%	1,301	17.75	3%
	Males	77,555	3,371	43.47	3%	1,246	16.07	3%
12-15 Years	**Females**	**310,220**	**14,825**	**47.79**	**12%**	**5,275**	**17.00**	**12%**
	Males	**326,320**	**14,090**	**43.18**	**11%**	**5,136**	**15.74**	**12%**
12 Years	Females	73,870	3,905	52.86	3%	1,272	17.22	3%
	Males	77,210	3,928	50.87	3%	1,171	15.17	3%
13 Years	Females	76,220	3,659	48.01	3%	1,187	15.57	3%
	Males	80,160	4,162	51.92	3%	1,618	20.18	4%
14 Years	Females	77,990	3,173	40.68	3%	1,304	16.72	3%
	Males	82,250	2,818	34.26	2%	928	11.28	2%
15 Years	Females	82,140	4,088	49.77	3%	1,512	18.41	4%
	Males	86,700	3,182	36.70	3%	1,419	16.37	3%

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Percentages are column percentages.

Based on a sample of 5,256 child maltreatment investigations in 2013 with information about child age and sex.

Based on a sample of 1,831 substantiated child maltreatment investigations in 2013 with information about child age and sex.

Total investigations and total substantiated investigations do not add up to total estimate of investigations provided in Table 3-1 and total estimate of substantiated maltreatment in Table 4-1 because of missing data.

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 and/or directly observed by the investigating worker or another worker, 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:

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

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

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

ADD/ADHD: Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder is a persistent pattern of inattention and/or hyperactivity/impulsivity that occurs more frequently and more severely than is typically seen in children of comparable levels of development. Symptoms are frequent and severe enough to have a negative impact on children's lives at home, at school, or in the community.

Attachment issues: The child does not have a 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.

Aggression: Behaviour directed at other children or adults that includes hitting, kicking, biting, fighting, bullying others or violence to property, at home, at school or in the community.

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

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 drawing and/or descriptions; sophisticated or unusual sexual knowledge; prostitution or seductive behaviour.

Youth Criminal Justice Act Involvement: Charges, incarceration, or alternative measures with the Youth Justice system.

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 disorders).

Failure to meet developmental milestones: Children who are not meeting their development milestones because of a non-organic reason.

Academic difficulties: Include learning disabilities that are usually identified in schools, as well as any special education program for learning difficulties, special needs, or behaviour problems. Children with learning disabilities have normal or above-normal intelligence, but deficits in one or more areas of mental functioning (e.g., language usage, numbers, reading, work comprehension).

FAS/FAE: Birth defects, ranging from mild intellectual and behavioral difficulties to more profound problems in these areas related to in-utero exposure to alcohol abuse by the biological mother.

Positive toxicology at birth: When a toxicology screen for a newborn tests positive for the presence of drug or alcohol.

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.

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

Drug/solvent abuse: Include prescription drugs, illegal drugs, and solvents.

Other: Specify any conditions related to child functioning; your responses will be coded and aggregated.

Table 5-2 reflects the types of problems associated with physical, emotional, and/or cognitive health, or with behaviour-specific concerns. In 41 percent of substantiated child maltreatment investigations (an estimated 17,737 child investigations or 7.55 investigations per 1,000 children), at least one child functioning issue was indicated by the investigating worker.

Academic difficulties were the most frequently reported child functioning concern (19 percent of substantiated maltreatment investigations), and the second most common was depression/anxiety/withdrawal (19 percent of substantiated maltreatment investigations). Thirteen percent of substantiated maltreatment investigations involved a child with ADD/ADHD, and 12 percent involved a child with aggression. In 11 percent of substantiated maltreatment investigations, the worker indicated that the child had attachment issues, and the worker noted an intellectual/developmental disability for the child in 10 percent of these investigations. It is important to note that these ratings are based on the initial intake investigation and do not capture child functioning concerns that may become evident after that time.

ABORIGINAL HERITAGE OF INVESTIGATED CHILDREN

Children's Aboriginal heritage was documented by the OIS-2013 in an effort to better understand some of the factors that bring children from these communities into contact with the child welfare system. Aboriginal children were identified as a key group to examine because of concerns about overrepresentation of children from these communities in the foster care system. Aboriginal children are almost three times more likely to be substantiated than non-Aboriginal children (47.70 per 1,000 Aboriginal children versus 17.07 per 1,000 non-Aboriginal children).

Nine percent of substantiated maltreatment investigations involved children of Aboriginal heritage (Table 5-3). Five percent of substantiated maltreatment investigations involved children with First Nations status, 3 percent involved First Nations Non-Status

TABLE 5-2: Child Functioning Concerns in Substantiated Child Maltreatment Investigations in Ontario in 2013

Child Functioning Concern	#	Rate per 1,000 children	%
Depression/Anxiety/Withdrawal	8,104	3.45	19%
Suicidal Thoughts	1,950	0.83	5%
Self-Harming Behaviour	1,972	0.84	5%
ADD/ADHD	5,654	2.41	13%
Attachment Issues	4,887	2.08	11%
Aggression	5,318	2.26	12%
Running (Multiple Incidents)	956	0.41	2%
Inappropriate Sexual Behaviours	1,215	0.52	3%
Youth Criminal Justice Act Involvement	609	0.26	1%
Intellectual/Developmental Disability	4,348	1.85	10%
Failure to Meet Developmental Milestones	2,566	1.09	6%
Academic Difficulties	8,257	3.51	19%
FAS/FAE	746	0.32	2%
Positive Toxicology at Birth	360	0.15	1%
Physical Disability	449	0.19	1%
Alcohol Abuse	494	0.21	1%
Drug/Solvent Abuse	1,060	0.45	2%
Other Functioning Concern	1,732	0.74	4%
At Least One Child Functioning Concern	17,737	7.55	41%
No Child Functioning Concern	25,331	10.78	59%
Total Substantiated Investigations	**43,067**	**18.33**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages do not add up to 100% because investigating workers could identify more than one child functioning concern.

Based on a sample of 1,837 substantiated child maltreatment investigations in 2013.

TABLE 5-3: Aboriginal Heritage of Children in Substantiated Child Maltreatment Investigations in Ontario in 2013

Aboriginal Heritage	#	Rate per 1,000 children	%
First Nations, Status	2,314	N/A	5%
First Nations, Non-Status	1,232	N/A	3%
Metis	167	N/A	0%
Inuit	-	N/A	0%
Other Aboriginal	-	N/A	0%
Sub-total: All Aboriginal	3,806	47.70	9%
Not Aboriginal	38,739	17.07	91%
Total Substantiated Investigations	**42,545**	**18.11**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

Percentages are column percentages.

Based on a sample of 1,811 substantiated child maltreatment investigations in 2013 with information about the child's Aboriginal heritage. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total.

Total does not add up to total estimate of substantiated maltreatment in Table 4-1 because of missing data.

- Estimate was < 100 investigations.

children and less than one percent were Métis children. Less than one percent of investigated children in substantiated child maltreatment investigations were Inuit or children with 'other' Aboriginal heritage.

PRIMARY CAREGIVER AGE AND SEX

For each investigated child, the investigating worker was asked to indicate who was the primary caregiver, and to specify this caregiver's age and sex. Eight age groups were captured on the Intake Face Sheet, enabling the workers to estimate the caregiver's age (see Appendix D, Maltreatment Assessment Form). Table 5-4 shows the age and sex distribution of primary caregivers. In 90 percent of substantiated investigations the persons considered to be the primary caregiver were female. Nearly half (40 percent) of substantiated investigations involved caregivers between the ages of 31 and 40. Caregivers who were under 22 were relatively rare (two percent), as were caregivers over 50 (four percent).

PRIMARY CAREGIVER'S RELATIONSHIP TO THE CHILD

The OIS-2013 gathered information on up to two of the child's parents or 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, and other.

Table 5-5 describes the primary caregiver's relationship to the child in substantiated maltreatment investigations in Ontario in 2013. Ninety-five percent of substantiated investigations involved children whose primary caregiver was a biological parent. In two percent of substantiated investigations, the child was living with a grandparent as the primary caregiver.

PRIMARY CAREGIVER RISK FACTORS

Concerns related to documented 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.

TABLE 5-4: Age and Sex of Primary Caregiver in Substantiated Child Maltreatment Investigations in Ontario in 2013

Age of Primary Caregiver	Sex of Primary Caregiver	#	Rate per 1,000 children	%
<16 years	Females	-	-	0%
	Males	-	-	0%
16-18 years	Females	159	0.07	0%
	Males	-	-	0%
19-21 years	Females	996	0.42	2%
	Males	-	-	0%
22-30 years	Females	10,997	4.68	26%
	Males	370	0.16	1%
31-40 years	Females	17,113	7.28	40%
	Males	1,652	0.70	4%
41-50 years	Females	7,616	3.24	18%
	Males	1,488	0.63	4%
51-60 years	Females	1,199	0.51	3%
	Males	491	0.21	1%
>60 years	Females	153	0.07	0%
	Males	-	-	0%
Total	Females	38,262	16.28	90%
	Males	4,046	1.72	10%
Total Substantiated Investigations		**42,308**	**18.01**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 1,802 substantiated child maltreatment investigations in 2013 with information about primary caregiver age and sex.
Columns may not add up to total because low frequency estimates are not reported but are included in total.
Total does not add up to total estimate of substantiated maltreatment in Table 4-1 because of missing data.
This question was not applicable for a sample of 27 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 608.
- Estimate was < 100 investigations.

TABLE 5-5: Primary Caregiver's Relationship to the Child in Substantiated Child Maltreatment Investigations in Ontario in 2013

Primary Caregiver's Relationship to the Child	#	Rate per 1,000 children	%
Biological Mother	36,373	15.48	86%
Biological Father	3,750	1.60	9%
Parent's Partner	589	0.25	1%
Kin foster parent	124	0.05	0%
Non-kin foster Parent	-	-	0%
Adoptive Parent	296	0.13	1%
Grandparent	838	0.36	2%
Other	392	0.17	1%
Total Substantiated Investigations	**42,441**	**18.06**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 1,837 substantiated child maltreatment investigations in 2013 with information about primary caregiver's relationship to the child.
Total does not add up to total estimate of substantiated maltreatment in Table 4-1 because of missing data.
This question was not applicable for a sample of 27 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 608.
- Estimate was < 100 investigations.

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 functioning was identified in 76 percent of substantiated maltreatment investigations (an estimated 32,216 substantiated child investigations). The most frequently noted concerns were victim of intimate partner violence (49 percent), few social supports (34 percent), mental health issues (27 percent), perpetrator of intimate partner violence (16 percent), and alcohol abuse (10 percent).

HOUSEHOLD SOURCE OF INCOME

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

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

Part Time (fewer than 30 hours/week): Family income is derived primarily from a single part-time position.

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

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

Employment Insurance (EI): Caregiver is temporarily unemployed and is 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 or child support payments.

None: Caregiver has no source of legal income.

Unknown: Source of income was not known.

In Table 5-7 we collapsed income sources into full time employment, part time employment (which include seasonal and multiple jobs), benefits/employment insurance/social assistance, unknown and none. Table 5-7 shows the source of income for the households of children with substantiated maltreatment as tracked by the OIS-2013. Fifty-five percent of investigations (or 23,440 substantiated maltreatment investigations) involved children in families that derived their primary income from full-time employment. Twenty-nine percent involved children whose families received other benefits/employment insurance/social assistance as their primary source of income (12,421 substantiated maltreatment investigations). Nine percent of families relied on part-time work, multiple jobs, or seasonal employment. In two percent of substantiated investigations the source of income was unknown by the workers, and in less than four percent of substantiated investigations no reliable source of income was reported.

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 household living situation.

The types of housing included:

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

TABLE 5-6: Primary Caregiver Risk Factors in Substantiated Child Maltreatment Investigations in Ontario in 2013

Caregiver Risk Factors	#	Rate per 1,000 children	%
Alcohol abuse	4,446	1.89	10%
Drug/solvent abuse	3,642	1.55	9%
Cognitive impairment	2,056	0.88	5%
Mental health issues	11,581	4.93	27%
Physical health issues	3,383	1.44	8%
Few social support	14,245	6.06	34%
Victim of intimate partner violence	21,016	8.94	49%
Perpetrator of domestic violence	6,693	2.85	16%
History of foster care/group home	2,202	0.94	5%
At least one primary caregiver risk factor	32,216	13.71	76%
Total Substantiated Investigations	**42,459**	**18.07**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages do not add up to 100% because investigating workers could identify more than one primary caregiver risk factor.
Based on a sample of 1,837 substantiated child maltreatment investigations in 2013 with information about primary caregiver's risk factors.
This question was not applicable for a sample of 27 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 608.

TABLE 5-7: Household Source of Income in Substantiated Child Maltreatment Investigations in Ontario in 2013

Household Source of Income	#	Rate per 1,000 children	%
Full-Time Employment	23,440	9.98	55%
Part-time/Multiple Jobs/Seasonal Employment	3,978	1.69	9%
Benefits/EI/Social Assistance	12,421	5.29	29%
Unknown	870	0.37	2%
None	1,751	0.75	4%
Total Substantiated Investigations	**42,459**	**18.07**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 1,811 substantiated child maltreatment investigations in 2013 with information about household source of income.
This question was not applicable for a sample of 27 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 608.

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.

Band Housing: Aboriginal 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.

TABLE 5-8: Housing Type in Substantiated Child Maltreatment Investigations in Ontario in 2013

Housing Type	#	Rate per 1,000 children	%
Own Home	16,564	7.05	39%
Rental Accommodation	16,267	6.92	38%
Public Housing	4,381	1.86	10%
Band Housing	490	0.21	1%
Shelter/Hotel	251	0.11	1%
Living with friends/family	2,398	1.02	6%
Other	226	0.10	1%
Unknown	1,882	0.80	4%
Total Substantiated Investigations	**42,459**	**18.07**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 1,811 substantiated child maltreatment investigations in 2013 with information about housing type.
This question was not applicable for a sample of 27 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 608.

At the time of the study, 48 percent of all substantiated investigations involved children living in rental accommodations (38 percent private rentals and 10 percent public housing), 39 percent involved children living in purchased homes, six percent living with friends or family, one percent in Band housing, one percent in other accommodations, and one percent in shelters or hotels. In four percent of substantiated investigations, workers did not have enough information to describe the housing type (Table 5-8). According to the 2011 Census for Ontario, 79 percent of households with children owned their home, and 21 percent rented their home.

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 (61 percent or 10.94 investigations per 1,000 children), whereas 21 percent had moved once (3.73 investigations per 1,000 children), and five percent had moved two or more times (0.94 investigations per 1,000 children). In 14 percent of substantiated maltreatment investigations, whether the family had recently moved was unknown to the workers.

HOUSING SAFETY

Workers were asked to indicate if there were unsafe housing conditions in the home. If they answered yes, they were then asked to list all conditions that applied.

Workers could choose from the following list of unsafe housing conditions:

Mold: The presence of mold in the living environment poses a health risk to the child.

Broken Glass: The presence of broken glass in the living environment poses a risk of injury to the child.

Inadequate Heating: The absence of adequate heating in the living environment poses a health risk to the child.

Accessible Drugs or Drug Paraphernalia: Illegal or legal drugs stored in such a way that a child might access and ingest them, or needles stored in such a way that a child may access them.

TABLE 5-9: Family Moves Within the Last Twelve Months in Substantiated Child Maltreatment Investigations in Ontario in 2013

Frequency of Family Moves	#	Rate per 1,000 children	%
No Moves in Last Twelve Moves	25,696	10.94	61%
One Move	8,769	3.73	21%
Two or more moves	2,216	0.94	5%
Unknown	5,780	2.46	14%
Total Substantiated Investigations	**42,459**	**18.07**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages are column percentages.
Based on a sample of 1,811 substantiated child maltreatment investigations in 2013 with information about family moves.
This question was not applicable for a sample of 27 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 608.

TABLE 5-10: Housing Safety in Substantiated Child Maltreatment Investigations in Ontario in 2013

Unsafe Housing Conditions	#	Rate per 1,000 children	%
Mold	485	0.21	1%
Broken glass	138	0.06	0%
Inadequate heating	518	0.22	1%
Accessible drugs or drug paraphernalia	842	0.36	2%
Poisons/chemicals	-	-	0%
Fire/electrical hazards	860	0.37	2%
Other	1,897	0.81	4%
At least one unsafe housing conditions	3,369	1.43	8%
No unsafe housing conditions	39,090	16.64	92%
Total Substantiated Investigations	**42,459**	**18.07**	**100%**

Ontario Incidence Study of Reported Child Abuse and Neglect 2013
Percentages do not add up to 100% because investigating workers could identify more than one hazard in the home.
Based on a sample of 1,811 substantiated child maltreatment investigations in 2013 with information about housing conditions. Columns may not add up to total because low frequency estimates are not reported but are included in total.
This question was not applicable for a sample of 27 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 608.
- Estimate was < 100 investigations.

Poisons/Chemicals: Poisons and/or chemicals stored in such a way that a child might access and ingest or touch them.

Fire/Electrical Hazards: The presence of fire and/or electrical hazards in the living environment (e.g., no smoke detector, frayed or worn electrical cords).

Other: Specify any other unsafe housing condition(s).

At the time of referral, unsafe housing conditions were noted in eight percent of substantiated child maltreatment investigations (1.43 investigations per 1,000 children). The most frequently noted housing safety concern was "other" unsafe housing conditions (e.g., general unsanitary conditions, hoarding), which was noted in four percent of substantiated maltreatment investigations. In two percent of substantiated maltreatment investigations, the worker noted fire or electrical hazards.

FUTURE DIRECTIONS

The OIS-1993, 1998, 2003, 2008, and 2013 datasets provide a unique opportunity to

examine changes in child maltreatment investigations across Ontario over the last two 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-2013 SITE RESEARCHERS

OIS-2013 Site Researchers provided training and one-on-one data collection support at the 17 OIS agencies. Their enthusiasm and dedication to the study were critical in 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-2013.

Kate Allan
Barbara Fallon (Principal Investigator)
Barbara Lee
Rachael Lefebvre
Wendy Rha
Carrie Smith
Melissa Van Wert (Manager)

DATA ENTRY AND VERIFICATION

Data entry of the OIS-2013 Face Sheet was completed by Kate Allan and Wendy Rha. Scanning for the OIS-2013 was completed by Serena Goel and Zachary O'Brien. Data verification was completed with assistance from Tara Black. Data cleaning for the OIS-2013 was completed with assistance from Joanne Daciuk.

DATA ANALYSIS

Assistance in developing the sampling design, weights, and confidence intervals was provided by Martin Chabot, Faculty of Social Work, McGill University.

Appendix B

OIS-2013 ADVISORY COMMITTEE

The OIS-2013 Advisory Committee was established to provide guidance and oversight to all phases of the research. The Advisory Committee is composed of child welfare practitioners, Children's Aid Society administrators, university researchers, and representatives from the Ontario Ministry of Children and Youth Services as well as the Ontario Association for Children's Aid Societies. An additional function of the Advisory Committee is to ensure that OIS respects the principles of Aboriginal 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 Aboriginal and non-Aboriginal children.

The following is a list of current members of the OIS-2013 Advisory Committee.

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

John Fluke
Associate Director for Systems Research and Evaluation, Kempe Centre,
University of Colorado

Bernadette Gallagher
Director of Education,
Ontario Association of Children's Aid Societies

Bruce MacLaurin
Assistant Professor, Faculty of Social Work,
University of Toronto

Tina Malti
Associate Professor, Department of Psychology,
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Jennifer Morris
Director, Child Welfare Secretariat,
Ministry of Child and Youth Services

Kenn Richard
Executive Director,
Native Child and Family Services of Toronto

Erika Runions MacNeil
Manager, Child Welfare Secretariat,
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Aron Shlonsky
Professor, Department of Social Work,
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Vandna Sinha
Assistant Professor, Centre for Research on Children and Families,
McGill University

Theresa Stevens
Executive Director,
Anishinaabe Abinooji Family Services

Nico Trocmé
Director, School of Social Work,
McGill University

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 2013 (OIS-2013) Report.

Aboriginal Peoples: A collective name for the original peoples of North America and their descendants. The Canadian constitution recognizes three groups of Aboriginal people: Indians (commonly referred to as First Nations), Métis and Inuit. These are three distinct peoples with unique histories, languages, cultural practices and spiritual beliefs. About 1.4 million people in Canada identify themselves as an Aboriginal person, according to the 2011 National Household Survey (Aboriginal Affairs and Northern Development Canada, 2013).[1]

Age Group: The age range of children included in the OIS-2013 sample. Unless otherwise specified, all data are presented for children between newborn and 15 years of age.

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

Annualization Weight: The number of cases opened in an agency during 2013 divided by the number of cases opened during the three-month case selection period.

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

Case Openings: Cases that appear on agency/office statistics as openings. These may be counted on a family basis or a child basis. Openings do not include referrals that have been screened-out.

Categories of Maltreatment: The five key classifications categories under which the 32 forms of maltreatment were subsumed: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to intimate partner violence.

Child: The OIS-2013 defined child as age newborn to 15 inclusive.

Child Maltreatment Investigations: Case openings that meet the OIS-2013 criteria for investigated maltreatment (see Figure 1-1).

Child Welfare Agency: Refers to child protection services and other related services. The focus of the OIS-2013 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-2013 does not measure prevalence of maltreatment.

[1] Aboriginal Affairs and Northern Development Canada (2013). *Aboriginal peoples and communities*. Retrieved from http://www.aadnc-aandc.gc.ca/eng/1100100013785/1304467449155.

Child Welfare Service Area: Geographic area served by a distinct child welfare office. In Ontario and other decentralized provinces and territories, a child welfare service area refers to a child welfare agency. In some cases, several agencies serve the same geographic area on the basis of children's religion or Aboriginal status. In such instances, all child welfare agencies sharing the same geographic boundaries are counted as a single child welfare service area.

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 anyone 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-2013 provides an estimate of the number of cases (involves children aged 15 and under) 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 2013 (screened-out reports are not included). The estimates are broken down by three levels of substantiation (substantiated, suspected, unsubstantiated). Cases opened more than once during the year are counted as separate investigations.

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 617 First Nation communities, which represent more than 50 nations or cultural groups and 50 Aboriginal languages (Aboriginal Affairs and Northern Development Canada, 2013).[2]

First Nations Status: An individual recognized by the federal government as being registered under the Indian Act is referred to as a Registered Indian (commonly referred to as a Status Indian). Over the years, there have been many rules for deciding who is eligible for registration as an Indian under the Indian Act. Important changes were made to the Act in June 1985, when Parliament passed Bill C-31, An Act to Amend the Indian Act, to bring it in line with the Canadian Charter of Rights and Freedoms, and again in 2011 with the coming into force of Bill C-3: Gender Equity in Indian Registration Act (Aboriginal Affairs and Northern Development Canada, 2013).[3]

Forms of Maltreatment: Specific types of maltreatment (e.g., hit with an object, sexual

[2] Ibid.
[3] Ibid.

exploitation, or direct witness to physical violence) that are classified under the five OIS-2013 Categories of Maltreatment. The OIS-2013 captured 32 forms of maltreatment.

Inuit: Inuit are the Aboriginal people of Arctic Canada. About 45,000 Inuit live in 53 communities in: Nunatsiavut (Labrador); Nunavik (Quebec); Nunavut; and the Inuvialuit Settlement Region of the Northwest Territories. Each of these four Inuit groups have settled land claims. These Inuit regions cover one-third of Canada's land mass (Aboriginal Affairs and Northern Development Canada, 2013).[4]

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-2013 does not document unreported cases.

Investigated cases are subject to various screening practices, which vary across sites. The OIS-2013 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-2013 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, and 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 (Aboriginal Affairs and Northern Development Canada, 2013).[5]

Multi-stage Sampling Design: A research design in which several systematic steps are taken in drawing the final sample to be studied. The OIS-2013 sample was drawn in three stages. First, a 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 (e.g., prevention services, parent-child conflict, services for young pregnant women, etc.).

Primary Sampling Unit: A definition of a *Child Welfare Agency*. In a multi-stage sampling design, the initial stage of sampling is based on an element of the population, and that element is the primary sampling unit. In the OIS-2013,

[4] Ibid.

[5] Ibid.

the initial stage of sampling occurred by randomly selecting child welfare agencies.

Regionalization Weight: A composition of the sample weight, subsampling weight, and agency size correction. Weights based on 2011 Census information.

Reporting Year: The year in which child maltreatment cases were opened. The reporting year for the OIS-2013 is 2013.

Risk of Future Maltreatment: No specific form of maltreatment. 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: The denominator used in calculating maltreatment rates. In the case of the OIS-2013 the unit of analysis is child maltreatment investigations.

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).

Appendix D

OIS-2013 MALTREATMENT ASSESSMENT FORM

The OIS-2013 Maltreatment Assessment Form consists of:

- Intake Face Sheet;
- Household Information Sheet; and
- Two identical Child Information Sheets

Ontario Incidence Study of Reported Child Abuse and Neglect 2013

OIS Maltreatment Assessment

INTAKE FACE SHEET *(Please complete this face sheet for **all** cases)*

OIS OFFICE USE ONLY

		-			-					

1. Date case opened: D D M M Y Y

2. Source of allegation/referral *(Fill in all that apply)*

◯ Custodial parent	◯ Neighbour/friend	◯ Hospital (any personnel)	◯ School	◯ Police
◯ Non-custodial parent	◯ Social assistance worker	◯ Community health nurse	◯ Other child welfare service	◯ Community agency
◯ Child (subject of referral)	◯ Crisis service/shelter	◯ Community physician	◯ Day care centre	◯ Anonymous
◯ Relative	◯ Community/recreation centre	◯ Community mental health professional	◯ Other: _____	

3. Please describe referral, including alleged maltreatment or risk of maltreatment (if applicable)

OIS OFFICE USE ONLY

Results of investigation:

4. Which approach to the investigation was used? ◯ Customized/alternate response ◯ Traditional protection investigation

5. Caregiver(s) in the home

Primary caregiver

a) Sex ◯ Male ◯ Female

b) Age ◯ <16 ◯ **16–18 yrs** ◯ **19–21 yrs** ◯ 22–30 yrs ◯ 31–40 yrs ◯ 41–50 yrs ◯ 51–60 yrs ◯ >60 yrs

Second caregiver in the home at time of referral

◯ No second caregiver in the home

a) Sex ◯ Male ◯ Female

b) Age ◯ <16 ◯ **16–18 yrs** ◯ **19–21 yrs** ◯ 22–30 yrs ◯ 31–40 yrs ◯ 41–50 yrs ◯ 51–60 yrs ◯ >60 yrs

6. Use the following RELATIONSHIP CODES to indicate caregiver's relationship to the child in 6d) and 6e) and, in the case of "other," please specify the relationship in the space provided

1 Biological parent 2 Parent's partner 3 Kin foster parent 4 Non-kin foster parent 5 Adoptive parent 6 Grandparent 7 Other: _____

OIS OFFICE USE ONLY	6a) List first names of *all* children (<16 years) in the home at time of referral	6b) Age of child	6c) Sex of child	6d) Primary caregiver's relationship to child (see relationship codes above)	6e) Second caregiver's relationship to child (see relationship codes above)	6f) Subject of referral	Choose 6g OR 6h: 6g) Investigated incident of maltreatment		6h) Risk investigation only
			◯ M ◯ F			◯	◯	OR	◯
			◯ M ◯ F			◯	◯	OR	◯
			◯ M ◯ F			◯	◯	OR	◯
			◯ M ◯ F			◯	◯	OR	◯
			◯ M ◯ F			◯	◯	OR	◯
			◯ M ◯ F			◯	◯	OR	◯

7. Other adults in the home (Fill in all that apply)

◯ None ◯ Grandparent ◯ **Children ≥ 16**

◯ **Other:** _____

8. Caregiver(s) outside the home (Fill in all that apply)

◯ None ◯ Father ◯ Mother ◯ Grandparent

◯ **Other:** _____

A Child Information Sheet should be completed for each child investigated for an incident of maltreatment (6g) or risk of maltreatment (6h). Only complete (6g) and (6h) for children who are the subject of an investigation. For children referred but NOT investigated, DO NOT complete (6g) or (6h) and DO NOT complete a Child Information Sheet.

Worker's name: _____

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		-			-					

First two letters of primary caregiver's surname:

Other family surname, if applicable:

Case number:

This information will remain confidential, and no identifying information will be used outside your own agency.
This tear-off portion of the instrument will be destroyed by the site researcher at this agency/office upon completion of data collection.

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Funded by Ontario Ministry of Children and Youth Services

PROCEDURES

1. The Intake Face Sheet should be completed on every case that you assess/investigate, even if there is no suspected maltreatment.
2. The entire OIS Maltreatment Assessment form (*Intake Face Sheet, Household Information Sheet* and *Child Information Sheet(s)*) should be completed for each investigation. Each investigated child requires a separate *Child Information Sheet*.

Note: Currently open/active cases with new allegations of child maltreatment are not included in the OIS.

COMPLETION INSTRUCTIONS

To ensure accuracy and minimize response time, the OIS Maltreatment Assessment shoud be completed when you complete the standard written assessment/investigation report for the child maltreatment investigation.

Unless otherwise specified, all information *must* be completed by the investigating worker.

Complete *all* items to the best of your knowledge. To increase accuracy of data scanning, please avoid making marks beyond the fill-in circles.

Thank you for your time and interest.

COMMENTS *Please ONLY complete the Comments Section if there is additional information you would like to provide.*

If you are unable to complete an investigation for any child indicated in 6g) or 6h) please explain why

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Comments: Intake information

Comments: Household information

Comments: Child information

First name of child: _____ CPIN number:

First name of child: _____ CPIN number:

First name of child: _____ CPIN number:

First name of child: _____ CPIN number:

First name of child: _____ CPIN number:

First name of child: _____ CPIN number:

This information will remain confidential, and no identifying information will be used outside your own agency.
This tear-off portion of the instrument will be destroyed by the site researcher at this agency/office upon completion of data collection.

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OIS Maltreatment Assessment: Household Information

Please describe household composition at time of referral

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[ ][ ] - [ ][ ] - [ ][ ][ ]

Primary Caregiver : _____

A9. Primary income

○ Full time ○ Seasonal ○ Other benefit
○ Part time (<30 hrs/wk) ○ Employment insurance ○ None
○ Multiple jobs ○ Social assistance ○ Unknown

A10. Ethno-racial

○ White ○ Chinese
○ Black ○ Southeast Asian *(e.g., Vietnamese, Cambodian, Malaysian, Laotian)*
○ Aboriginal ○ Filipino
○ Latin American ○ Japanese
○ Arab ○ Korean
○ West Asian *(e.g., Iranian, Afghan)* ○ Other: _____
○ South Asian *(e.g., East Indian, Pakistani, Sri Lankan)*

A11a) If Aboriginal ○ On reserve ○ Off reserve
b) ○ First Nations status ○ First Nations non-status ○ Métis
○ Inuit ○ Other: _____

A12. Primary language ○ English ○ French ○ Other: _____

A13. Contact with caregiver in response to investigation

○ Co-operative ○ Not co-operative ○ Not contacted

A14. Caregiver risk factors

	Confirmed	Suspected	No	Unknown
Alcohol abuse	○	○	○	○
Drug/solvent abuse	○	○	○	○
Cognitive impairment	○	○	○	○
Mental health issues	○	○	○	○
Physical health issues	○	○	○	○
Few social supports	○	○	○	○
Victim of intimate partner violence	○	○	○	○
Perpetrator of intimate partner violence	○	○	○	○
History of foster care/group home	○	○	○	○

Second Caregiver in the home : _____

○ No other caregiver in the home

B9. Primary income

○ Full time ○ Seasonal ○ Other benefit
○ Part time (<30 hrs/wk) ○ Employment insurance ○ None
○ Multiple jobs ○ Social assistance ○ Unknown

B10. Ethno-racial

○ White ○ Chinese
○ Black ○ Southeast Asian *(e.g., Vietnamese, Cambodian, Malaysian, Laotian)*
○ Aboriginal ○ Filipino
○ Latin American ○ Japanese
○ Arab ○ Korean
○ West Asian *(e.g., Iranian, Afghan)* ○ Other: _____
○ South Asian *(e.g., East Indian, Pakistani, Sri Lankan)*

B11a) If Aboriginal ○ On reserve ○ Off reserve
b) ○ First Nations status ○ First Nations non-status ○ Métis
○ Inuit ○ Other: _____

B12. Primary language ○ English ○ French ○ Other: _____

B13. Contact with caregiver in response to investigation

○ Co-operative ○ Not co-operative ○ Not contacted

B14. Caregiver risk factors

	Confirmed	Suspected	No	Unknown
Alcohol abuse	○	○	○	○
Drug/solvent abuse	○	○	○	○
Cognitive impairment	○	○	○	○
Mental health issues	○	○	○	○
Physical health issues	○	○	○	○
Few social supports	○	○	○	○
Victim of intimate partner violence	○	○	○	○
Perpetrator of intimate partner violence	○	○	○	○
History of foster care/group home	○	○	○	○

15. Child custody dispute

○ Yes ○ No ○ Unknown

16. Housing

○ Own home ○ Hotel
○ Rental ○ Shelter
○ Public housing ○ Unknown
○ Band housing ○ Other: _____
○ Living with friends/ family

17. Home overcrowded

○ Yes ○ No ○ Unknown

18. Number of moves in past year

○ 0 ○ 1 ○ 2 or more
○ Unknown

19. 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

20. Housing safety

a) Are there unsafe housing conditions?

○ Yes ○ No ○ Unknown

b) If yes, fill in all that apply

○ Mold
○ Broken glass
○ Inadequate heating
○ Accessible drugs or drug paraphernalia
○ Poisons/chemicals
○ Fire/electrical hazards
○ Other: _____

21. Case previously opened for investigation

○ Never ○ 1 time ○ 2-3 times
○ >3 times ○ Unknown

a) If case was previously opened for investigation, how long since the case was closed

○ <3 mo ○ 3-6 mo ○ 7-12 mo
○ 13-24 mo ○ >24 mo

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

○ Yes ○ No

23. Referral(s) for any family member

(Fill in all that apply)

○ No referral made

○ Parent support group
○ In-home family or parent counselling
○ Other family or parent counselling
○ Drug or alcohol counselling
○ Welfare or social assistance
○ Food bank
○ Shelter services
○ Domestic violence services
○ Housing
○ Legal
○ Psychiatric or psychological services
○ Special education placement
○ Recreational services
○ Victim support program
○ Medical or dental services
○ Child or day care
○ Cultural services
○ Speech/language
○ Other: _____

OIS Maltreatment Assessment: Child Information

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First name: _____ 24. Sex ○ Male ○ Female 25. Age ☐☐

26. Ethno-racial

○ White ○ Black ○ Aboriginal ○ Latin American ○ Arab ○ South Asian *(e.g., East Indian, Pakistani, Sri Lankan)*

○ West Asian *(e.g., Iranian, Afghan)* ○ Chinese ○ Southeast Asian *(e.g., Vietnamese, Cambodian, Malaysian, Laotian)* ○ Filipino ○ Japanese ○ Korean ○ Other: _____

27. If Aboriginal ○ First Nations status ○ First Nations non-status ○ Métis ○ Inuit ○ Other: _____

28. Child functioning *(Are you aware if any of the following apply to this child at this point in time?)*
(Fill in each item)

	Confirmed	Suspected	No	Unknown
Depression/anxiety/withdrawal	○	○	○	○
Suicidal thoughts	○	○	○	○
Self-harming behaviour	○	○	○	○
ADD/ADHD	○	○	○	○
Attachment issues	○	○	○	○
Aggression	○	○	○	○
Running (Multiple incidents)	○	○	○	○
Inappropriate sexual behaviour	○	○	○	○
Youth Criminal Justice Act involvement	○	○	○	○

	Confirmed	Suspected	No	Unknown
Intellectual/developmental disability	○	○	○	○
Failure to meet developmental milestones	○	○	○	○
Academic difficulties	○	○	○	○
FAS/FAE	○	○	○	○
Positive toxicology at birth	○	○	○	○
Physical disability	○	○	○	○
Alcohol abuse	○	○	○	○
Drug/solvent abuse	○	○	○	○
Other: _____	○	○	○	○

29. TYPE OF INVESTIGATION
*Please note: all **injury** investigations are maltreatment investigations*

○ Investigated incident of maltreatment
*If you investigated an **incident(s) of maltreatment**, please complete **Column A & B** (question 6g is checked)*

OR

○ Risk investigation only
*If you conducted a **risk investigation only**, please complete **Column B** only (question 6h is checked)*

COLUMN A

30. Insert Maltreatment Codes in the boxes below *(See codes at bottom of page)*
(Enter primary form of maltreatment first)
☐ ☐ ☐

31. Alleged perpetrator *(Fill in all that apply)*

1st	2nd	3rd	
○	○	○	Primary caregiver
○	○	○	Second caregiver
○	○	○	Other

→ If OTHER perpetrator:

a) Age
○ <13 ○ 13-15 ○ 16-20 ○ 21-30
○ 31-40 ○ 41-50 ○ 51-60 ○ >60

b) Sex
○ Male ○ Female

32. Substantiation *(Fill in only one per column)*

1st	2nd	3rd	
○	○	○	Substantiated
○	○	○	Suspected
○	○	○	Unfounded

→ a) If unfounded, was the report a malicious referral?
○ Yes ○ No ○ Unknown

33. Was maltreatment a form of punishment? *(Fill in only one per column)*

1st	2nd	3rd	
○	○	○	Yes
○	○	○	No
○	○	○	Unknown

34. Duration of maltreatment *(Fill in only one per column)*

1st	2nd	3rd	
○	○	○	Single incident
○	○	○	Multiple incidents
○	○	○	Not applicable (unfounded)

35. Police involvement *(Fill in only one per column)*

1st	2nd	3rd	
○	○	○	Investigation
○	○	○	Charges
○	○	○	None
○	○	○	Unknown

36. If any maltreatment is substantiated or suspected, is mental or emotional harm evident?
○ Yes ○ No
a) If yes, child requires therapeutic treatment
○ Yes ○ No

37. Physical harm
a) Is physical harm evident?
○ Yes ○ No
If YES, please complete b) and c)
b) Types of physical harm *(Fill in all that apply)*
○ Bruises, cuts or scrapes
○ Broken bones ○ Fatal
○ Burns and scalds ○ Health condition: _____ *(Please specify)*
○ Head trauma
c) Was medical treatment required?
○ Yes ○ No

COLUMN B

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) If yes, was the maltreatment substantiated?
○ Yes ○ No ○ Unknown

40. Placement
a) Placement during investigation
○ Yes ○ No ○ Considered
b) If yes, placement type
○ Kinship out of care ○ Group home
○ Customary care ○ Residential or secure treatment
○ Kinship in care ○ Other: _____ *(Please specify)*
○ Foster care (non-kinship)

41. Child welfare court application
○ Yes ○ No ○ Considered
a) Referral to mediation/alternative response
○ Yes ○ No

42. Caregiver(s) used spanking in the last 6 months
○ Yes ○ No ○ Suspected ○ Unknown

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Please use these maltreatment codes to answer Question 30
Maltreatment codes

Physical abuse
1 - Shake, push, grab or throw
2 - Hit with hand
3 - Punch, kick or bite
4 - Hit with object
5 - Choking, poisoning, stabbing
6 - Other physical abuse

Sexual abuse
7 - Penetration
8 - Attempted penetration
9 - Oral sex
10 - Fondling
11 - Sex talk or images
12 - Voyeurism
13 - Exhibitionism
14 - Exploitation
15 - Other sexual abuse

Neglect
16 - Failure to supervise: physical harm
17 - Failure to supervise: sexual abuse
18 - Permitting criminal behaviour
19 - Physical neglect
20 - Medical neglect (includes dental)
21 - Failure to provide psych. treatment
22 - Abandonment
23 - Educational neglect

Emotional maltreatment
24 - Terrorizing or threat of violence
25 - Verbal abuse or belittling
26 - Isolation/confinement
27 - Inadequate nurturing or affection
28 - Exploiting or corrupting behaviour

Exposure to Intimate Partner Violence
29 - Direct witness to physical violence
30 - Indirect exposure to physical violence
31 - Exposure to emotional violence
32 - Exposure to non-partner violence

Appendix E

OIS -2013 GUIDEBOOK

The following is the OIS-2013 Guidebook used by child welfare workers to assist them in completing the Maltreatment Assessment Form.

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

OIS-2013 Guidebook

BACKGROUND

The *Ontario Incidence Study of Reported Child Abuse and Neglect 2013* (*OIS-2013)* is the fifth provincial study of reported child abuse and neglect investigations in Ontario. Results from the previous four 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-2013* is funded by the Ministry of Children and Youth 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 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 (see http://cwrp.ca/OIS2013_hub for Site Researcher contact information).

OBJECTIVES

The primary objective of the *OIS-2013* is to provide reliable estimates of the scope and characteristics of reported child abuse and neglect in Ontario, in 2013. 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, and 2013 rates of substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to intimate partner violence; the 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, 2013, and December 31, 2013. In larger agencies, a random sample of 250 investigations will be selected for inclusion in the study.

OIS MALTREATMENT ASSESSMENT FORM

The *OIS Maltreatment Assessment Form* was designed to capture standardized information from child welfare investigators on the results of their investigations. It consists of four yellow legal-sized pages with "Ontario Incidence Study of Reported Child Abuse and Neglect 2013" marked on the top of the front sheet.

The *OIS Maltreatment Assessment Form* comprises four sheets: an *Intake Face Sheet*, a *Comment Sheet* (which is on the back of the *Intake Face Sheet*), a *Household Information Sheet*, and two *Child Information Sheets*. One *Child Information Sheet* must be completed for each investigated child and extra child sheets can be added for cases involving more than two investigated children. Children living in the household, who are not the subject of an investigation, should be listed on the *Intake Face Sheet*, although *Child Information Sheets* should not be completed for them. The form takes ten to fifteen minutes to complete, depending on the number of children investigated in the household.

The *OIS Maltreatment Assessment Form* examines a range of family, child, and case status variables. These variables include source of referral, caregiver demographics, household composition, key caregiver functioning issues, housing and home safety. 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

Three models of data collection will be offered to participating agencies: the *Site Researcher Training Model*, the *Agency Support Model* and the *Combination Model*. In addition to these models, the research team is flexible and can determine a unique data collection plan based on specific agency needs.

1) For agencies that select the *Site Researcher Training Model,* a training session will be held in October 2013 for all workers involved in the study. With this model, the Site Researcher will visit the agency/office prior to the data collection period to administer training and will continue to make regular visits during the data collection process, although workers will complete the *OIS Maltreatment Assessment Form* independently. On-site visits will allow the Site Researcher to collect forms and resolve any issues that may arise.

2) For agencies that select the *Agency Support Model,* the Site Researcher will visit the agency/office regularly during the data collection period in order to provide face-to-face assistance to workers in completing the *OIS Maltreatment Assessment Form* in addition to verifying and collecting forms and attending to issues that may arise.

3) For agencies that select the *Combination Model,* both training and face-to-face support to workers in completing the *OIS Maltreatment Assessment Form* will be provided.

CONFIDENTIALITY

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

To guarantee client confidentiality, all near-identifying information (located at the bottom of the *Intake Face Sheet*) will be coded at your agency/office. Near-identifying information is data that could potentially identify a household (e.g., agency/office case file number, the first two letters of the primary caregiver's surname and the first names of the children in the household). This information is required for purposes of data verification only. This tear-off portion of the *Intake Face Sheet* will be stored in a locked area at your agency/office until the study is completed, and then will be destroyed.

The completed *OIS Maltreatment Assessment Form* (with all identifying information removed) will be sent to the University of Toronto site for data entry and will then be kept under double lock (a locked RCMP–approved filing cabinet in a locked office). Access to the forms for any additional verification purposes will be restricted to select research team members authorized by the Ministry of Children and Youth Services.

Published analyses will be conducted at the provincial level. **No agency/office, worker or team-specific data will be made available to anyone, under any circumstances.**

COMPLETING THE OIS MALTREATMENT ASSESSMENT FORM

The *OIS Maltreatment Assessment Form* 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 four weeks of the date the case was opened.

It is essential that **all items** on the *OIS Maltreatment Assessment Form* applicable to the specific investigation be completed. Use the "Unknown" response if you are unsure. If the categories provided do not adequately describe a case, provide additional information on the *Comment Sheet*. If you have any questions during the study, contact your Site Researcher.

FREQUENTLY ASKED QUESTIONS

1. FOR WHAT CASES SHOULD I COMPLETE AN *OIS MALTREATMENT ASSESSMENT FORM*?

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-2013*. Workers will be informed if any of their investigations will be included in the OIS sample.

In smaller agencies, information will be collected on all child maltreatment-related investigations opened during the three-month period between October 1, 2013, and December 31, 2013. Generally, if your agency/office counts an investigation in its official opening statistics reported to the Ministry of Children and Youth Services, then the case is included in the sample and an *OIS Maltreatment Assessment Form* should be completed, unless your Site Researcher indicates otherwise.

In larger agencies, a random sample of 250 investigations will be selected for inclusion in the study. Workers in large agencies will be provided with a case list of all selected cases, and should complete an *OIS Maltreatment Assessment Form* for all cases selected through this random selection process.

2. SHOULD I COMPLETE A FORM FOR ONLY THOSE CASES WHERE ABUSE AND/OR NEGLECT ARE SUSPECTED?

Complete an *Intake Face Sheet* and the tear-off portion of the *Intake Face Sheet* for all cases opened during the case selection period at your agency/office (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) or for all cases identified in the random selection process.

If maltreatment was alleged at any point during the investigation, complete the remainder of the *OIS Maltreatment Assessment Form* (both the *Household Information* and *Child Information Sheets*). Maltreatment may be alleged by the person(s) making the report, or by any other person(s), including yourself, during the investigation (e.g., complete an *OIS Maltreatment Assessment Form* 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 a *Household Information Sheet* and relevant items on the *Child Information Sheet* (questions 24 through 29, and Column B) for any child for whom you conducted a risk assessment. For risk assessments only, do not complete the questions regarding a specific event or incident of maltreatment (Column A).

3. SHOULD I COMPLETE AN *OIS MALTREATMENT ASSESSMENT FORM* ON SCREENED-OUT CASES?

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

4. WHEN SHOULD I COMPLETE THE *OIS MALTREATMENT ASSESSMENT FORM*?

Complete the *OIS Maltreatment Assessment Form* at the same time that you prepare the report for your agency/office that documents the conclusions of the investigation (usually within four weeks 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 form to the best of your abilities.

5. WHO SHOULD COMPLETE THE *OIS MALTREATMENT ASSESSMENT FORM* IF MORE THAN ONE PERSON WORKS ON THE INVESTIGATION?

The *OIS Maltreatment Assessment Form* 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 Form.*

6. WHAT SHOULD I DO IF MORE THAN ONE CHILD IS INVESTIGATED?

The *OIS Maltreatment Assessment Form* primarily focuses on the household; however, the *Child Information Sheet* is specific to the individual child being investigated. **Complete one child sheet 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 Sheet* for that child. Additional pads of *Child Information Sheets* are available at your agency.

7. WILL I RECEIVE TRAINING FOR THE *OIS MALTREATMENT ASSESSMENT FORM*?

Depending on the data collection method selected by your agency, all workers will either receive training prior to the start of the data collection period or will receive support by the research team in completing the *OIS Maltreatment Assessment Form* during the data collection period. If a worker is unable to attend the training session or agency support days or is hired after the start of the OIS-2013, he or she should contact the Site Researcher regarding any questions about the form (see http://cwrp.ca/OIS2013_hub for Site Researcher contact information).

8. WHAT SHOULD I DO WITH THE COMPLETED FORMS?

Give the completed *OIS Maltreatment Assessment Form* to your Agency/Office Contact Person. All forms will be reviewed by the Site Researcher during a site visit, and should he or she have additional questions, he or she will contact you during this visit. If you do not know who your Agency/Office Contact Person is, contact your Site Researcher (see http://cwrp.ca/OIS2013_hub for Site Researcher contact information).

9. IS THIS INFORMATION CONFIDENTIAL?

The information you provide is confidential, and no identifying information will leave your agency/office. Your Site Researcher will code any near-identifying information from the bottom portion of the *Intake Sheet.* Where a name has been asked for, the Site Researcher will black out the name prior to the form leaving your agency/office. Please refer to the section above on confidentiality.

DEFINITIONS: *INTAKE FACE SHEET*

QUESTION 1: DATE CASE OPENED

This refers to the date the case was opened. Please fill in date using dd/mm/yy format.

QUESTION 2: SOURCE OF ALLEGATION/REFERRAL

Fill in 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 fill in the circle for this referral as "School." There was only one contact and referral in this case. If a second source (neighbour) contacted the child welfare authority and also reported a concern for this child, then you would also fill in the circle 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 on the *Intake Face Sheet* of the *OIS Maltreatment Assessment Form*.
- **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 OR 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). If the reason for the case opening was not for alleged or suspected maltreatment, describe the reason (e.g., adoption home assessment, request for information).

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. Provide each caregiver's age and sex in the space indicated.

QUESTION 6: LIST ALL CHILDREN IN THE HOME (<16 YEARS)

Include biological, step-, adoptive and foster children.

a) **List first names of *all* children (<16 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.
b) **Age of child:** Indicate the age of each child living in the home at the time of the referral. Use 00 for children younger than 1.
c) **Sex of child:** Indicate the sex of each child in the home.
d) **Primary caregiver's relationship to child:** Describe the primary caregiver's relationship to each child, using the codes provided.
e) **Second caregiver's relationship to child:** Describe the second caregiver's relationship to each child (if applicable), using the codes provided. Describe the second caregiver only if the caregiver is in the home.
f) **Subject of referral:** Indicate which children were noted in the initial referral.
g) **Investigated incident of maltreatment:** Indicate if the child was investigated because of an allegation of maltreatment. In jurisdictions that require that all children be routinely interviewed for an investigation, include only those children where, in your clinical opinion, maltreatment was alleged or you investigated an incident or event of maltreatment (e.g., include three siblings ages 5 to 12 in a situation of chronic neglect, but do not include the 3-year-old brother of a 12-year-old girl who was sexually abused by someone who does not live with the family and has not had access to the younger sibling).

h) **Risk investigation only:** Indicate if the child was investigated because of **risk of maltreatment only**. Include only situations in which **no allegation** of maltreatment was made, and **no specific incident of maltreatment** was suspected at any point during the investigation (e.g., include referrals for parent–teen conflict; child behaviour problems; parent behaviour such as substance abuse, where there is a risk of future maltreatment but no concurrent allegations of maltreatment). 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).

QUESTION 7: OTHER ADULTS IN THE HOME

Fill in all categories that describe adults (excluding the primary and second caregivers) who lived in the house at the time of the referral to child welfare. Note that children (<16 years of age) in the home have already been described on the *Intake Face Sheet*. If there have been recent changes in the household, describe the situation **at the time of the referral.** Fill in 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 child(ren). Fill in all that apply.

TEAR-OFF PORTION OF *INTAKE FACE SHEET*

The near-identifying information on the tear-off section will be kept securely at your agency/office, for purposes of verification. It will be destroyed at the conclusion of the study.

WORKER'S NAME

This refers to the person completing the form. When more than one individual is involved in the investigation, the individual with overall case responsibility should complete the *OIS Maltreatment Assessment Form*.

FIRST TWO LETTERS OF PRIMARY CAREGIVER'S SURNAME

Use the reference name used for your agency/office filing system. In most cases this will be the primary caregiver's last name. If another name is used in the agency/office, include it under "Other family surname" (e.g., if a parent's surname is "Thompson," and the two children have the surname of "Smith," then put "TH" **and** "SM"). **Use the first two letters of the family name only. Never fill in the complete name.**

CASE NUMBER

This refers to the case number used by your agency/office.

DEFINITIONS: *COMMENT SHEET*

The back of the *Intake Face Sheet* provides space for additional comments about an investigation and there is also space provided at the top for situations where an investigation or/assessment was unable to be completed for children indicated in 6a).

DEFINITIONS: *HOUSEHOLD INFORMATION SHEET*

The *Household Information Sheet* 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 second caregiver if there are two adults/caregivers living in the household (the same caregivers identified on the *Intake Face Sheet*).

If you have a unique circumstance that does not seem to fit the categories provided, write a note on the *Comment Sheet* under "Comments: Household information."

Questions A9–A14 pertain to the primary caregiver in the household. If there was a second caregiver in the household at the time of referral, complete questions B9–B14 for the second caregiver. If both caregivers are equally engaged in parenting, identify the caregiver you have had most contact with as the primary caregiver. If there was only one caregiver in the home at the time of the referral, endorse "no other caregiver in the home" under "second caregiver in the home" at the top right of the *Household Information Sheet.*

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 second 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 activity are apparent, specify on *Comment Sheet* under "Comments: Household information."
- **Unknown:** Check this box if 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 2011 Census.

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

QUESTION 11: IF ABORIGINAL

a) **On or off reserve:** Identify if the caregiver is residing "on" or "off" reserve.
b) **Caregiver's status: First Nations status** (caregiver has formal Indian or treaty status, that is, registered with Aboriginal Affairs and Northern Development Canada [formerly INAC]), **First Nations non-status**, **Métis**, **Inuit** or **Other** (specify and use the *Comment Sheet* if necessary).

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 second caregiver, and are to be rated as "Confirmed," "Suspected," "No," or "Unknown." Fill in "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. Use the "Suspected" category if your suspicions are sufficient to include in a written assessment of the household or a transfer summary to a colleague. Fill in "No" if you do not believe there is a problem and "Unknown" if you are unsure or have not attempted to determine if there was such a caregiver 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.

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:** Aboriginal 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 accommodations.
- **Shelter:** A homeless or family shelter.
- **Unknown:** Housing accommodation is unknown.
- **Other:** Specify any other form of shelter.

QUESTION 17: HOME OVERCROWDED

Indicate if household is made up of multiple families and/or is overcrowded.

QUESTION 18: 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 19: IN THE LAST 6 MONTHS, HOUSEHOLD RAN OUT OF MONEY FOR:

a) **Food:** Indicate if the household ran out of money to purchase food at any time in the last 6 months.
b) **Housing:** Indicate if the household ran out of money to pay for housing at any time in the last 6 months.
c) **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).

QUESTION 20: HOUSING SAFETY

a) **Are there unsafe housing conditions?** Indicate if there were unsafe housing conditions at the time of referral.
b) **If yes, fill in all that apply.** If there are unsafe housing conditions, fill in all conditions that apply.

- **Mold:** The presence of mold in the living environment poses a health risk to the child.
- **Broken glass:** The presence of broken glass in the living environment poses a risk of injury to the child.
- **Inadequate heating:** The absence of adequate heating in the living environment poses a health risk to the child.
- **Accessible drugs or drug paraphernalia:** Illegal or legal drugs stored in such a way that a child might access and ingest them, or needle**s** stored in such a way that a child may access them.
- **Poisons/chemicals:** Poisons and/or chemicals stored in such a way that a child might access and ingest or touch them.

- **Fire/electrical hazards:** The presence of fire and/or electrical hazards in the living environment (e.g., no smoke detector, frayed or worn electrical cords).
- **Other:** Specify any other unsafe housing condition(s).

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 on the *Intake Face Sheet*).

a) If case was previously opened for investigation, how long since the case was closed
How many months between the date the case was last closed and this current investigation opening date? Please round the length of time to nearest month and select the appropriate category.

QUESTION 22: CASE WILL STAY OPEN FOR ON-GOING CHILD WELFARE SERVICES

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

QUESTION 23: REFERRAL(S) FOR ANY FAMILY MEMBER

Indicate referrals that have been made to programs designed to offer services beyond the parameters of "on-going child welfare services." Include referrals made internally to a special program provided by your agency/office as well as referrals made externally to other agencies/services. Note whether a referral was made and is part of the case plan, not whether the young person or family has actually started to receive services. Fill in all that apply.

- **No referral made:** No referral was made to any programs.
- **Parent support group:** Any group program designed to offer support or education (e.g., Parents Anonymous, Parenting Instruction Course, Parent Support Association).
- **In-home family or parent counselling:** Home-based services designed to support families, reduce risk of out-of-home placement, or reunify children in care with their families.
- **Other family or parent counselling:** Refers to any other type of family or parent support or counselling not identified as "parent support group" or "in-home family/parenting counseling" (e.g., couples or family therapy).
- **Drug or alcohol counselling:** Addiction program (any substance) for caregiver(s) or children.
- **Welfare or social assistance:** Referral for social assistance to address financial concerns of the household.
- **Food bank:** Referral to any food bank.
- **Shelter services:** Regarding domestic violence or homelessness.
- **Domestic violence services:** Referral for services/counselling regarding domestic violence, abusive relationships or the effects of witnessing violence.
- **Housing:** Referral to a social service organization that helps individuals access housing (e.g., housing help center).
- **Legal:** Referral to any legal services (e.g., police, legal aid, lawyer, family court).

- **Psychiatric or psychological services:** Child or parent referral to psychological or psychiatric services (e.g., trauma, high risk behaviour or intervention).
- **Special education placement:** 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).
- **Victim support program:** Referral to a victim support program (e.g., sexual abuse disclosure group).
- **Medical or dental services:** Any specialized service to address the child's immediate medical or dental health needs.
- **Child or day care:** Any paid child or day care services, including staff-run and in-home services.
- **Cultural services:** Services to help children or families strengthen their cultural heritage.
- **Speech/language:** Referral to speech/language services (e.g., speech/language specialist).
- **Other:** Indicate and specify any other child- or family-focused referral.

DEFINITIONS: CHILD INFORMATION SHEET

QUESTION 24: CHILD NAME AND SEX

Indicate the first name and sex of the child for which the *Child Information Sheet* is being completed. Note this is for verification only.

QUESTION 25: AGE

Indicate the child's age. Use 00 for children younger than one year of age.

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 2011 Census.

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

QUESTION 27: IF ABORIGINAL

Indicate the Aboriginal status of the child for which the *OIS Maltreatment Assessment Form* is being completed: **First Nations status** (child has formal Indian or treaty status, that is, is registered with Aboriginal Affairs and Northern Development Canada [formerly INAC]), **First Nations non-status**, **Métis**, **Inuit** or **Other** (specify and use the *Comment Sheet* if necessary).

QUESTION 28: CHILD FUNCTIONING

This section focuses on issues related to a child's level of functioning. Fill in "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 parent 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. Fill in "No" if you do not believe there is a problem and

"Unknown" if you are unsure or have not attempted to determine if there was such a child functioning issue. Where appropriate, use the **past six months** as a reference point.

- **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.
- **Suicidal thoughts:** The child has expressed thoughts of suicide, ranging from fleeting thoughts to a detailed plan.
- **Self-harming behaviour:** Includes high-risk or life-threatening behaviour, suicide attempts, and physical mutilation or cutting.
- **ADD/ADHD:** ADD/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.
- **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.
- **Aggression:** 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.
- **Running (Multiple incidents):** The child has run away from home (or other residence) on multiple occasions for at least one overnight period.
- **Inappropriate sexual behaviour:** Child displays inappropriate sexual behavior, including age-inappropriate play with toys, self or others; displaying explicit sexual acts; age-inappropriate sexually explicit drawing and/or descriptions; sophisticated or unusual sexual knowledge; prostitution or seductive behaviour.
- ***Youth Criminal Justice Act* involvement:** Charges, incarceration or alternative measures with the youth justice system.
- **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 disorders).
- **Failure to meet developmental milestones:** Children who are not meeting their development milestones because of a non-organic reason.
- **Academic difficulties:** Includes learning disabilities that are usually identified in school, as well as any special education program for learning difficulties, special needs, or behaviour problems. Children with learning disabilities have normal or above-normal intelligence, but deficits in one or more areas of mental functioning (e.g., language usage, numbers, reading, work comprehension).
- **FAS/FAE:** 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.
- **Positive toxicology at birth:** When a toxicology screen for a newborn tests positive for the presence of drugs or alcohol.
- **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.
- **Alcohol abuse:** Problematic consumption of alcohol (consider age, frequency and severity).
- **Drug/solvent abuse:** Include prescription drugs, illegal drugs and solvents.
- **Other:** Specify any other conditions related to child functioning; your responses will be coded and aggregated.

QUESTION 29: TYPE OF INVESTIGATION

Indicate if the investigation was conducted for a **specific incident of maltreatment**, or if it was conducted to assess **risk of maltreatment only**. Refer to question 6 g) and h) for a detailed description of an "incident of maltreatment" versus a "risk investigation only". If this is a risk investigation only, please complete column B only (questions 38 to 42).

Please note: all **injury** investigations are maltreatment investigations (complete column A and B).

QUESTION 30: MALTREATMENT CODES

The maltreatment typology in the *OIS-2013* 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.

Select the applicable maltreatment codes from the list provided (1–32) on the tear off portion of the bottom of the *Child Information Sheet*, and write these numbers **clearly** 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**.

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

- **Penetration:** Penile, digital or object penetration of vagina or anus.
- **Attempted penetration:** Attempted penile, digital, or object penetration of vagina or anus.
- **Oral sex:** Oral contact with genitals either by perpetrator or by the child.
- **Fondling:** Touching or fondling genitals for sexual purposes.
- **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).
- **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.
- **Exhibitionism:** Include activities where the perpetrator is alleged to have exhibited himself or herself for his or her own sexual gratification.
- **Exploitation:** Include situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.
- **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.

- **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).
- **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.
- **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.
- **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.
- **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.

- **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, or refuses, or is unavailable, or unable to consent to treatment to remedy or alleviate the harm. This category includes failing to provide treatment for school-related problems such as learning and behaviour problems, as well as treatment for infant development problems such as non-organic failure to thrive. A parent awaiting service should not be included in this category.
- **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.
- **Educational neglect:** Caregivers knowingly permit chronic truancy (5+ days a month), or 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.

- **Terrorizing or threat of violence:** A climate of fear, placing the child in unpredictable or chaotic circumstances, bullying or frightening a child, threats of violence against the child or child's loved ones or objects.
- **Verbal abuse or belittling:** Non-physical forms of overtly hostile or rejecting treatment. Shaming or ridiculing the child, or belittling and degrading the child.
- **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.
- **Inadequate nurturing or affection:** Through acts of omission, does not provide adequate nurturing or affection. Being detached, uninvolved; failing to express affection, caring and love, and interacting only when absolutely necessary.
- **Exploiting or corrupting behaviour:** The adult **permits or encourages** the child to engage in destructive, criminal, antisocial, or deviant behaviour.

Exposure to Intimate Partner Violence

- **Direct witness to physical violence:** The child is physically present and witnesses the violence between intimate partners.
- **Indirect exposure to physical violence:** Includes situations where the child overhears but does not see the violence between intimate partners; or 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.
- **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.
- **Exposure to non-partner physical violence:** A 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 who is alleged, suspected or guilty of maltreatment toward the child. Fill in the appropriate perpetrator for each form of identified maltreatment as the primary caregiver, second caregiver or "Other." If "Other" is selected, specify the relationship of the alleged perpetrator to the child (e.g., brother, uncle, grandmother, teacher, doctor, stranger, classmate, neighbour, family friend). If you select "Primary caregiver" or "Second caregiver," write in a short descriptor (e.g., "mom," "dad," or "boyfriend") to allow us to verify consistent use of the label between the *Household Information* and *Child Information Sheets*. 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, fill in 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, identify

a) **Age:** If the alleged perpetrator is "Other," indicate the age of this individual. Age is essential information used to distinguish between child, youth and adult perpetrators. If there are multiple alleged perpetrators, describe the perpetrator associated with the primary form of maltreatment.
b) **Sex:** Indicate the sex of the "Other" alleged perpetrator.

QUESTION 32: SUBSTANTIATION (fill in only one substantiation level per column)

Indicate the level of substantiation at this point in your investigation. Fill in only one level of substantiation per column; each column reflects a separate form of investigated maltreatment, and thus should include only one substantiation outcome.

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

QUESTION 33: WAS MALTREATMENT A FORM OF PUNISHMENT?

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

QUESTION 34: DURATION OF MALTREATMENT

Check the duration of maltreatment as it is known at this point of time in your investigation. This can include a single incident or multiple incidents. If the maltreatment type is unfounded, then the duration needs to be listed as "Not Applicable (Unfounded)."

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:** Fill in 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) on the *Household Information Sheet*.

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.

b) If yes, 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 Aboriginal 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:** 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.
- **Other:** Specify any other placement type.

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. Select one category only.

a) Referral to mediation/alternative response: Indicate whether a referral was made to mediation, family group conferencing, an Aboriginal 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.

Appendix F

SELECT VARIANCE ESTIMATES AND CONFIDENCE INTERVALS

The following is a description of the method employed to develop the sampling error estimation for the OIS-2013. As well as the variance estimates and confidence intervals for the OIS-2013 estimates. Variance estimates are provided for select tables in this report.

SAMPLING ERROR ESTIMATION

The OIS-2013 uses a multi stage, random sample survey method to estimate the incidence and characteristics of cases of reported child abuse and neglect across the country. The study estimates are based on the core OIS-2013 sample of 5,265 child investigations drawn from a total population of 3,086 family cases open for service in Ontario.

The size of this sample ensures that estimates for figures such as the overall rate of reported maltreatment, substantiation rate, and primary categories of maltreatment have a reasonable margin of error. However, the margin of error increases for estimates involving less frequent events, such as the number of children placed in a group home. Such estimates should be interpreted as providing a rough idea of the relative scope of the problem rather than a precise number of cases.

Appendix F tables provide the margin of error for selected OIS-2013 estimates. For example, the estimated number of child maltreatment investigations in Ontario is 125,281. The lower 95 per cent confidence interval is 69,642 child investigations and the upper confidence interval is 180,920 child investigations. This means that there is a 95 per cent chance that the true number of substantiated maltreatment is between 69,642 and 180,920.

The error estimates do not account for any errors in determining the annualization and regionalization weights. Nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from site to site. The error estimates also cannot account for any variations due to seasonal effects. The accuracy of these annual estimates depends on the extent to which the sampling period is representative of the whole year[1].

To assess the precision of the OIS-2013 estimates, sampling errors were calculated from the sample with reference to the fact that the survey is unstratified. Thirteen child welfare agencies were sampled randomly and

[1] Using Statistics Canada's method of assessing seasonality, the OIS team found that the average absolute difference between annual counts and estimates based on Oct-Dec openings was under 3% for all forms of maltreatment with the exception of sexual abuse where the average absolute difference was closer to 5% (Sexual abuse was the primary concern in an estimated 848 substantiated investigations in Ontario in 2013, adjusting for the seasonal effect would mean that the annual count would be closer to 900).

four others with certainty. Strata are usually created through the cross-classification of variables contained on the sampling frame, which are known or believed to correlate with key survey variables[2]. As the variables of interest here are only total counts of events, it was deemed more appropriate to sample randomly.

The sampling variability that was calculated was the variability due to the randomness of the units selected. Had different units been selected, then a different estimate would have been obtained. The sampling variance, or error, calculated is an attempt to measure this variability. Thus, the measured variability is due to the sampling. We did not measure the variability, however, because only three months were sampled, not a full year, and in some situations only every second case was sampled.

To calculate the variance, the method of replicate weights is used. The estimated population of incidences $(\hat{t})$ with the characteristic of interest is:

$$\hat{\tau} = \sum_{h=1}^{H} \hat{\tau}_h$$

Where $\hat{t}_h$ is the population of incidences with the characteristic of interest for the hth stratum.

where:

$$\hat{\tau}_h = \sum_i w_h y_{hi}$$

w_h is the weight for the hth stratum

y_{hi} is 1 if the ith unit (case) in stratum h has the characteristic of interest, is 0 if the ith unit (case) in stratum h does not have the characteristic of interest, and we sum over all the i units (cases) in the hth stratum. Here stratum one is the random sample of 13 agencies, and stratum two includes the agencies sampled with certainty.

The jackknife method of variance estimation uses replicate samples. Replicates are formed by deleting one unit at a time and multiplying the weights for the other units by G/(G − 1) where G is the number of replicates[3]. In the present case, 13 replicate samples are constructed and provide the variability in estimates needed to produce standard errors of total counts.

The following are select variance estimates and confidence intervals for OIS-2013 variables of interest. Each table reports the estimate, standard error, coefficient of variation, lower and upper confidence interval.

[2] Analysing Complex Survey Data: Clustering, Stratification and Weights, Patrick Sturgis, Social Research Update, 43:2004.

[3] WESVAR: Software For Complex Survey Data Analysis, Choudhry & Richard Valliant, Proceedings of Statistics Canada Symposium: Modelling Survey Data for Social and Economic Research, 2002.

APPENDIX F - TABLE 3-1: Number and Rate of Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

Number of Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Number of Investigations	125,281	28,387	22.66	69,642	180,920
Rate per 1,000 children	53.22	12.06	22.66	29.58	66.00

APPENDIX F - TABLE 3-2: Age of Children in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

Child Age Group	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
<1 year	7,915	1,931.62	24.40	4,129	11,701
Rate per 1,000 children	58.44	14.26	24.40	30.49	86.39
1-3 years	21,801	5,262.02	24.14	11,487	32,115
Rate per 1,000 children	51.25	12.37	24.14	27.00	75.50
4-7 years	36,730	8,272.68	22.52	20,516	52,944
Rate per 1,000 children	64.29	14.48	22.52	35.91	92.67
8-11 years	29,907	6,850.49	22.90	16,480	43,334
Rate per 1,000 children	51.48	11.79	22.90	28.37	74.59
12-15 years	28,928	6,704.68	23.18	15,787	42,069
Rate per 1,000 children	45.45	10.53	23.18	24.80	66.10

APPENDIX F - TABLE 3-3: Substantiation Decisions in Ontario in 2013

Maltreatment and Risk Only Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Substantiated Maltreatment	43,067	7,373	12.84	28,616	57,518
Rate per 1,000 children	18.33	3.14	12.84	12.18	24.48
Risk of Future Maltreatment	5,089	1,384	27.30	2,377	7,801
Rate per 1,000 children	2.17	0.59	27.30	1.01	3.33

APPENDIX F - TABLE 3-4: Referral Source in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

Referral Source	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Any Non-Professional	25,465	5,671	2.28	14,350	36,580
Rate per 1,000 children	10.84	2.41	2.28	6.11	15.57
Any Professional	93,467	24,694	26.33	45,066	141,868
Rate per 1,000 children	39.78	10.51	26.33	19.18	60.38
Other/Anonymous	9,104	2,470	27.17	4,263	13,945
Rate per 1,000 children	3.87	1.05	27.17	1.81	5.93

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 2013

Provision of Ongoing Services	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Case to Stay Open for Ongoing Services	30,836	6,228	20.19	18,629	43,043
Rate per 1,000 children	13.12	2.65	20.19	7.93	18.31
Case to be Closed	92,327	22,030	23.86	49,148	135,506
Rate per 1,000 children	39.29	9.38	23.86	20.92	57.67

APPENDIX F - TABLE 3-6: Placement in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

Placement Status	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Remained at Home	121,020	27,964	23.04	66,211	175,829
Rate per 1,000 children	51.50	11.90	23.04	28.18	74.82
Informal kinship care	1,874	469	24.14	956	2,792
Rate per 1,000 children	0.80	0.20	24.14	0.41	1.19
Foster Care	2,105	468	22.71	1,188	3,022
Rate per 1,000 children	0.90	0.20	22.71	0.51	1.29
Group Home/Residential Secure Treatment	282	235	44.81	-179	743
Rate per 1,000 children	0.12	0.10	44.81	-0.08	0.32

APPENDIX F - TABLE 3-7: History of Previous Investigations in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

Previous Investigations	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Previously Investigated	71,038	15,744	22.10	40,179	101,897
Rate per 1,000 children	30.23	6.70	22.10	17.10	43.36
Child Not Previously Investigated	53,360	13,628	25.53	26,649	80,071
Rate per 1,000 children	22.71	5.80	25.53	11.34	34.08
Unknown	883	232	37.61	428	1,338
Rate per 1,000 children	0.38	0.10	37.61	0.18	0.58

APPENDIX F - TABLE 3-8: Applications to Child Welfare Court in Child Maltreatment Investigations and Risk of Future Maltreatment Investigations in Ontario in 2013

Application to Child Welfare Court	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Court Considered	122,062	27,746	22.73	67,679	176,445
Rate per 1,000 children	51.95	11.81	22.73	28.80	75.10
Application Made	3,220	757	23.51	1,737	4,703
Rate per 1,000 children	1.37	0.32	23.51	0.74	2.00

APPENDIX F - TABLE 4-1: Primary Category of Substantiated Maltreatment in Ontario in 2013

Primary Category of Maltreatment	Estimate	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Physical Abuse	5,770	1,736	30.29	2,368	9,172
Rate per 1,000 children	2.46	0.74	30.29	1.01	3.91
Sexual Abuse	848	235.56	27.86	386	1,310
Rate per 1,000 children	0.36	0.10	27.86	0.16	0.56
Neglect	10,386	2,138	20.59	6,195	14,577
Rate per 1,000 children	4.42	0.91	20.59	2.64	6.20
Emotional Maltreatment	5,620	1,740	31.10	2,209	9,031
Rate per 1,000 children	2.39	0.74	31.10	0.94	3.84
Violence	20,443	5,898	28.88	8,883	32,003
Rate per 1,000 children	8.70	2.51	28.88	3.78	13.62